



ACL Rapid Test Dipstick (Urine)

Package Insert

REF DACL -101,111 English

A rapid test for the qualitative detection of 7-Aminoclonazepam in human urine. For medical and other professional in vitro diagnostic use only.

INTENDED USE

The ACL Rapid Test Dipstick (Urine) is a rapid chromatographic immunoassay for the detection of 7-Aminoclonazepam (major metabolite) in urine at a cut-off concentration of 300ng/ml. This test will detect other related compounds, please refer to the Analytical Specificity table in this package insert.

This assay provides only a qualitative, preliminary analytical test result. A more specific alternate chemical method must be used in order to obtain a confirmed analytical result. Gas chromatography/mass spectrometry (GC/MS) is the preferred confirmatory method. Clinical consideration and professional judgment should be applied to any drug of abuse test result, particularly when preliminary positive results are used.

SUMMARY

7-aminoclonazepam is the major metabolite of clonazepam. Clonazepam sold under the brandname Klonopin among others, is a medication used to prevent and treat seizures, panic disorder, and for the movement disorder known as akathisia. It is a type of benzodiazepine. As a major metabolite, 7-aminoclonazepam may be used to monitor use of the parent drug, clonazepam. Clonazepam, marketed as Klonopin and Rivotril, is a long-acting benzodiazepine with anxiolytic, anticonvulsant, muscle relaxant, and hypnotic properties.

The ACL Rapid Test Dipstick (Urine) is a rapid urine-screening test that can be performed without the use of an instrument. The test utilizes the antibody to selectively detect elevated levels of 7-aminoclonazepam in urine. The ACL Rapid Test Dipstick (Urine) yields a positive result when the 7-aminoclonazepam in urine exceeded the cut-off level.

PRINCIPLE

The ACL Rapid Test Dipstick (Urine) is an immunoassay based on the principle of competitive binding. Drugs which may be present in the urine specimen compete against the drug conjugate for binding sites on the antibody.

During testing, a urine specimen migrates upward by capillary action. 7-Aminoclonazepam, if present in the urine specimen below the cut-off level, will not saturate the binding sites of the antibody in the test. The antibody coated particles will then be captured by immobilized 7-Aminoclonazepam-protein conjugate and a visible colored line will show up in the test line region. The colored line will not form in the test line region if the 7-Aminoclonazepam level exceeds the cut-off level, because it will saturate all the binding sites of anti-7-Aminoclonazepam antibody.

A drug-positive urine specimen will not generate a colored line in the test line region because of drug competition, while a drug-negative urine specimen or a specimen containing a drug concentration less than the cut-off will generate a line in the test line region. To serve as a procedural control, a colored line will always appear at the control line region indicating that proper volume of specimen has been added and membrane wicking has occurred.

REAGENTS

The test contains mouse monoclonal anti-7-Aminoclonazepam antibody coupled particles and 7-Aminoclonazepam-protein conjugate. A goat antibody is employed in the control line system.

PRECAUTIONS

- For medical and other professional in vitro diagnostic use only. Do not use after the expiration date.
- The test should remain in the sealed pouch until use.
- All specimens should be considered potentially hazardous and handled in the same manner as an infectious agent.
- The used test should be discarded according to local regulations.

STORAGE AND STABILITY

Store as packaged at room temperature or refrigerated (2-30°C). The test is stable through the expiration date printed on the sealed pouch. The test must remain in the sealed pouch until use. DO NOT FREEZE. Do not use beyond the expiration date. NOTE: Once the canister has been opened, the remaining test(s) are stable for 50 days only.

SPECIMEN COLLECTION AND PREPARATION

Urine Assay

The urine specimen must be collected in a clean and dry container. Urine collected at any time of the day may be used. Urine specimens exhibiting visible particles should be centrifuged, filtered, or allowed to settle to obtain a clear specimen for testing.

Specimen Storage

Urine specimens may be stored at 2-8°C for up to 48 hours prior to testing. For prolonged storage, specimens may be frozen and stored below -20°C. Frozen specimens should be thawed and mixed before testing.

MATERIALS

Materials Provided

- Test Dipsticks
- Package insert
- Materials Required But Not Provided
- Specimen collection container
- Timer

DIRECTIONS FOR USE

Allow the test, urine specimen, and/or controls to reach room temperature (15-30°C) prior to testing.

- Bring the pouch to room temperature before opening it. Remove the Test Dipstick from the sealed pouch or label of the closed canister and use it within one hour.
- With arrows pointing toward the urine specimen, immerse the test dipstick vertically in the urine specimen for at least 10-15 seconds. Do not pass the maximum line (MAX) on the Test Dipstick when immersing the strip. See the illustration below.
- Place the test dipstick on a non-absorbent flat surface, start the timer and wait for the colored line(s) to appear. Read results at 5 minutes. Do not interpret the result after 10 minutes.

