



Greiner Bio-One Saliva Collection System Instructions for Use



1. Manufacturer

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2. Intended Use

The **Greiner Bio-One Saliva Collection System**, as one complete unit (components 0 – 3), serves to collect saliva specimens for clinical-chemical analysis, and is intended for application by trained medical users.

The **Greiner Bio-One Saliva Collection System** consists of 4 components, which are applied individually.

Intended use of individual components:

- Tube 0: For cleansing mouth cavity
- Tube 1: For collection specimen
- Beaker 2: Serves as collection container, and for hygienic transfer of the specimen material
- Tubes 3: Provide safe transport, storage and stabilisation of the collected specimen

3. Product Description and Composition

The **Greiner Bio-One Saliva Collection System** consists of 4 components:

Item n°. 881111	Tube 0 Rinsing Solution	(white cap) contains 4ml Rinsing Solution (27 mM citrate buffer), colourless, medical device class 1 in accordance with MDD 93/42/EEC; microbiologically tested
Item n°. 881112	Tube 1 Saliva Extraction Solution	(royal blue cap) contains 4ml Saliva Extraction Solution (39 mM citrate buffer, FC&C yellow n°5 (tartrazine), yellow, medical device class 1 in accordance with MDD 93/42/EEC; microbiologically tested
Item n°. 881210	Beaker 2	(orange lid) empty, In Vitro diagnostics in accordance with IVDD 98/79/EC
Item n°. 881113	Tube 3 Saliva Transfer Tube	(orange cap) 2 x evacuated tube for saliva transfer contains 4mg sodium azide in crystalline form, In Vitro diagnostics in accordance with IVDD 98/79/EC DO NOT OPEN!

4. Additional Materials Required

Clock or stopwatch to time.

5. Precautions and Warnings

For correct implementation of the system, the patient's active participation is required. If this is not guaranteed, or only partly possible, application is not recommended.

If the patient has a blocked nose, saliva collection using this system is not to be carried out. If there are mouth injuries (e.g. dental treatments with open wounds), saliva collection is **not** to be carried out using this system.

Tube 0

No precautions necessary. If mouth rinsing solution is swallowed, no health risk is involved.

Tube 1

The Saliva Extraction Solution contains the food dye FD&C yellow n°5 (tartrazine). If any saliva extraction solution is swallowed, there is no health risk. Occasionally an allergic reaction to FD&C yellow n°5 (tartrazine) may occur. Persons who do not tolerate aspirin and/or benzoic acid as well as asthmatics could be affected by this. Application is not recommended, if such cases of intolerance are known.

Beaker 2

The round safety sticker should only be removed when saliva is being transferred into **tube 3**. After transfer, the sticker should be replaced. Fingers should not be placed into the opening! Risk of needlestick! The saliva collection beaker should be kept out of children's reach.

2 x Tubes 3

The tubes contain sodium azide, which is poisonous*. The tubes are not to be opened (the orange cap should not be pulled off). The tubes should be kept out of children's reach. In case of accidental swallowing, doctor's advice should be sought immediately, with reference to the instructions.

* Special precautions for people and environment:

R 28 very poisonous if swallowed. R 32 produces poisonous vapours on contact. R 50/53 very poisonous for water organisms, can cause long-term damage in waters.

6. Storage and Shelf-life

Storage:	Protected from light at 4°C - 25°C (applicable for all components)
Shelf-life:	See packaging label

Tubes 0 and 1 must be used immediately on opening. Opened tubes may not be saved for later use.

7. Methodology

By rinsing the oral cavity with the extraction solution contained in **tube 1**, saliva and saliva extraction solution are mixed together. The saliva extraction solution contains an internal colour standard, which allows determination of the saliva quantity when using the Greiner Bio-One Saliva Quantification Kit (item n°. 881010).

8. General Notes on Saliva Collection

8.1	No food or liquids at least 10 minutes prior to saliva collection.
8.2	The filled Tubes 3 should be taken/transported to the doctor or into the laboratory as soon as possible. Storage at 2 – 8°C in a refrigerator is permissible.
8.3	The 4 components of the SCS should be used in numerical sequence.

9. Procedure

9.1	Open tube 0 by pulling off the white cap and rinse out the oral cavity thoroughly with the contents (clear liquid). Then spit out . Should any contents be swallowed by mistake, there is no health risk involved (see precautions, warnings and 10.1). *
	*optional (see point 10.2)
9.2	Open tube 1 by pulling off the blue cap and rinse the oral cavity with the contents (yellow liquid) for 2 minutes . Care should be taken that none of the liquid is swallowed, although in general, there is no risk (see precautions and warnings).
9.3	Unscrew beaker 2 and spit in contents of mouth.
9.4	Screw lid back onto beaker 2 .
9.5	Remove round safety sticker from beaker 2 (see precautions and warnings) and keep it.
9.6	Hold beaker 2 on a flat surface , so that the end of the aspiration mouth is dipped into the liquid. Take tubes 3 (DO NOT OPEN – see precautions and warnings) and push down onto the opening, overcoming a slight resistance. If this procedure has been carried out correctly, tube 3 should fill by itself. When the tube is full, pull it off. NB: The tube does not fill completely. Fill volume of max. 3.5ml possible.
9.7	If liquid is left over in beaker 2 , repeat point 9.6 with tube 3 . If this is not possible, the liquid in the first tube 3 is sufficient. If both tubes have been filled, and there is still fluid left in beaker 2 then this is to be disposed of together with beaker 2 (see point 9.10).
9.8	Invert both tubes 3 several (5 x) times.
9.9	Identify both tubes 3 by writing name, surname, date of birth as well as time of saliva collection on the labels.
9.10	After use, seal beaker 2 again with the round safety sticker.

10. Performance Characteristics, Limitations, Possible Errors

10.1	Care should be taken if gums are bleeding! Blood in saliva causes erroneous results.
10.2	It might be necessary to rinse with rinsing solution (tube 0)! Food leftovers or impurities from food cause incorrect analysis results.
10.3	Incorrect storage of the collected saliva sample (for example storage during several hours in direct sunlight in a parked car) can lead to incorrect results.
10.4	The Saliva Collection System is not to be used after the expiry date printed on the packaging, and is to be disposed of correctly.
10.5	None of the Saliva Collection System components are to be used after the expiry date printed on the packaging, and they are to be disposed of correctly.

11. Literature

Haeckel R. *Speicheldiagnostik*, Weinheim, GIT VERLAG, 1988

Haeckel R, Walker RF, Colic D: *Reference ranges for mixed saliva collected from the literature*. *J Chem Clin Biochem* 1989; 27:249-52

Thomas L: *Labor und Diagnose*. Frankfurt/Main: TH-Books, 6. Aufl. 2005

12. Date of issue

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