



Antihepca™ - HRRS

Antihepca™- HRRS is a heparin neutralising agent used in the recalcifying step of the APTT, surface activated clotting tests (SACT-II, KCT) and other tests.



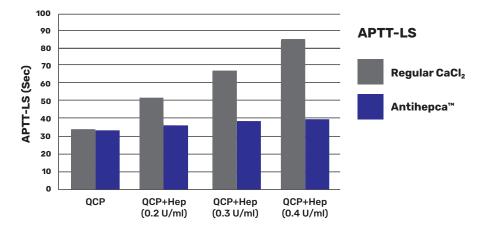


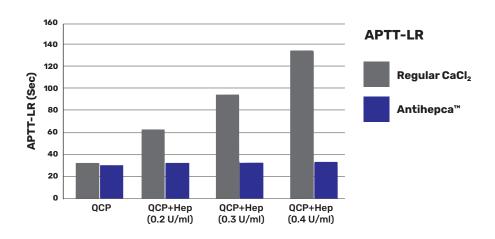
Antihepca™ - HRRS

A heparin neutralising agent used in the recalcifying step of the APTT, surface activated clotting tests (ie: SACT-II, KCT) and other tests.

- Simple, easier and faster solution to identify and neutralize heparin
- Traditional method of using thrombin time (Screen) and reptilase (Confirm) requires 2 additional tests.
- HRRS replaces traditional methods and provides a baseline APTT free of heparin effect.
- Ready to use (no reconstitution required).
- Stability: 5 years at 2-8°C

Antihepca™- HRRS can be substituted for the usual M/40 calcium chloride solution in APTT and KCT tests to virtually eliminate the effect of unfractionated heparin concentrations up to 1 u/ml in normal plasma. Heparins are widely used in hospitals as anticoagulants. Unfractionated heparin is usually monitored using APTT and thrombin time tests. Often plasma samples are not identified as containing heparin and it may be present as an unexpected contaminant. Thus the reason for prolonged APTT or KCT tests may not be apparent and laboratory diagnosis may not be simple. Laboratories may find it useful to have a simple method for confirming the presence of heparin before going on to other investigations as may be required.





PRODUCT	REF	SIZE	STATUS
CE - HRRS	HX9107	5×10 ml	CE MARKED
IVD - HRRS	X9107-AE	12x5 ml	ARTG LISTED
RUO - Antihepca™	X9107-50	5×10 ml	RUO

REFERENCES:

1 Favalaro E J, et. al. Lupus anticoagulant testing during anticoagulation, including direct oral anticoagulants. Res. Pract. Thromb. Haemost. 2022; 1-16



Dr Thomas Exner founded Haematex in 2004, his motivation was to increase coagulation lab efficiency by improving and innovating diagnostic reagents. Haematex products are designed, manufactured and distributed under the highest standard of quality and safety.

"Thrombosis and haemorrhage affect many clinical decisions, their control can impact treatment outcomes and indeed - life itself."

- Dr Thomas Exner





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