

Workflow automation in molecular diagnostics

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Department of Medical Microbiology

- Bacteriology (incl. mycology & parasitology)
- Virology
- Infection Control & Hospital Hygiene
- Research

- Total department: ~250 employees (including research)
- Diagnostics: ~200.000 Samples/year
  - 80% own hospital, 20% external (mainly from GP-labs)

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Our molecular diagnostics (MDx) portfolio

- ~ 70.000 MDx tests per year (mainly multiplex realtime-PCR)
- >90 different MDx tests (including many multiplex PCRs)
- Rapidly expanding MDx portfolio
  - 30% commercial kits (e.g. HIV, HCV, CT/GO, MTB, MRSA)
    - Predominantly high volume tests OR rapid molecular prescreens
    - CE/IVD
  - 70% In house assays (mainly realtime-PCR based)
    - All remaining pathogens (low and high volume!)
    - Continuous expansion of portfolio
    - Flexibility to act and implement quickly (Flu, VRE, CPE, ....)
    - Extensive validation mandatory (ISO 15189)

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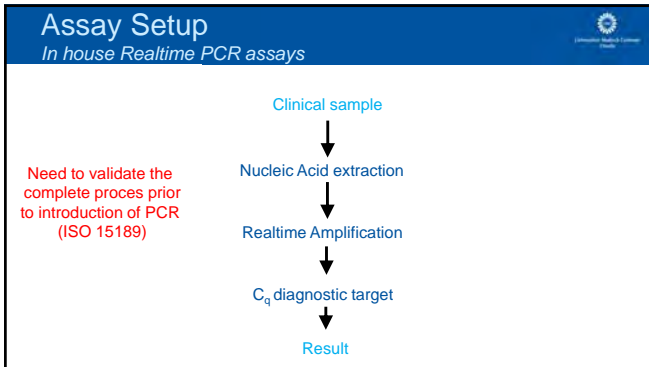
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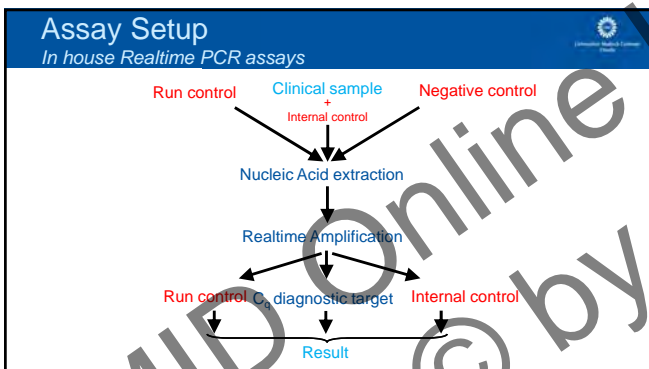
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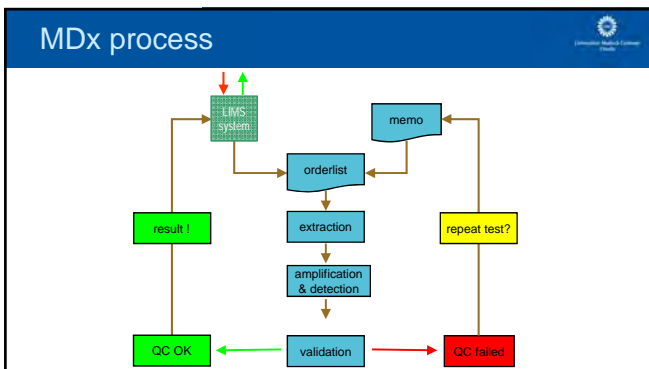
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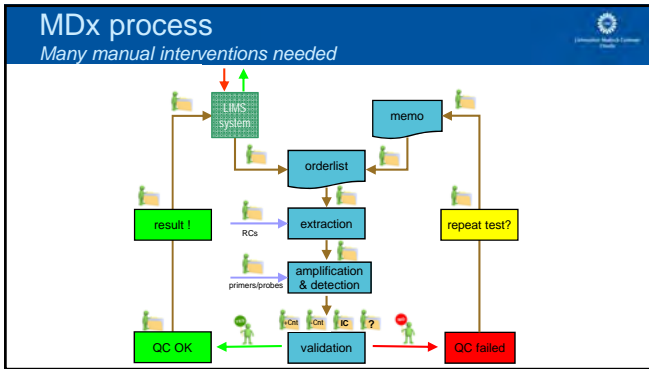
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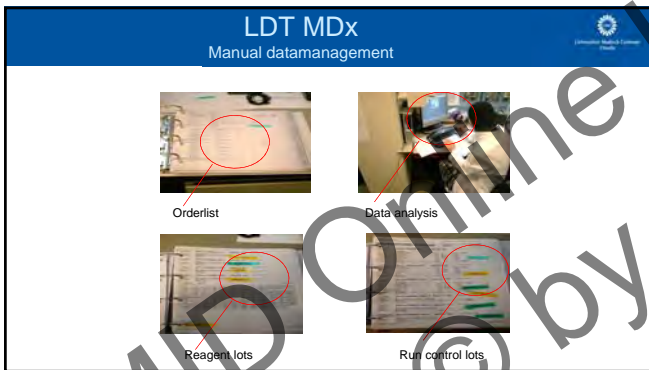
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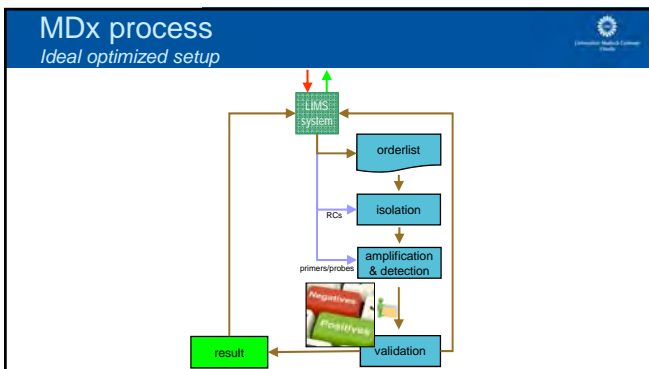
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### Route towards an optimized MDx setup

