



Al-Mustaqbal University College
Pharmacy Department – Fifth Class
Clinical Chemistry



Specimen Collection



First Lec.

Asst. Lec. ZAINAB GHALEB

Out Line

- ❑ Introduction of Clinical Chemistry.
- ❑ Collection of Blood Samples.
- ❑ Types of Blood Samples.
- ❑ Anticoagulants.
- ❑ Types of Anticoagulants.
- ❑ Beer – Lambert Law.



Introduction

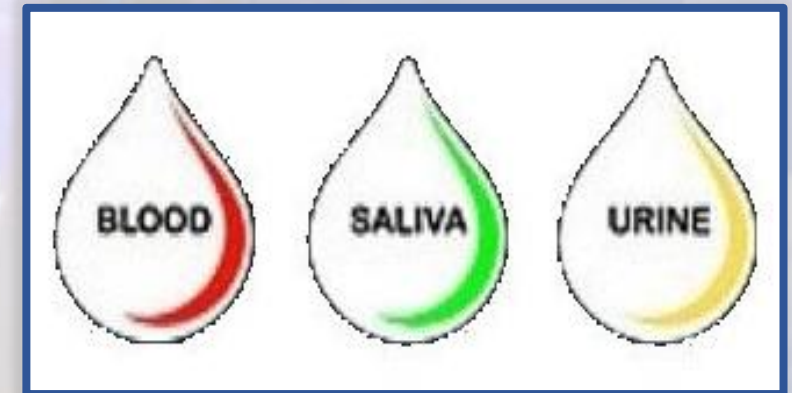
What is Clinical Chemistry?

- ❑ **Clinical Chemistry** is the branch of laboratory medicine that focuses primarily on Molecules.
- ❑ The tests in a Clinical Chemistry lab measure **concentrations** of biologically important **ions (salts & minerals)**, **small organic molecules** and **large macromolecules (primarily proteins)**.



The function of Clinical Chemistry Labs is:

□ Perform Quantitative and Qualitative tests of Body Fluids such as (**Blood, Urine, CSF**), as well as **Feces, Calculi, Tissues** and other materials.



□ Help in **Diagnosis** and **Treatment** of diseases therefore these tests must be done as **accurately** as possible.

Combinations of Tests (Panel):

- ❑ When an individual test alone is **not sufficient** to assess a medical condition, a combination of **several tests** may be used.
- ❑ The pattern of results from the combination of tests may provide better insight into the status of the patient than any single test result.
- ❑ Such tests, done on the same sample, are **often ordered as a group** called a **panel** or **profile**.

Examples:

LIPID PROFILE

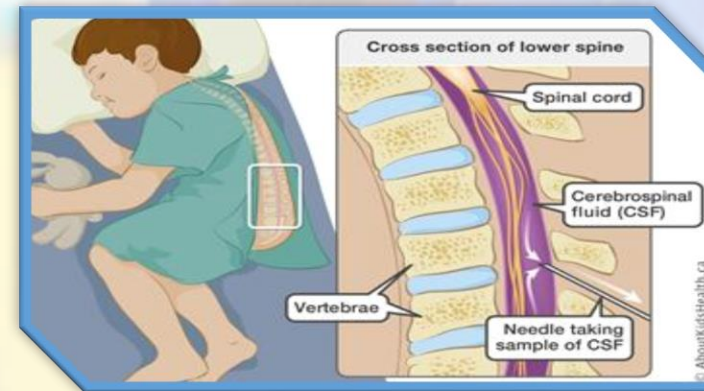
Total Cholesterol
LDL Cholesterol
HDL Cholesterol
Triglycerides

HEPATIC PANEL (LIVER PROFILE)

Albumin
Total Protein
Alkaline Phosphatase
Alanine Aminotransferase (ALT)
Aspartate Aminotransferase (AST)
Total Bilirubin
Direct Bilirubin

Types of Lab. Samples

- ❑ The most common **Sample** that be examined in **Clinical Lab** is **Blood**.
- ❑ Other Samples that can be analyzed: **Urine,**
Cerebrospinal Fluid (CSF).



