



**SLOVENSKI STANDARD**  
**kSIST-TS FprCEN/TS 17305:2018**  
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**Molekularne diagnostične preiskave in vitro - Specifikacije za predpreiskovalne procese za slino - Izolirani človeški DNK**

Molecular in vitro diagnostic examinations - Specifications for pre-examination processes for saliva - Isolated human DNA

Molekularanalytische in-vitro-diagnostische Verfahren - Spezifikationen für präanalytische Prozesse für Saliva - Isolierte menschliche DNS

Analyses de diagnostic moléculaire in vitro - Spécifications relatives aux processus préanalytiques pour la salive - ADN humain isolé

**Ta slovenski standard je istoveten z: FprCEN/TS 17305**

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**ICS:**

11.100.10	Diagnostični preskusni sistemi in vitro	In vitro diagnostic test systems
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TECHNICAL SPECIFICATION  
SPÉCIFICATION TECHNIQUE  
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**FINAL DRAFT**  
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ICS 11.100.10

English Version

**Molecular in vitro diagnostic examinations - Specifications  
for pre-examination processes for saliva - Isolated human  
DNA**

Analyses de diagnostic moléculaire in vitro -  
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pour la salive - ADN humain isolé

Molekularanalytische in-vitro-diagnostische Verfahren  
- Spezifikationen für präanalytische Prozesse für Saliva  
- Isolierte menschliche DNS

This draft Technical Specification is submitted to CEN members for Vote. It has been drawn up by the Technical Committee CEN/TC 140.

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Recipients of this draft are invited to submit, with their comments, notification of any relevant patent rights of which they are aware and to provide supporting documentation.

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EUROPEAN COMMITTEE FOR STANDARDIZATION  
COMITÉ EUROPÉEN DE NORMALISATION  
EUROPÄISCHES KOMITEE FÜR NORMUNG

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## European foreword

This document (FprCEN/TS 17305:2018) has been prepared by Technical Committee CEN/TC 140 “In vitro diagnostic medical devices”, the secretariat of which is held by DIN.

This document is currently submitted to the Vote on TS.

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[SIST-TS CEN/TS 17305:2019](https://standards.iteh.ai/catalog/standards/sist/0743e90b-3172-4c93-b161-46d3b63aa515/sist-ts-cen-ts-17305-2019)

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**FprCEN/TS 17305:2018 (E)****Introduction**

Molecular *in vitro* diagnostics has enabled a significant progress in medicine. Further progress is expected by new technologies analyzing profiles of nucleic acids, proteins, and metabolites in human tissues and body fluids. However, the profiles of these molecules can change drastically during specimen collection, transport, storage and processing thus making the outcome from diagnostics or research unreliable or even impossible because the subsequent analytical assay will not determine the situation in the patient but an artificial profile generated during the pre-examination process.

Genetic examination of DNA is commonly used in clinical practice. This includes e.g., predisposition testing, pharmacogenomics, analysis of genetic disorders with the perspective use in precision medicine. This is a fast growing field in molecular diagnostics.

Saliva is increasingly used as a non-invasive alternative specimen to blood for the examination of human DNA. Saliva naturally contains microorganisms and also extraneous substances (*e.g.*, food debris), which make the composition of saliva more complex and unique among patients/donors. Dedicated measures are therefore needed for informing and preparing patients/donors for the collection and to check compliance with the instructions, in order to reduce the specimen variability. In contrast to invasive specimen collection, saliva collection does not require trained and educated professionals or dedicated facilities. By good instruction and verified collection device safety claims, saliva specimens can be self-collected at home; however, home collection also contributes to high variability in specimen quality. Similarly, medical laboratories/ *in vitro* manufacturers need to be aware of specimen variability when performing design verification and validation.

DNA in saliva can fragment or degrade after collection. In addition, bacteria present in the saliva specimen can continue to grow, thus diluting the human DNA. DNases secreted by these bacteria can also accelerate the DNA degradation. This can impact the sensitivity and reliability of DNA examination.

Standardization of the entire process from specimen collection to the DNA examination is needed to minimize DNA degradation and fragmentation after saliva collection. This document describes special measures which need to be taken to obtain good quality saliva specimen/samples and isolated DNA therefrom for human DNA examination.

In this document, the following verbal forms are used:

- "shall" indicates a requirement;
- "should" indicates a recommendation;
- "may" indicates a permission;
- "can" indicates a possibility or a capability.

## 1 Scope

This document gives requirements on the handling, storage, processing and documentation of saliva specimens intended for human DNA examination during the pre-examination phase before a molecular examination is performed.

This document is applicable to molecular *in vitro* diagnostic examination including laboratory developed tests performed by medical laboratories. It is also intended to be used by laboratory customers, *in vitro* diagnostics developers and manufacturers, biobanks, institutions and commercial organisations performing biomedical research, and regulatory authorities.

Dedicated measures that need to be taken for saliva collected on absorbing material or by mouth washes are not described in this technical specification. Neither are measures for preserving and handling of native saliva cell-free DNA, pathogens, and other bacterial or whole microbiome DNA in saliva described.

NOTE International, national or regional regulations or requirements can also apply to specific topics covered in this document.

## 2 Normative references

The following documents are referred to in the text in such a way that some or all of their content constitutes requirements of this document. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

EN ISO 15189:2012, *Medical laboratories — Requirements for quality and competence (ISO 15189:2012, Corrected version 2014-08-15)*

ISO 15190, *Medical laboratories — Requirements for safety*

## 3 Terms and definitions

For the purposes of this document, the terms and definitions given in EN ISO 15189 and the following apply.