MDx optimization will only be successful if the laboratory process (logistics) is completely redesigned

*In other words: lab-automation is not just about replacing a technician by a robot/liquid-handling system, but...*

One needs to connect all equipment to LIMS and achieve full process control

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### Advantage of integrated MDx system

- Advantages of connecting equipment to LIMS
  - Improves lab efficiency
  - Reduces data entry errors
  - Automated technical validation and interpretation
  - Online logging reagent lots (stock management)
  - Automated realtime QC (e.g. Shewart plots from internal and external controls)
  - Data mining possible for all assay parameters & reagents in case of problems
- Advantages of full process control
  - Barcoding of samples and reagents
  - Tracking and tracing of all samples, reagents and results
  - Integration of individual equipment into a controlled workflow environment
- Net result: improved efficiency and more reliable MDx
- **More reliable tests = improved safety for the patient**

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### 2011 – The options

**Qiagen Symphony**



**Roche FLOW**



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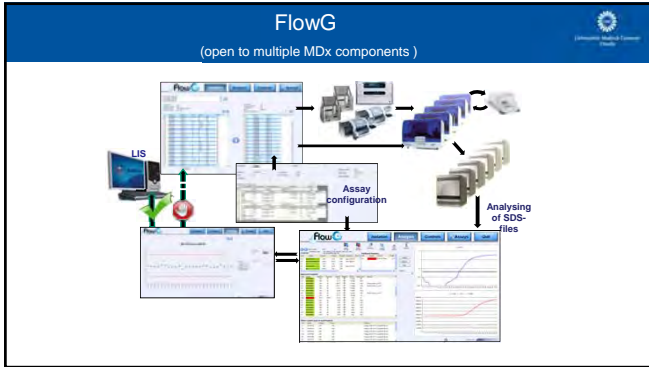
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- ### The pros and cons (2011)
- **Open Access solutions (local solutions)**
    - Pro: Flexibility (adapted to local situation)
    - Con: Multiple hardware and software partners involved  
Software needs to be developed/adapted  
Stability of operation & support  
System updates (file formats) may affect performance  
Responsibility
  - **Dedicated solutions (e.g. Roche FLOW)**
    - Pro: One stop shop  
Multiple users (experience groups)  
Integrated equipment and software validation
    - Con: Reduced freedom in operational setup (local solutions)  
Slow implementation of new middleware and hardware developments

