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Effective Date:	06-30-2022
Document Type:	Standard Operating Procedure
Page Number:	1 of 4
Department/Section:	Clinical Chemistry
Document Title:	AMMONIA ASSAY

PURPOSE:

To describe in detail how to prepare and process the Ammonia Assay test correctly and always in the same manner. Ammonia is a test used to support the diagnosis of severe liver disease (fulminant hepatitis or cirrhosis) and for the surveillance of these diseases. It is also used in the diagnosis and follow-up of hepatic encephalopathy, and monitors liver function and metabolism.

SCOPE:

Applies to all Clinical Chemistry Section Staff of Laboratory Department of Dr. Pablo O. Torre Memorial Hospital (DPOTMH)

PERSON RESPONSIBLE:

Doctors, Nurses, Medical Technologists, Pathologists, Patients, Clerk and Receptionist.

GENERAL GUIDELINES:

- 1 No special preparation is necessary.
- 2 If sample show alkaline phosphatase concentration that exceeds the system's reportable (dynamic) range, the Medical Technologist shall follow this procedure:
 - 2.1 Dilute sample with an equal volume of reagent grade water.
 - 2.2 Analyze
 - 2.3 Multiply the results by two (2) to obtain the original sample's ammonia concentration.
- 3 Specimens shall be collected in a Heparinized/Green-Top blood collecting tube.
- 4 Impervious gloves and proper protective clothing shall be worn.
- 5 Collect specimen using standard laboratory procedures.
- 6 Specimens collected shall be considered as biohazardous material.



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- 7 Analyze control material at least once per day to verify system performance.
- 8 Centrifuge specimen and remove the plasma from the red cells within 15 minutes of collection.
- 9 Prior to blood collection, the Medical Technologist shall check on the wrist band for patient identification or for the policy on two (2) acceptable person identifiers applied such as allowing the patient to state his/her complete name, date of birth, address or the assigned identification number.
- Tubes must be labeled prior to blood extraction and a sufficient amount of blood shall be extracted to ensure that repeated additional examinations could be performed.
- 11 Endorse the blood samples properly to the Medical Technologist on duty in Clinical Chemistry Section.
- 12 For fibrin clots, as it may cause incomplete Inspect serum specimen sampling of the specimen. Allow specimen to clot completely in order to prevent fibrin clots.
- Serum should not be used for ammonia measurements, because ammonia is produced during the clotting process.
- 14 Results are released within 2 to 3 hours



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PROCEDURE:

- 1. Blood specimens collected in 5 mL green top tubes are checked if properly labeled and then subjected to centrifugation at 3500 rpm for 5 minutes.
- Specimens are then bar-coded through the LIS and barcode labels are placed properly in the tubes without overlapping the handwritten details written by the phlebotomist.
- 3. Bar-coded specimens are placed in the analyzers sample racks. The Medical Technologist then press the start or on button of the analyzer to begin analyses.
- 4. Results are then copied from the LIS and verified by the Medical Technologist.
- Once verified, results are released to the HIS wherein the nurses from the different nurse's station in the hospital as well as the Releasing Clerks can see and print the results.

REFERENCE:

1. Ortho Clinical Diagnostics Instruction for Use (IFU).



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	KEY TASKS	PERSON RESPONSIBLE
1.	Collects blood specimen in 5 mL green top tubes, labels properly and then subjected to centrifugation at 3500 rpm for 5 minutes.	
2.	Bar codes specimens through the LIS and places properly in the tubes without overlapping the handwritten details written by the phlebotomist.	
3.	Places bar-coded specimens in the analyzers sample racks.	Medical Technologist
4.	Presses the start or on button of the analyzer to begin analyses.	
5.	Verifies results.	
6.	Releases results after verification to the HIS wherein the nurses from the different nurse's station in the hospital as well as the Releasing Clerks can see and print the results.	



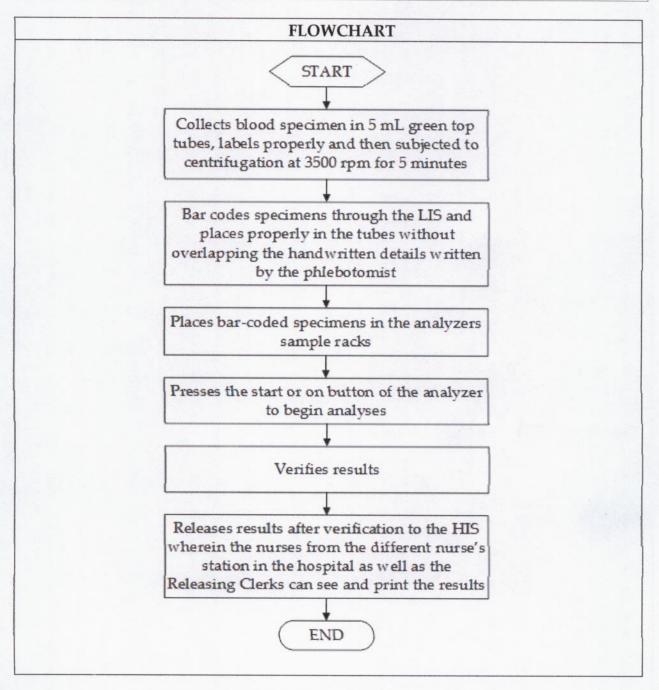
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