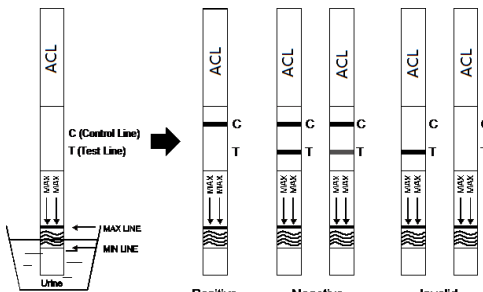
INTERPRETATION OF RESULTS

(Please refer to the illustration above)

NEGATIVE: Two lines appear. One colored line should be in the control line region (C), and another apparent colored line should be in the test line region (T). This negative result indicates that the 7-Aminoclonazepam concentration is below the detectable cut-off level.

NOTE: The shade of color in the test line region (T) may vary, but it should be considered negative whenever there is even a faint colored line.

POSITIVE: One colored line appears in the control line region (C). No line appears in the test line region (T). This positive result indicates that the 7-Aminoclonazepam concentration exceeds the detectable cut-off level.



INVALID: Control line fails to appear. Insufficient specimen volume or incorrect procedural techniques are the most likely reasons for control line failure. Review the procedure and repeat the test with a new test. If the problem persists, discontinue using the test kit immediately and contact your local distributor.

QUALITY CONTROL

A procedural control is included in the test. A colored line appearing in the control line region (C) is considered an internal procedural control. It confirms sufficient specimen volume, adequate membrane wicking and correct procedural technique. Control standards are not supplied with this kit; however, it is recommended that positive and negative controls be tested as good laboratory testing practice to confirm the test procedure and to verify proper test performance.

LIMITATIONS

- The ACL Rapid Test Dipstick (Urine) provides only a qualitative, preliminary analytical result. A secondary analytical method must be used to obtain a confirmed result. Gas chromatography/mass spectrometry (GC/MS) is the preferred confirmatory method.^{1,2}
- It is possible that technical or procedural errors, as well as other interfering substances in the urine specimen may cause erroneous results.
- Adulterants, such as bleach and/or alum, in urine specimens may produce erroneous results regardless of the analytical method used. If adulteration is suspected, the test should be repeated with another urine specimen.
- A positive result indicates presence of the drug or its metabolites but does not indicate level of intoxication, administration route or concentration in urine.
- A negative result may not necessarily indicate drug-free urine. Negative results can be obtained when drug is present but below the cut-off level of the test.
- Test does not distinguish between drugs of abuse and certain medications.

EXPECTED VALUES

This negative result indicates that the 7-Aminoclonazepam concentration is below the detectable level of 300ng/ml. Positive result means the concentration of 7-Aminoclonazepam is above the level of 300ng/ml. The ACL Rapid Test Dipstick has a sensitivity of 300ng/ml

PERFORMANCE CHARACTERISTICS

Accuracy

A side-by-side comparison was conducted using The ACL Rapid Test Dipstick (Urine) and GC/MS at the cut-off of 300ng/ml. Testing was performed on 78 clinical specimens previously collected from subjects present for Drug Screen Testing. The following results were tabulated:

ACL Rapid Test Dipstick	Subject Results		GC/MS		Total Results
	Positive	Negative	Positive	Negative	
Positive	32	1	33	0	33
Negative	2	43	45	0	45
Total Results	34	44	78	0	78
% Agreement	94.1%	97.7%	96.2%	0%	96.2%

Analytical Sensitivity

A drug-free urine pool was spiked with 7-Aminoclonazepam at the following concentrations: 0ng/ml, 150ng/ml, 225 ng/ml, 300ng/ml, 375ng/ml, 450ng/ml and 900 ng/ml. The result demonstrates >99% accuracy at 50% above and 50% below the cut-off concentration. The data are summarized below:

7-Aminoclonazepam Concentration (ng/mL)	Percent of Cut-off	n	Visual Result	
			Negative	Positive
0	0	30	30	0
150	-50%	30	30	0
225	-25%	30	26	4
300	Cut-off	30	14	16
375	+25%	30	5	25
450	+50%	30	0	30
900	3X	30	0	30

Analytical Specificity

The following table lists compounds that are positively detected in urine by the ACL Rapid Test Dipstick (Urine) at 5 minutes.

Compound	Concentration	Compound	Concentration
a-hydroxyalprazo	6,000	Flunitrazepam	3,000
Bromazepam	6,000	RS-Lorazepam	2,700
Chlordiazepoxide	6,000	Norchlordiazepoxide	4,500
Clobazam	9,000	Nordiazepam	15,000
Clonazepam	2,400	Temazepam	9,000
Delorazepam	6,000	7-Aminoclonazepam	300
Desalkylflurazep	6,000		

Precision

A study was conducted at three hospitals by laypersons using three different lots of product to demonstrate the within run, between run and between operator precision. An identical panel of coded specimens containing, according to GC/MS, no 7-Aminoclonazepam, 25% 7-Aminoclonazepam above and below the cut-off and 50% 7-Aminoclonazepam above and below the 300ng/ml cut-off was provided to each site. The following results were tabulated:

7-Aminoclonazepam Concentration (ng/mL)	n per Site	Site A		Site B		Site C	
		-	+	-	+	-	+
0	10	10	0	10	0	10	0
150	10	10	0	10	0	10	0
225	10	8	2	9	1	9	1
375	10	2	8	2	8	3	7
450	10	0	10	0	10	0	10

Effect of Urinary Specific Gravity

Fifteen urine specimens of normal, high, and low specific gravity ranges were spiked with 150ng/ml and 450ng/ml of 7-Aminoclonazepam. The ACL Test Dipstick (Urine) was tested in duplicate using the fifteen neat and spiked urine specimens. The results demonstrate that varying ranges of urinary specific gravity do not affect the test results.

