

Urine Specific Gravity: Quality Control Test Procedure ATAGO Pocket- PAL 10S

PURPOSE:





Quality Control is performed to check the performance of the Digital Refractometer (urine specific gravity).

REQUIRED MATERIALS: - See Appendix H Supply List. Dirty Utility Room on the ward or unit.

- 1) ATAGO "Pocket" PAL-10S Urine Specific Gravity Digital Refractometer.
- 2) Distilled (Sterile) Water – DH_2O – 0.5 or 1L bottle.
- 3) BioRad 975X Quality Check Solutions – qUAntify Control Level 1 and Level 2
- 4) Plastic Dropper – wide tipped.
- 5) Tissue – Kim Wipes – Lab Quality Lint free, non-abrasive.
- 6) Test Tubes with rack.
- 7) Gloves

Note: Perform each day prior to patient testing, weekly when instrument is not in use.

PROCEDURE:

	Action	Related Documents Title Document
1.	Wear Gloves.	
2.	Assemble required materials. <ul style="list-style-type: none"> • DH_2O is at room temperature. DH_2O open bottle expiry is one month. • "Pocket" PAL-10S Urine Specific Gravity Digital Refractometer – Atago is clean, Zero Set and ready to use for the Quality Check. • Bio Rad Quality Check Solution Level 1 and Level 2 at ambient temperature. 	
3.	Obtain Form A: Zero Set and Quality Control Record Form.	Record the date and time.
4.	Aliquot DH_2O in test tube.	Clean the prism surface before and after each Quality Check solution.
5.	BioRad Quality Check Solution Level 1 & Level 2. (open vial expiry is 3 months) <ul style="list-style-type: none"> • Digital Refractometer is on a flat surface. • Mix Quality Check Solution well. • Add approximately 0.3 mL of Level 1 by adding 3-4 drops from the vial. 	  <p style="text-align: center;">Prism surface with Quality Check solution.</p>
6.	Press the START key. Measurement value displays: <ul style="list-style-type: none"> • after the arrow blinks 3 times. • on the screen for 2 minutes. 	 
7.	Record BioRad Quality Check Level 1 or Level 2 specific gravity result on Form A.	
	If QC solution is	Then
	Within QC range	Proceed to next step.
	Not within QC range	Refer to trouble guide.

Medical Approval: Dr Benjamin Jung

Version: 1.1

Folder Name: CW\Point of Care\Urine Specific Gravity

This is a controlled document for CW use only. Any printed copies are uncontrolled unless specified. Please refer to Lab QMS

Medical Approval Date: 28 Dec 2016

Implementation Date: 1/3/2017 3:39:55 PM

	Action	Related Documents Title Document
8.	Remove residual QC solution on prism surface with tissue.	
9.	Clean prism area of the digital refractometer. <ul style="list-style-type: none"> • by adding approximately 0.3 mL or 3 to 4 drops of DH₂O from the test tube. • Wipe dry with tissue. 	
10.	When both Level 1 and Level 2 BioRad Quality Check solutions are within the given range the <i>Pocket™ PAL-10S Digital Refractometer is ready for patient testing.</i> <i>Note: Quality Check acceptable range is on Form A.</i>	

REFERENCES:

ATAGO Instructions of Urine Specific Gravity Refractometer URIVON-Ne
Textbook of Clinical Chemistry. Norbert W.Tietz 1986 WB Saunders.

REVISION & APPROVAL LOG

Version	Revision Type	Description of Change	Revision Date	Technical Approval	Medical Approval
1.0		New document	Nov 2013	Elvira Kozak	Dr. Cathy Halstead
1.1	Minor	Document title and number change. Upload to QMS document control	28 Dec 2016		Dr. Benjamin Jung

Attention: This document is published on the BCCW SharePoint website

Revisions made to this document require an update to the corresponding document published on BCCW SharePoint website