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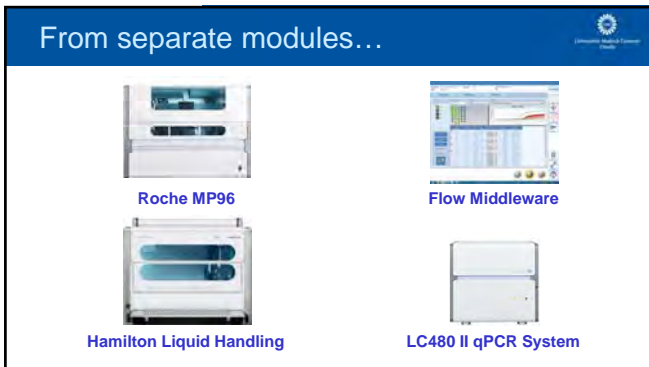
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...to integrated MDx modules

Roche MP96

Hamilton Liquid Handling

Full Process Management  
FLOW Middleware

LC480 II qPCR System

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The FLOW Components

PSH    MagNA Pure 96    PSU    LC480 II    FLOW software

Primary Sample Unit    Purification RNA/DNA    PCR Set-up    Amplification Detection    Report

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### Middleware

- Bi-directional communication with LIMS
- Bi-directional communication between various pieces of equipment
- Realtime presentation of assay progress on 'Dashboard'
- Automated logging of assay performance parameters
- Automated technical validation of assay results
- Stock monitoring (*pending*)
- Trend analysis (*pending*)

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### Automated QC and result calling

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graph TD
    Validation[validation] --> Decision1{if -2 s.d. ≤ Run controls ≤ +2 s.d.  
AND  
Target amplification = negative  
AND  
IC = positive  
THEN  
result = negative}
    Validation --> Decision2{if -2 s.d. ≤ Run controls ≤ +2 s.d.  
AND  
Target amplification = positive  
AND  
Plot inspection = OK  
THEN  
Result = positive  
ELSE  
Repeat test}
    Decision1 --> Result[result]
    Decision2 --> Result
    Result --> LIMS[LIMS]
    LIMS --> Orderlist[new orderlist]
  
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### Assuring daily operation

UMCU Microbiology

Virology      Bacteriology

- Double FLOW lines with identical set up
- Swapping between lines in case of component failures prior to the start of a run
- Automated and continuous mirroring of data
- Manual procedures available to safeguard clinical samples in case of component failures **during** a run
- Service and maintenance contracts with Roche

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A few examples of FLOW performance

- Checkerboard experiment (to monitor sample cross-over contamination)
- EQA results
- Various specimen types

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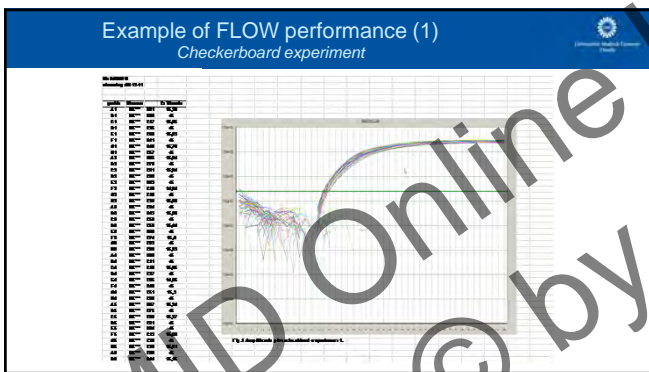
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Example of FLOW performance (2)  
QCMD HSV EQA panel

