BÜHLMANN fCAL® turbo Customer Testimonials

BÜHLMANN fCAL® turbo and CALEX® Cap are FDA 510(k) cleared. For in vitro Diagnostic Use.

Roche Clinical Chemical Analyzer

BÜHLMANN fCAL® turbo is currently validated for use on the Roche cobas® c501/c502 in the US.

**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**
Queen Elizabeth Hospital Birmingham, UK, R. Forster and K. Smith

“Routine running of the BÜHLMANN fCAL® turbo has demonstrated clear benefits in staff time”

**Roche cobas® c702**
New Castle 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 realized we could test liquid samples and report results up to 8,000 µg/g.

BÜHLMANN fCAL® turbo is not currently validated for use on the Roche cobas® c702 in the US.
Siemens Clinical Chemistry 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”

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**

SYLAB 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 Zurich 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 ELISA”