Effect of Urinary pH

The pH of an aliquoted negative urine pool was adjusted to a pH range of 5 to 9 in 1 pH unit increments and spiked with 7-Aminoclonazepam to 150ng/ml and 450ng/ml. The spiked, pH-adjusted urine was tested with the ACL Rapid Test Dipstick (Urine) in duplicate. The results demonstrate that varying ranges of pH do not interfere with the performance of the test.

Cross-Reactivity

A study was conducted to determine the cross-reactivity of the test with compounds in either drug-free urine or 7-Aminoclonazepam positive urine. The following compounds show no cross-reactivity when tested with the ACL Rapid Test Dipstick (Urine) at a concentration of 100 µg/ml.

Non Cross-Reacting Compounds

Acetaminophen	Deoxycorticosterone	MDE	β-Phenylethylamine
Acetophenetidin	Dextromethorphan	Meperidine	Phenylpropanolamin e
N-Acetylprocainamid e	Diclofenac	Meprobamate	Prednisolone
Acetylsalicylic acid	Diffunisal	Methadone	Prednisone
Aminopyrine	Digoxin	L-Methamphetamine	Procaine
Amitypyline	Diphenhydramine	Methoxyphenamine	Promazine
Amobarbital	Doxylamine	(±) - 3,4-Methylenedioxy-amphetamine	Promethazine
Amoxicillin	Ecgonine	(±) - 3,4-Methylenedioxy-methamphetamine	D,L-Propranolol
Ampicillin	Ecgonine methylester	(±) - 3,4-Methylenedioxy-morphine-3-β-D glucuronide	D-Propoxyphene
L-Ascorbic acid	(-) - ψ-Ephedrine	Morphine-3-β-D glucuronide	D-Pseudoephedrine
D,L-Amphetamine sulfate	[1R,2S] (-) Ephedrine	Morphine Sulfate	Quinacrine
Apomorphine	(L) - Epinephrine	Nalidixic acid	Quinidine
Aspartame	Erythromycin	Naloxone	Quinine
Atropine	β-Estradiol	Naltrexone	Ranitidine
Benzilic acid	Estrone-3-sulfate	Naproxen	Salicylic acid
Benzoic acid	Ethyl-p-aminobenzoate	Niacinamide	Secobarbital
Benzoylcegonine	Fenpropfen	Nifedipine	Serotonin
Benzphetamine	Furosemide	Norfedine	Sulfamethazine
Bilirubin	Gentisic acid	Norethindrone	Sulindac
(±) - Brompheniramine	Hemoglobin	Norethindrone	Tetracycline
Caffeine	Hydralazine	D-Norpropoxyphene	Tetrahydrocortisone
Cannabidiol	Hydrochlorothiazide	Noscapine	3-Acetate
Cannabinol	Hydrocodone	D,L-Octopamine	Tetrahydrocortisone
Chloralhydrate	Hydrocortisone	Oxalic acid	3-(β-D-glucuronide)
Chloramphenicol	O-Hydroxyhippuric acid	Oxolinic acid	Tetrahydrozoline
Chlorothiazide	p-Hydroxyamphetamine	Oxycodone	Thiamine
(±) - Chlorpheniramine	p-Hydroxy-methamphetamine	Oxymetazoline	Thioridazine
Chlorpromazine	Chlorquine	Papaverine	D,L-Tyrosine
Chlorquine	3-Hydroxytyramine	Penicillin G	Tolbutamide
Cholesterol	Ibuprofen	Pentacocine	Trifluoperazine
Clomipramine	Imipramine	Perphenazine	Trimethoprim
Clonidine	Iproniazid	(±) - Isoproterenol	Phencyclidine
Cocaehtylene	Cocaine	Isoxsuprine	Phenelzine
Cocaine	Codeine	Ketamine	Phenobarbital
Cortisone	Cortisone	Ketoprofen	Pertemrine
(-) Cotinine	Labetalol	Loperamide	Trans-2-phenylcyclo-propylamine hydrochloride
Creatinine	Oxazepam	Maprotiline	L-Phenylephrine
Oxazepam	Diaprazem		Zomepirac

BIBLIOGRAPHY

- Baselt RC. Disposition of Toxic Drugs and Chemicals in Man, 2nd Ed. Biomedical Publ., Davis, CA, 1982: 488
- Hawks RL, CN Chiang. Urine Testing for Drugs of Abuse. National Institute for Drug Abuse (NIDA), Research Monograph 73, 1986

Index of Symbols

	Attention, see instructions for use		Tests per kit		Authorized Representative
	For in vitro diagnostic use only		Use by		Do not reuse
	Store between 2-30°C		Lot Number		Catalog #
	Do not use if package is damaged				

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