Collection of Blood Samples

□ Most Quantitative tests in Clinical Chemistry Labs are carried out on **Blood Sample**. It can be obtained from:

- ✓ Venous Blood.
- ✓ Capillary Blood.
- ✓ Arterial Blood = **Rarely** examined.



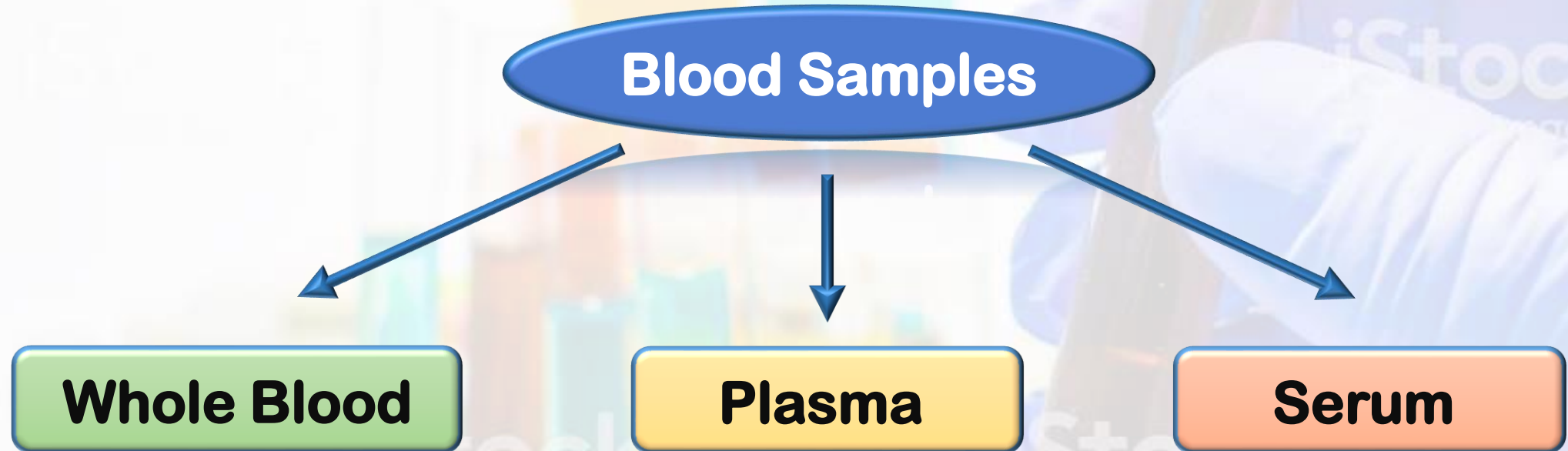
❑ **Venous & Capillary Blood** are most common in the Determinations made on Blood.

- ✓ **Capillary Blood** = obtained from a **Finger or Thumb**.
- ✓ **Venous Blood** = obtained from any **Prominent Vein**.



Types of Blood Samples

□ **Blood Samples** can be divided according to the type of the test into:



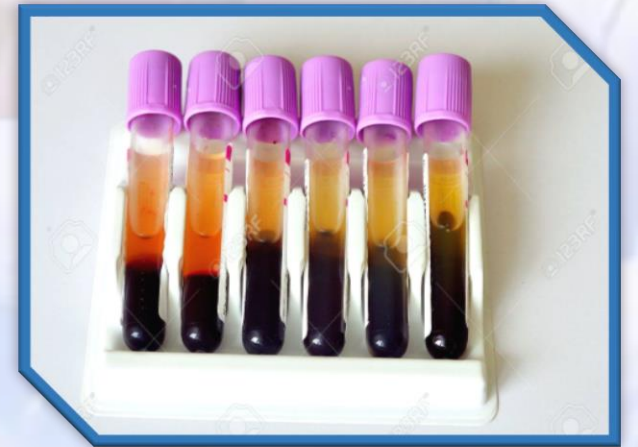
Whole Blood Sample

- ✓ Blood drawn from patient must be **directly** put in a **tube** containing an **Anticoagulant** to prevent the **Clotting**.
- ✓ The **Blood** must be **mix** thoroughly with **Anticoagulant** inside the tube and is **not centrifuged**.
- ✓ **Used for tests(Example): Hemoglobin (Hb), Ammonia.**