Panel code	Test panel code	Sample description	EQACONSORTIA	Code Proficiency	Q-FLW	STPLC
HSENA1307	HSENA1302	Hepes Simplex virus (ßSV-1, MacIntyre)	980	Care	53.79	11.27 HSV-1
HSENA1304	HSENA1302	Hepes Simplex virus (ßSV-1, MacIntyre)	389	Educational	57.78	17.88 HSV-1
HSENA1301	HSENA1307	Hepes Simplex virus (ßSV-1, 92/1902)	996	Care	29.05	11.13 HSV-1
HSENA1308	HSENA1303	Hepes Simplex virus (ßSV-1, 95/1906)	490	Care	29.98	17.51 HSV-1
HSENA1302	HSENA1310	Hepes Simplex virus (ßSV-2, MS)	623	Care	27.66	16.52 HSV-2
HSENA1305	HSENA1301	Hepes Simplex virus (ßSV-2, MS)	249	Educational	34.87	16.74 HSV-1
HSENA1303	HSENA1304	Hepes Simplex virus (ßSV-2, 09/1948)	435	Care	24.74	16.29 HSV-2
HSENA1309	HSENA1309	Hepes Simplex virus (ßSV-2, 09/1568)	91	Educational	25.62	16.34 HSV-2
HSENA1310	HSENA1302	Varicella-Zoster Virus		Care	NA	NA
HSENA1306	HSENA1302	Negative		Care	NA	NA

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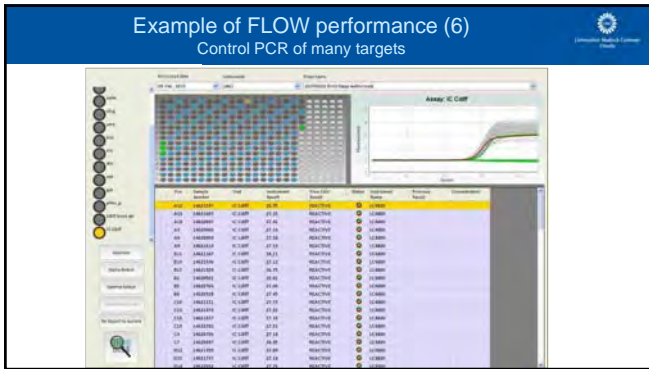
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### Workflow solution for UMCU

Integrated (modular) workflow solution running for >3 years now

- 12 DNA targets in Bacteriology
- 25 DNA targets in Virology
- 2 RNA targets in Virology (more pending)

Reliable performance despite 'early adapter challenges'

- Operational back-up scenario
- Easy switching between hardware components of both Flow-lines

Allows efficient and highly automated workflow

Development of new high sample volume MDx tests now viable option

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### Consequences of MDx automation

- Complete change in MDx laboratory setup:**
  - From pathogen / syndrome driven run setup to 'full-portfolio' MDx runs
  - Reduced TTR (twice/trice daily reporting possible)
  - Reagent supplies (ready to use assay components, eg. Primer/Probe mixes)
  - Reduced human error and sample cross-contamination rates
- Fewer laboratory staff needed for routine MDx**
  - Only 1-2 technicians per FLOW line (vs 3-4 techs for manual procedures)
  - More resources available for test development/implementation, QC, QMS-tasks
- Education level laboratory staff**
  - Less highly educated technicians needed for daily MDx
  - More knowledge and expertise needed on liquid handling and ICT processes
- Structural changes**
  - Result validation now by senior technicians (instead of Molecular Microbiologists)
  - Backup system essential (not enough personnel left to run manually)
- Financial consequences**
  - Increased hardware/software/IT costs
  - Reduced personnel costs
  - Revalidation on FLOW needed for all running tests (~2-6 weeks per test)

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Roche Diagnostics the Netherlands

Roche Molecular Solutions International

Sanguin International software solutions

Xiri Robotics

Van der Geijn en Partners

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