VITROS® B•R•A•H•M•S PCT
The Power of B•R•A•H•M•S with the Difference that only VITROS® can Deliver

Sepsis
- Life-threatening clinical condition where the body overreacts to an infection
- When unrecognized and untreated, sepsis leads to systemic inflammation, tissue damage and ultimately organ failure and death
- Affects more than 30 million people with six million deaths around the world each year

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Procalcitonin and Sepsis
- Early diagnosis of systemic bacterial infections
- Effective monitoring of sepsis patients
- Safe antibiotic therapy guidance

TRUST IN RESULTS FOR LABORATORIES:

| Reliability: | Fulfill more requests from difficult draws with small sample volume | 30 μL |
| Accuracy: | Trust your results through a quantification of endogenous interferences hemolysis, icterus and turbidity |  |
| Efficiency: | Maximize efficiency with long calibration intervals | 56 days |

CONFIDENCE IN DECISIONS FOR CLINICIANS:

| Early diagnosis of severe bacterial infections and sepsis | Therapeutic guidance for starting and safely stopping antibiotic treatment | Excellent analytical correlation and clinical concordance to B•R•A•H•M•S method |

B•R•A•H•M•S PCT is the best biomarker for early bacterial infection diagnosis and antibiotic stewardship

- High sensitivity and specificity for bacterial infection enables therapeutic decision making
- Results that are ready to be delivered to a clinicians with 96.5% First Pass Yield (without user intervention)
- Analytical performance: LOD at 0.007 ng/mL, LOQ (20% CV, observed) at 0.013 ng/mL
- Fast turnaround time: 24 minutes to first result
- VITROS B•R•A•H•M•S PCT Assay is the reliable solution: not impacted by biotin interference
**EXCELLENT ANALYTICAL AND OPERATIONAL PERFORMANCE**

- **Measuring Range:** 0.030-100 ng/mL (0.030-100 µg/L)
- **LOD:** 0.007 ng/mL (0.007 µg/L)
- **LOQ (claimed):** 0.030 ng/mL (0.030 µg/L)
- **LOQ (observed at 20% CV):** 0.013 ng/mL (0.013 µg/L)
- **Precision at clinical decision points (within lab):**
  - <3.9% at 0.100 ng/mL
  - <3.5% at 0.250 ng/mL
  - <3.7% at 0.500 ng/mL
  - <4.0% at 2.00 ng/mL
  - <4.1% at 10 ng/mL
- **Calibration interval:** 56 days
- **VITROS System to System correlation:** within <3.7%

**EXCELLENT ANALYTICAL CORRELATION**

![Analytical correlation between VITROS B•R•A•H•M•S PCT and B•R•A•H•M•S PCT sensitive KRYPTOR](chart.png)

**EXCELLENT CLINICAL CONCORDANCE**

| Clinical concordance to B•R•A•H•M•S method at clinical decision points |
|-----------------------------|------------------|
| 0.100 ng/mL                 | >98.5%           |
| 0.250 ng/mL                 | >98.0%           |
| 0.500 ng/mL                 | >97.4%           |
| 2.00 ng/mL                  | >97.8%           |
| 10.0 ng/mL                  | >98.0%           |

**INTENDED USE**

The VITROS® B•R•A•H•M•S PCT test is indicated as an aid to be used in conjunction with clinical evaluation for:

- the risk assessment of critically ill patients on their first day of ICU admission for progression to severe sepsis and septic shock
- assessing the cumulative 28-day risk of all-cause mortality for patients diagnosed with severe sepsis or septic shock in the ICU or when obtained in the emergency department or other medical wards prior to ICU admission, using a change in PCT level over time
- decision making on antibiotic therapy for patients with suspected or confirmed lower respiratory tract infections (LRTI) defined as community-acquired pneumonia (CAP), acute bronchitis, and acute exacerbation of chronic obstructive pulmonary disease (AECOPD) – in an inpatient setting or an emergency department
- decision making on antibiotic discontinuation for patients with suspected or confirmed sepsis.

Indicated for use with the VITROS® ECi/ECiQ/3600 Immunodiagnostic Systems and the VITROS® 5600/XT 7600 Integrated Systems.

**PRODUCT INFORMATION**

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<td>VITROS Immunodiagnostic Products B•R•A•H•M•S PCT Reagent</td>
<td>B•R•A•H•M•S PCT Calibrator Pack</td>
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<td>B•R•A•H•M•S PCT Controls Tri-Level</td>
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**REFERENCES**