

# BÜHLMANN fCAL® turbo Customer Testimonials

## Siemens Clinical Chemical Analyser

#### Siemens Advia 2400

Unilabs, Portugal, Dr. J. P. Ramos

"By switching to BÜHLMANN fCAL" turbo we gained a lot of flexibility in our work model with a clear improvement of the laboratory workflow management"

"Using the CALEX® allowed us to have less trained technicians preparing the stool sample extracts"



#### Siemens Advia XPT

James Cook University Hospital, Middlesbrough, UK, A. Teggert

"The fCAL® turbo has made calprotectin analysis significantly easier"

"A major advantage of the BÜHLMANN fCAL" turbo is the direct link between the analyser and the LIM system"



# Roche Clinical Chemical Analyser

#### Roche cobas® c501

City Hospital Triemli, Zurich, CH, A. Grünauer, Dr. J. Barman-Aksözen and P. Nesic

"The BÜHLMANN fCAL® turbo assay is very easy, fast, flexible and feasible at any time"

"The extraction using CALEX® Cap is clean, fast and efficient"



### Roche cobas® c501

Laborgemeinschaft 1, Medizinisches Labor, Zurich, CH, C. Gugliotta

"Our concerns of observing contaminations by measuring fecal samples right next to serum samples were completely unfounded"

"Using the BÜHLMANN fCAL® turbo we can offer a faster service for our customers"



### Roche cobas® c501

Cumberland Infirmary, Carlisle, UK, P. Bowe

"Stool samples were extracted using the CALEX" Cap extraction device and can be loaded directly onto the clinical chemistry analyser"

"The BÜHLMANN fCAL® turbo assay is an ideal assay for the growing need for a flexible, random access and high throughput assay"



### Roche cobas® c501

Bioanalytica, Lucerne, CH, Y. Schallberger

"The introduction of the BÜHLMANN fCAL" turbo has significantly simplified our daily routine"

"The CALEX® Cap is by far the best stool extraction device that I have ever used"



#### Roche cobas® c702

Oueen Elizabeth Hospital Birmingham, UK, R. Forster and K. Smith

"The large analytical range of BÜHLMANN fCAL® turbo enables screening of undiagnosed patients and monitoring of known IBD patients using the same assay"

"Routine running of the BÜHLMANN fCAL" turbo has demonstrated clear benefits in staff time"



#### Roche cobas® c702

Newcastle upon Tyne Hospitals, Newcastle, UK, Dr. Elodie Hanon

"The extraction process with the CALEX® Cap is much quicker than with the method used before, since there are fewer steps involved"

"The gastroenterologists were very positive about the switch to BÜHLMANN fCAL® turbo, especially when they realised we could test liquid samples and report results up to 8000 µg/g."



# Beckman Clinical Chemical Analyser

#### **Beckman Coulter AU5800**

Laboratory CEF-BOULARD, Paris, FR, D. Le Bris and Dr. I. Bernard

"The wide measuring range up to 2000 µg/g without the need for additional dilution provides a real advantage"

"BÜHLMANN fCAL® turbo shows nice repeatability and is comparable to results obtained with the ELISA"



#### **Beckman Coulter AU5800**

SYNLAB Suisse SA, Zurich, CH, A. Suter and Dr. C. Fuhrer

"The handling and preparation of the BÜHLMANN fCAL® turbo assay on our chemistry analyser is faster and easier than before"

"The CALEX® Cap can be put directly on the Beckman Coulter AU5800"



#### Beckman Coulter DxC 800

Centre for laboratory Medicine, St. Gallen, CH, M. Kobelt and K. Jung

"Incoming samples are extracted with the CALEX" Cap extraction device and tested all in the same day"

"The handling of the new method is comparable to any other clinical chemistry assay"



#### Beckman Coulter DxC 600

Children's Hospital of Zurich, Zurich, CH, M. Barbieru

"The fCAL" turbo from BÜHLMANN can be used with our existing laboratory equipment"

"By using the CALEX® Cap extraction device, there is nothing that can go wrong with the sample processing"



# Abbott Clinical Chemical Analyser

### **Abbott Architect C8000**

Mercy University Hospital in Cork, Cork, IE, M. O'Connell née Deasy

"The fCAL® turbo calprotectin assay is an attractive option since it gives results significantly faster than an FITSA"

"The fCAL® turbo results correlates very well with the patients clinical presentation and stage of IBD"





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