Plasma Sample

- ✓ Blood drawn from patient must be **directly** put in **Anticoagulant tube** to **Prevent** the **Clotting**.
- ✓ Then tube must be put in **Centrifuge** to **Separate** the **Red cell** from the **Supernatant** (**plasma**).
- ✓ Used for tests (Example): **Chloride**, **Ascorbic acid (Vit C)**, **Fibrinogen**, **Bicarbonate**.



Serum Sample

- ✓ Blood drawn from patient put in a tube without anticoagulant and allowed to Clot.
- ✓ Then the tube put in the Centrifuge to Separate the Clot from Serum.
- ✓ Used for most tests (Example): Total Protein, Cho, TG, Creatinine, Uric acid, Bilirubin, Ca, Na, K, Urea.



❑ Plasma differs from Serum in Containing Fibrinogen and Anticoagulant.

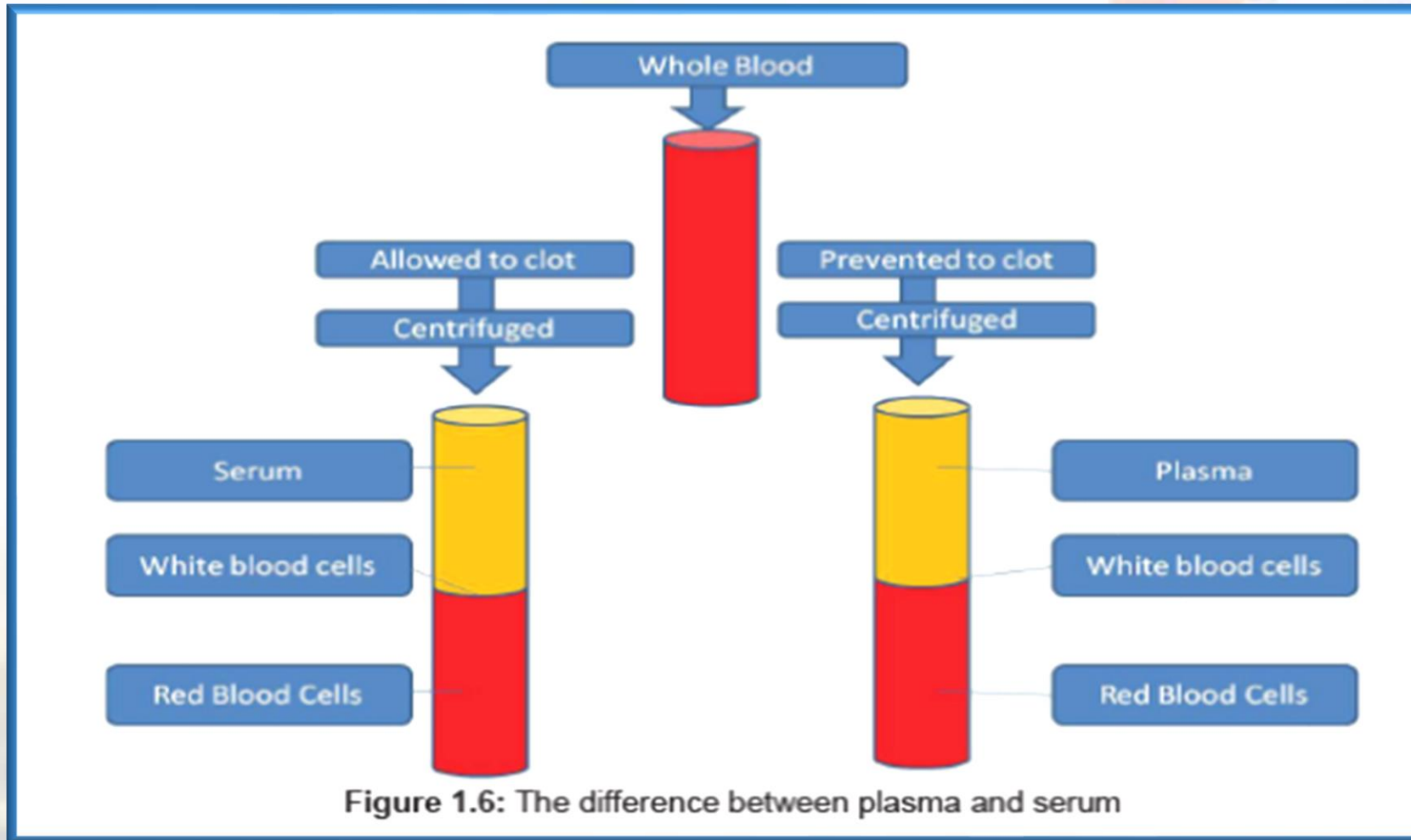
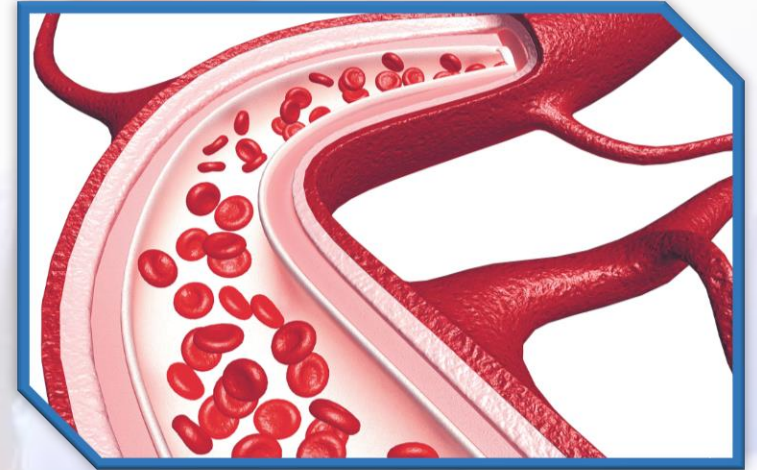