ISO and IEC maintain terminological databases for use in standardization at the following addresses:

- IEC Electropedia: available at <http://www.electropedia.org/>
- ISO Online browsing platform: available at <http://www.iso.org/obp>

### 3.1

#### **ambient temperature**

unregulated temperature of the surrounding air

### 3.2

#### **analyte**

component represented in the name of a measurable quantity

[SOURCE: ISO 17511:2003, 3.2 modified — The examples were not taken over.]

### 3.3

#### **examination performance**

#### **analytical test performance**

#### **analytical performance**

accuracy, precision, and sensitivity of a test to measure the analyte of interest

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Note 1 to entry: Other test performance characteristics such as robustness, repeatability can apply as well.

[SOURCE: ISO/FDIS 20184-1:2018, 3.4]

**3.4**  
**DNA stabilizers**  
compounds, solutions or mixtures that are designed to minimize degradation and fragmentation of DNA

**3.5**  
**closed system**  
non-modifiable system provided by the vendor including all necessary components for the analysis (i.e., hardware, software, procedures and reagents)

**3.6**  
**DNA**  
**deoxyribonucleic acid**  
polymer of deoxyribonucleotides occurring in a double-stranded (dsDNA) or single-stranded (ssDNA) form

[SOURCE: EN ISO 22174:2005, 3.1.2]

**3.7**  
**DNA proficiency testing program**  
proficiency testing for DNA based examinations

Note 1 to entry: Commonly, a program periodically sends multiple specimens to members of a group of laboratories for analysis and/or identification; the program then compares each laboratory's results with those of other laboratories in the group and/or with an assigned value, and reports the results to the participating laboratory and others.

Note 2 to entry: Other forms of PT/EQA include: data transformation exercises, single-item testing (where one item is sent to a number of laboratories sequentially and returned to the program at intervals), and one-off exercises (where laboratories are provided with a test item on a single occasion).

**3.8**  
**examination**  
**analytical test**  
set of operations having the object of determining the value or characteristics of a property

[SOURCE: EN ISO 15189:2012, 3.7, modified — The term and definition is used here without the original notes.]

Note 1 to entry: Processes that start with the isolated measurand and include all kinds of parameter testing or chemical manipulation for quantitative or qualitative examination.

**3.9**  
**examination provider**  
**analytical test provider**  
group or company that provides the specific analytical test

**3.10**  
**interfering substances**  
endogenous or exogenous substances (e.g. stabilization solution) that can be present in specimens and that can alter an examination result



**3.11****microorganism**

entity of microscopic size, encompassing bacteria, fungi, protozoa and viruses

[SOURCE: ISO/DIS 11139:2017, 3.176]

**3.12****pre-examination processes****pre-analytical phase****pre-analytical workflow**

processes that start, in chronological order, from the clinician's request and include the examination request, preparation and identification of the patient, collection of the primary sample(s), transportation to and within the analytical laboratory, isolation of analytes, and end when the analytical examination begins

[SOURCE: EN ISO 15189:2012, 3.15, modified — An additional term was added and more detail was included.]

Note 1 to entry: The pre-examination phase includes preparative processes that influence the outcome of the intended examination.

**3.13****primary sample specimen**

discrete portion of a body fluid, breath, hair or tissue taken for examination, study or analysis of one or more quantities or properties assumed to apply for the whole

[SOURCE: EN ISO 15189:2012, 3.16, modified — The term and definition is used here without the original notes.]

**3.14****proficiency testing**

evaluation of participant performance against pre-established criteria by means of inter-laboratory comparisons

[SOURCE: ISO/IEC 17043:2010, 3.7, modified — Term and definition are used here without the original notes.]

**3.15****room temperature**

for the purpose of this document, temperature in the range of 18 °C to 25 °C

Note 1 to entry: Local or national regulations can have different definitions.

**3.16****saliva****whole saliva**

bio-fluid of the mouth composed mainly of secretion originating from three major salivary glands parotids, submandibular and sublingual glands and from salivary glands present in the oral cavity

**3.17****saliva collection device**

tube or other container in which the saliva specimen is collected

**FprCEN/TS 17305:2018 (E)****3.18****sample**

one or more parts taken from a primary sample

[SOURCE: EN ISO 15189:2012, 3.24, modified — The examples were not taken over.]

**3.19****stability**

ability of a sample material, when stored under specified conditions, to maintain a stated property value within specified limits for a specified period of time

Note 1 to entry: The measurand constituent for the purpose of this document is isolated DNA.

[SOURCE: ISO Guide 30:2015, 2.1.15, modified — Note 1 was not taken over. The following words were replaced: “characteristic” by “ability”; “reference material” by “sample material”; “specified” by “stated”.]

**3.20****storage**

prolonged interruption of the pre-analytical workflow of a sample or analyte respectively, or of their derivatives, under appropriate conditions in order to preserve their properties

Note 1 to entry: Long-term storage typically occurs in laboratory archives or in biobanks.

[SOURCE: ISO/FDIS 20184-1:2018, 3.21, modified — Example in the definition was deleted.]

**3.21****validation**

confirmation, throughout the provision of objective evidence, that the requirements for a specific intended use or application have been fulfilled

Note 1 to entry: The word “validated” is used to designate the corresponding status.

[SOURCE: EN ISO 9000:2015, 3.8.13, modified — Note 1 and 3 were not taken over.]

**3.22****verification**

confirmation, through provision of objective evidence, that specified requirements have been fulfilled

Note 1 to entry: The word “verified” is used to designate the corresponding status.

[SOURCE: EN ISO 9000:2015, 3.8.12, modified — Note 1 and Note 2 were not taken over.]

Note 2 to entry: Confirmation can comprise activities such as

- performing alternative calculations;
- comparing a new design specification with a similar proven design specification;
- undertaking tests and demonstrations; and
- reviewing documents prior to issue.