This is not just any POC coag device.

Reliable results in any POC setting, at any dosage, for any anticoagulant, with any sample type and any operator.
Different devices may give different results.

Standardize your POC coagulation testing on the ITC HEMOCHRON® Signature Elite Whole Blood Microcoagulation System and get results you can count on from the market leader.
Health systems have relied on the accuracy of the HEMOCHRON Gold-Standard Point-of-Care (POC) system for over 40 years.

- Regardless of sample type, clinical setting or anticoagulant, HEMOCHRON provides fast, accurate and reproducible results for clinical decision making

- Cuvette-based technology that’s easy to learn and use and measures to the laboratory standard of fibrin formation

- We designed the HEMOCHRON to be the only point-of-care coagulation system you need in your facility, by offering a broad test menu:
  - ACT+ – PT – aPTT
  - ACT-LR – Citrate PT – Citrate aPTT

- Full features for compliance and connectivity, to maximize efficiency and ease regulatory challenges
In some units, such as the CVOR, the need for fast, accurate data is critical. Fortunately, the HEMOCHRON’s unique accelerated ACT+ achieves a true fibrin clot faster than any other system.

• Our proprietary accelerated ACT+ expedites the endpoint, saving time-to-result, and getting patients on pump sooner
• Accurately measures heparin effects from 1.0 to 6.0 u/mL of blood
• The only system not affected by hemodilution or hypothermia, common occurrences in the CVOR
• Results are dependent on actual fibrin clot formation, not thrombin generation
Keeping cath, dialysis and ECMO patients hemostatically sound means I need a clotting test sensitive to low heparin levels.

Another unique assay, the low-range activated clotting time (ACT-LR), is optimized to report ACT results on samples at or below 2.5 heparin units/mL of blood.

- Sensitive to low doses of heparin (0.0 to 2.5 u/mL of blood)
- The only low-range POC assay indicated for use during Extracorporeal Membrane Oxygenation, Hemodialysis and Percutaneous Transluminal Coronary Angioplasty
Elite’s POC PT and aPTT tests help me meet my ED’s stroke protocol of 60 minutes or less—and let me begin the right treatment, sooner.

For diagnostic applications or monitoring, HEMOCHRON Elite offers the broadest test menu for rapid point-of-care hemostasis screening in the Emergency Room.

- HEMOCHRON performs both a prothrombin time (PT) and an activated partial thromboplastin time (aPTT) to check both coagulation pathways
- Uses citrated whole blood or a fingerstick sample
- Helps meet AHA Stroke Guidelines, which call for immediate PT and aPTT testing in patients with suspected Acute Ischemic Stroke
HEMOCROMON Elite offers you flexible options for warfarin monitoring.

- Improves patient care with immediate results for on-the-spot dosage adjustments
- Reports INR, plasma-equivalent seconds and whole blood seconds, with an effective INR range of 0.8 to 10.0
- Uses a fingerstick or venous sample
- Maximizes efficiency, with connectivity to all major anticoagulation clinic patient management programs

From the ER to the clinic, Elite accurately assesses hemostatic status.
HEMOCHRON Signature Elite addresses your compliance and connectivity needs, regardless of operator.

Enhance your efficiency, data management and compliance with HEMOCHRON Elite’s robust feature set.

Improves safety and security.

• Integrated barcode scanner can eliminate transcription errors, while providing an audit trail and traceability

• Ability to scan cuvette and QC lot information, patient identification (PID) and operator ID (OID)

• Cuvettes comply with OSHA guidelines (29 CFR 1910.1030) to protect against blood-borne pathogens
With our move to electronic records, I can now download results quickly and easily from Elite.

Enhances compliance.
- Automatic internal electronic quality control (EQC)
- Quality control (QC) lockout including cuvette and QC expiration lockout
- Operator certification tracking and lockout
- Complies with Joint Commission Patient Safety Goal, “Reduce the likelihood of patient harm associated with the use of anticoagulants,” and Patient Safety Goal 1, “To improve the accuracy of patient identification with patient ID bar-code scanner”

Integrates data management/connectivity.
- Direct connection to Ethernet
- POCT-1A compliant device meets industry standard
- Connectivity to major information systems
Cardiovascular OR
(ACT+, PT, aPTT)

General Surgery
(PT, aPTT)

Ambulatory Surgery
(ACT-LR, aPTT, PT)

Neonatal ICU
(ACT-LR, aPTT)

Emergency Room
(PT, aPTT)

Critical Care Unit
(ACT+, ACT-LR, PT, aPTT)

Coag Clinic
(PT)

Cardiac Cath Lab
(ACT-LR, aPTT, PT)

Cuvette | Intended Use | Specimen | Reporting Unit |
---|---|---|---|
ACT-LR | Monitors low to moderate heparin doses up to 2.5 units/mL of blood. Used in procedures such as cardiac catheterization, Extracorporeal Membrane Oxygenation (ECMO), dialysis and Percutaneous Transluminal Coronary Angioplasty. | Whole blood | Celite Equivalent Seconds |
ACT+ | Monitors moderate to high levels of heparin (1–6 units/mL). Unaffected by aprotinin, hypothermia and hemodilution. | Whole blood | Celite Equivalent Seconds |
Broad Testing Menu Includes:
ACT+, ACT-Low Range, PT, aPTT, Citrate PT, Citrate aPTT

<table>
<thead>
<tr>
<th>Cuvette</th>
<th>Intended Use</th>
<th>Specimen</th>
<th>Reporting Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>PT</td>
<td>For performing a quantitative, one-stage prothrombin time.</td>
<td>Venous or fingerstick samples</td>
<td>International Normalized Ratio (INR), plasma-equivalent seconds and whole-blood seconds</td>
</tr>
<tr>
<td>Citrate PT</td>
<td>For performing a quantitative, one-stage prothrombin time.</td>
<td>Citrated whole blood</td>
<td>International Normalized Ratio (INR), plasma-equivalent seconds and whole-blood seconds</td>
</tr>
<tr>
<td>aPTT</td>
<td>For performing a quantitative, one-stage aPTT. For evaluation of low-dose heparin anticoagulation (up to 1.5 units/mL of blood).</td>
<td>Whole blood</td>
<td>Plasma-equivalent units up to 400 seconds and whole blood seconds</td>
</tr>
<tr>
<td>Citrate aPTT</td>
<td>For performing a quantitative, one-stage aPTT. For evaluation of low-dose heparin anticoagulation (up to 1.5 units/mL of blood).</td>
<td>Citrated whole blood</td>
<td>Plasma-equivalent units up to 400 seconds and whole blood seconds</td>
</tr>
</tbody>
</table>
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Call your rep for more information, an educational session, or to request a demo.