Figure 1.6: The difference between plasma and serum

Anticoagulant

What is Anticoagulant:

- ❑ A Chemical substance used to Prevent the Coagulation of Blood.
- ❑ The Anticoagulant is applied when using Whole Blood or Plasma is required.



- ❑ Used for **Preventing** Coagulation of Blood without **Diluting** & without causing a **change in the Volume** of **Red cells**.
- ❑ Salt causes Precipitation of **Ca²⁺** in the form of Calcium Salt and this prevent Coagulation.
- ❑ Some of the **Commonly** used Anticoagulants are:

Types of Anticoagulant

- **EDTA** (Ethylene Diamine Tetra-acetic Acid): it may be a **Disodium** or **Dipotassium** salt. Act by removing **Calcium** ions by Chelation.
- **Oxalate** & **Citrate**: act as Anticoagulants by **Removing Calcium** ions essential for Blood Coagulation.



❑ **Sod-fluoride**: it is used when **Blood** is collected for **Glucose** or **Lactate** estimation.

❑ **Heparin**: Inhibit the formation of **Thrombin** from **Prothrombin** it not produces a change in the compositions of **Blood**.



Chemicals:

□ In clinical Lab we used (Kit):



Cromatest **LINEAR Chemicals, S.L.**

GLUCOSE MR

REF 1129005 2 x 50 mL	REF 1129010 4 x 100 mL	REF 1129015 4 x 250 mL
CONTENTS R1, Reagent 2 x 50 mL CAL Standard 1 x 3 mL	CONTENTS R1, Reagent 4 x 100 mL CAL Standard 1 x 3 mL	CONTENTS R1, Reagent 4 x 250 mL CAL Standard 1 x 3 mL

GLUCOSE MR
Enzymatic colorimetric method
ENDPOINT

For in vitro diagnostic use only

PRINCIPLE

In the Trinder reaction^{1,2}, the glucose is oxidized to D-gluconate by the glucose oxidase (GOD) with the formation of hydrogen peroxide. In the presence of peroxidase (POD), a mixture of phenol and 4-aminopyrine (4-AA) is oxidized by hydrogen peroxide, to form a red quinoneimine dye proportional to the concentration of glucose in the sample.

$$\beta\text{-D-Glucose} + \text{H}_2\text{O} + \text{O}_2 \xrightarrow{\text{GOD}} \text{D-Gluconate} + \text{H}_2\text{O}_2$$

$$4\text{-AA} + \text{Phenol} \xrightarrow[\text{POD}]{\text{H}_2\text{O}_2} \text{Quinoneimine} + \text{H}_2\text{O}$$

REAGENT COMPOSITION

R1 Monoreagent. Phosphate buffer 100 mmol/L, pH 7.5, glucose oxidase > 10 KU/L, peroxidase > 2 KU/L, 4-aminopyrine 0.5 mmol/L, phenol 5 mmol/L.

CAL Glucose standard, Glucose 100 mg/dL (5.55 mmol/L). Organic matrix based primary standard. Concentration value is traceable to Standard Reference Material 917b.

STORAGE AND STABILITY

Store at 2-8°C.
All the kit compounds are stable until the expiry date stated on the label. Do not use reagents over the expiration date. Store the vials tightly closed, protected from light and prevented contamination during the use.
Discard if appear signs of deterioration:
- Presence of particles and turbidity.
- Blank absorbance (A) at 500 nm > 0.100 in 1cm cuvette.

REAGENT PREPARATION

The Monoreagent and the Standard are ready-to-use.

SAMPLES

Serum or heparin plasma free of hemolysis.
Glucose is stable up to 24 hours at 2-8°C when serum or plasma is separated within 30 minutes after collection.

INTERFERENCES

- Lipemia (nitralph) may affect the results.
- Bilirubin (> 10 mg/dL) may affect the results.
- Hemoglobin (> 1 g/L) may affect the results.
- Other drugs and substances may interfere*.

MATERIALS REQUIRED

- Photometer or colorimeter capable of measuring absorbance at 500 ± 20 nm.
- Constant temperature incubator set at 37°C.
- Pipettes to measure reagent and samples.

PROCEDURE

1. Bring reagents and samples to room temperature.
2. Pipette into labelled tubes:

TUBES	Blank	Sample	CAL Standard
R1, Monoreagent	1.0 mL	1.0 mL	1.0 mL
Sample	-	10 µL	-
CAL Standard	-	-	10 µL

3. Mix and let the tubes stand 10 minutes at room temperature or 5 minutes at 37°C.
4. Read the absorbance (A) of the samples and the standard at 500 nm against the reagent blank.

The color is stable for about 2 hours protected from light.

CALCULATIONS

$$\frac{A_{\text{Sample}}}{A_{\text{Standard}}} \times C_{\text{Standard}} = \text{mg/dL glucose}$$

Samples with concentrations higher than 500 mg/dL should be diluted 1:4 with saline and assayed again. Multiply the results by 4.
If results are to be expressed as SI units apply: mg/dL x 0.0555 = mmol/L.

