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Find out which of your patients is heading towards kidney disease

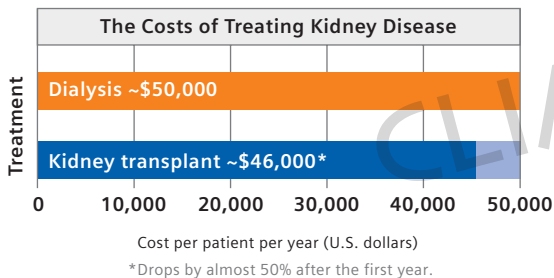
With Multistix PRO® Reagent Strips for Urinalysis

Answers for life.

SIEMENS

Kidney Disease is recognized as a public health problem.

- 1 in 9 American adults (20 million) have chronic kidney disease and most don't even know it. More than 20 million others are at increased risk.^{1,4}
- Incidence of end-stage renal disease (ESRD) increasing by 6% per year.²
- Annual cost of dialysis treatment is ~\$50,000 per patient per year.
- Early detection can lead to more timely treatments, saving the healthcare system thousands of dollars per patient.



Do you see patients with these increased risk factors for kidney disease?

- Diabetes
- Hypertension
- Pre-eclampsia
- Family history of chronic kidney disease
- Non-caucasian
- Age >60 years
- Urinary tract infections
- Exposure to nephrotoxins, including certain medications

The National Kidney Foundation recommends the use of the protein-to-creatinine (P:C) ratio for more convenient assessment of protein excretion.

- The National Kidney Foundation has selected Siemens Healthcare Diagnostics' Urinalysis Products for its Kidney Early Evaluation Program (KEEP).

Multistix PRO® Strips: Versatile, vital urinalysis results.

- In concentrated or dilute specimens, false results can be reduced by over 75%.³
 - Reduced false positives mean fewer costly follow-up tests, which also alleviates unnecessary concerns for you and your patient.
 - Reduced false negatives mean fewer delays in patient treatment.



Introducing
Multistix PRO Strips:
The only urinalysis
strip providing
protein-to-creatinine
ratio results.



Clinitek Status®



Clinitek Advantus™

Multistix PRO Urinalysis Strips along with the Clinitek Status and Clinitek Advantus Urine Chemistry Analyzers automate your P:C ratio testing.

- Multistix PRO Strips are CLIA-waived for even more convenient testing.
- Results in just 60 seconds.
- Reduces the need for 24-hour or overnight timed urine collection.

Excerpts from the National Kidney Foundation Kidney Disease Outcome Quality Initiative (K/DOQI) Chronic Kidney Disease Guidelines.



"The American Diabetes Association and the NKF-PARADE have recommended assessment of proteinuria to detect chronic kidney disease."¹

"24-hour urine collections may be associated with significant collection errors, largely due to improper timing and missed samples, leading to over-collections and under-collections."¹

"The ratio of protein or albumin-to-creatinine in an untimed "spot" urine specimen corrects for variations in urinary concentration due to hydration and provides a more convenient method of assessing protein and albumin excretion than that involved with timed urine collections"¹

"Urine protein-to-creatinine and albumin-to-creatinine ratios provide accurate estimates of the urinary protein and albumin excretion rate and are not affected by hydration."¹



Select the configuration that's right for you and your testing needs.

Billing for two codes is appropriate when both analytes or tests are measured/performed and results are obtained for both analytes/procedures. Physicians and laboratories should use independent medical judgment in selecting the code(s) that most accurately reflects the product(s) used, procedure(s) performed and the patient's condition.

Name	Code	Quantity	Reagents								
			Leu	Nit	Blo	pH	Pro	Cre	SG	Glu	Ket
Multistix PRO 10LS	1566	25 Strips	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
PRO 10LS	1554	100 Strips	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Testing Method	Product Name	CPT Code
Visual Testing	Creatinine	82570QW
	UA	81002
Clinitek Status**	Creatinine	82570QW
	UA	81003QW
Clinitek Advantus**	Creatinine	82570
	UA	81003

* CPT codes and descriptors are copyrighted by the American Medical Association.

** The Centers for Medicare and Medicaid Services (CMS) indicated that Multistix PRO Reagent Strips can be reported with CPT codes 81002 (non-automated urinalysis) and 82570 (creatinine) as [in] CLIA-waived products (CMS Program Memorandum Transmittal AB 01-145 – Oct. 10, 2001). Siemens Healthcare Diagnostics believes this information and the codes above (replacing 81002 non-automated urinalysis with 81003 automated urinalysis) can apply to use of the reagent strips on the Clinitek Status and Clinitek Advantus. Such coding supports complete reporting of all analytes measured, especially since there are no other codes covering this specific combination of analytes. Users may also consider in place of CPT code 81002, using CPT 81003, which is the CPT code for automated urinalysis by dip stick or tablet reagent without microscopy procedures.

To order now, please contact your Siemens Healthcare Diagnostics Multistix PRO authorized distributor or call (800) 445-5901.

Contact your local Medicare carrier or other health plan for details on local policies and to ensure compliance with specific plan requirements.

References:

1. National Kidney Foundation K/DOQI Clinical Practice Guidelines for Chronic Kidney Disease: Evaluation, Classification and Stratification; *Am J Kid Dis* 39;2002 (Suppl. 1).
2. USRDS 2001 Annual Data Report; "Executive Summary."
3. Puglia MJ, Wallace JF, Luke KE, et al. Multisite Evaluation of a New Dipsticks Protein, Albumin and Creatinine in Urine with Visual Results and Quantitative Methods. *J. Clin. Lab. Analysis*. Poster abstracts *Clin Chem*, 46:A25,A2,A17;2000. *Clin Biochem*, 2000, 33:S235.
4. What's New. National Kidney Foundation. <http://www.kidney.org/professionals/doqi/whatsnew.cfm>; (Information retrieved on June 5, 2002).