QUALITY SYSTEM CERTIFIED ISO 9001 ISO 13485

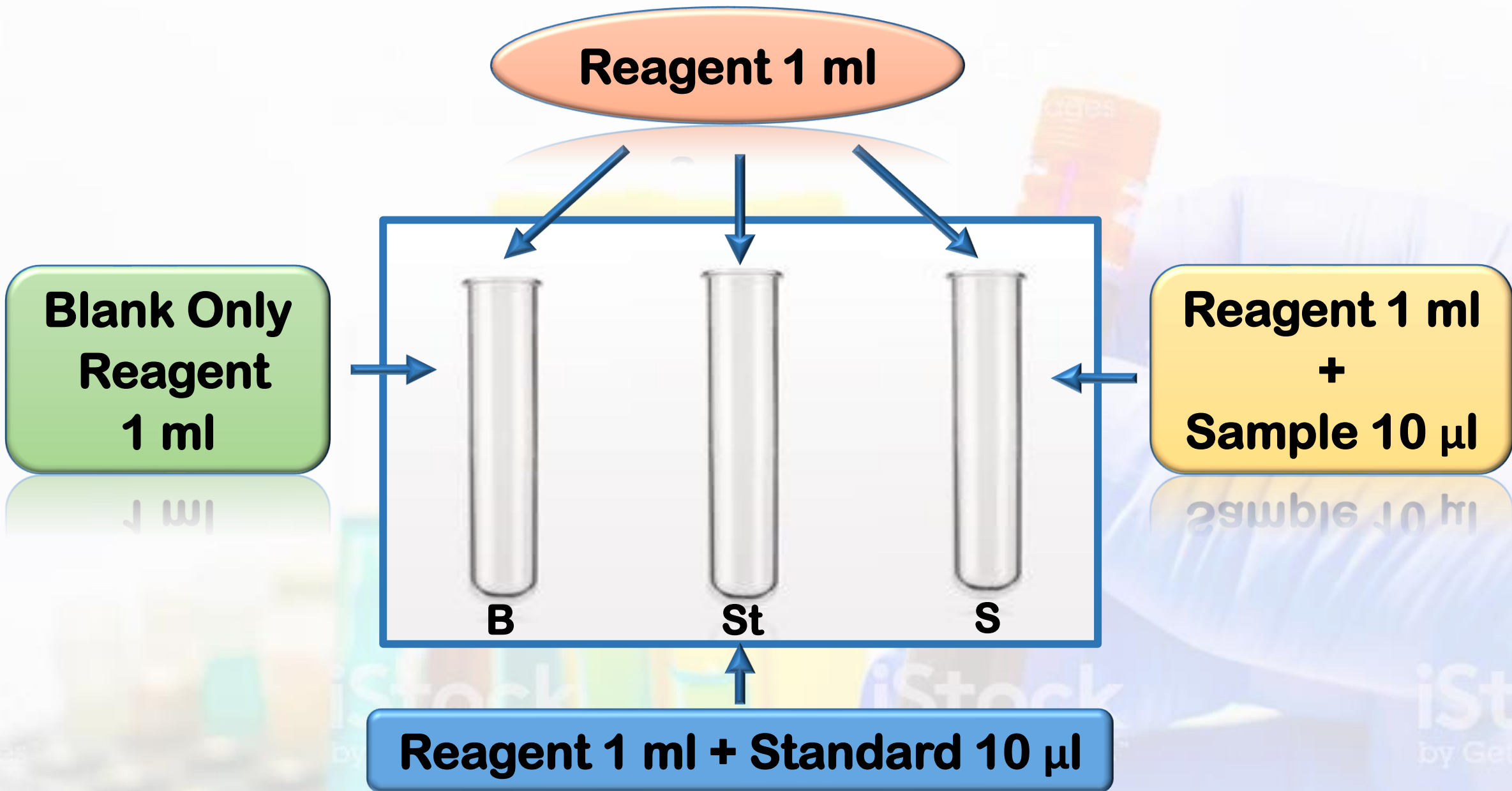
LINEAR CHEMICALS S.L. Josepim Costa 18 2ª planta 08390 Montgat, Barcelona, SPAIN Tel: (+34) 934 894 990 Fax: (+34) 934 893 435 website www.linear.es

Procedure:

Solutions	Blank	Standard	Sample
Reagent	1 ml	1 ml	1 ml
Standard	-	10 μl	-
Sample	-	-	10 μl

Micropipette:



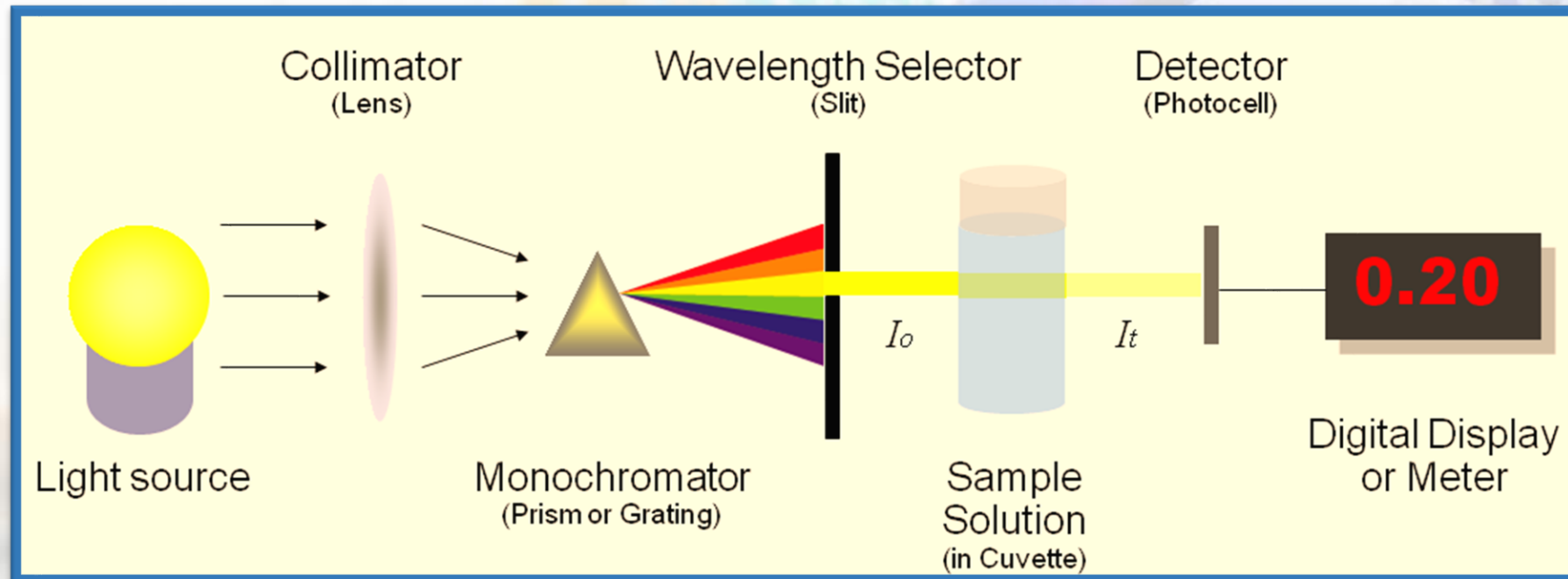


Calculations:

- Measurements in **Clinical Lab** are based upon (**Photometric measurement**) which defined as making a measurement of **Light Intensity** depended of **Wavelength**.
- Most **Instrument** used is called **Spectrophotometer**.



- ❑ **Beer – Lambert law:** absorbance is directly proportional to the light path through the cell. **$A = abc$**
- ❑ Where **A** is absorbance **a**= proportionality constant **b**= light bath in cm **c**= concentration.



- According to **Beer-Lambert Law** we can compare the conc. of **Sample** (test) with conc. of **Standard**:

a & b are constant



$$A = abc$$

For Standard



$$A = abc$$

For Sample

So, the Equation is:

$$C_{\text{sample}} = \frac{\text{Absorbance of Sample}}{\text{Absorbance of Standard}} \times \text{Standard conc.}$$

Units:

- Results in **Clinical Biochemistry** can be expressed in a variety of units such as:



❑ **mmol/l.**

❑ **mg/100ml** or **mg/dl.**

Thank You!

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