



1. Introduction

- DNA is one of the primary identifiers during Disaster Victim Identification. Standard DNA workflow requires 6 to 24 hours to generate a DNA profile depending on the sample type.
- ➤ The RapidHIT[™] ID System can generate a DNA profile within 90 minutes from sample insertion. The instrument may be particularly useful when investigators need to swiftly identify bodies and body parts for urgent and sensitive cases.

2. Objective

To assess the performance of the RapidHIT[™] ID System for the analysis of muscle and bone marrow samples.

3. Materials & Methods

- a) Sample Preparation
- Buccal cells were collected from volunteers with 5 buccal swipes using cotton swabs (n=6).
- \triangleright De-identified human tissue samples (**Fig. 1**) stored at -20°C for > 10 years were retrieved, and 80 mg of tissue was taken from each sample (n=8 for muscle tissues; n=13 for bone marrow).
- > Waste pads in used cartridges were recovered as described in **Fig. 2**.





Figure 1: Examples of muscle (left) and bone marrow (right) samples used. 80 mg of tissue was sampled from the original piece of tissue and was analysed with either RapidHIT or the standard laboratory workflow.



Figure 2: Removal of waste pad from a used sample cartridge.

b) RapidHIT Analysis

- Buccal swabs were processed with either ACE GlobalFiler[™] Express cartridge (ACE) or RapidINTEL[™] Plus (INTEL+) cartridge with the General Protocol. Tissue samples were processed with INTEL+ only.
- Samples were processed in RapidHIT[™] ID System with the RapidLINK[™] v2.0 software.



c) Standard Laboratory Workflow (Std)

- DNA extraction: Promega Maxwell[®] FSC instrument with the DNA IQ[™] kit.
- Quantitation: ABI Quantifiler[™] Trio Kit on the QuantStudio[™] 7 Flex.
- Amplification: 1 ng of DNA template, GlobalFiler[™] Amplification Kit.
- Detection: ABI 3500xL with injection parameters of 3 µL DNA, 1.2 kV, 24 s.

d) Data Analysis

- Analytical thresholds were 35 RFU and 110 RFU for RapidHIT and Std respectively.
- Height of a homozygous peak was divided by 2 for mean peak height calculations.
- Intra-colour balance for each dye channel was calculated by dividing the sum of peak heights in largest-sized marker, over the sum of peak heights in smallest-sized marker.

Application of Rapid DNA Analysis for Victim Identification in Mass Fatality Incidents

Hong Han LIM, Jiajie LONG, Baoqiang HENG, Christopher Kiu-Choong SYN DNA Profiling Laboratory, Biology Division, Applied Sciences Group, Health Sciences Authority, 11 Outram Road, Singapore 169078





	(D) Waste pad processing from used cartridges produced good quality profiles																					
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Method	RH	Std	RH	Std	RH	Std	RH	Std	RH	Std	RH	Std	RH	Std	RH	Std	RH	Std	RH	Std	RH	S
Sample	M1	M1 Waste	M2	M2 Waste	M3	M3 Waste	M6	M6 Waste	BM1	BM1 Waste	BM4	BM4 Waste	BM5	BM5 Waste	BM7	BM7 Waste	BM8	BM8 Waste	BM9	BM9 Waste	BM10	BM Wa
Mean PH	3,568	9,860	2,724	7,620	1,926	1,844		184	2,618	1,916		5,514		419	502	846	2,692	5,650		2,332	353	1,1
±SD (RFU)	± 4,800	± 4,495	± 3,416	± 3,585	± 2,648	± 2,163	None	± 101	± 4,887	± 3,141	38	± 8,225	None	± 513	± 690	± 817	± 5131	± 7,666	93	± 2,310	± 429	
Mean ICB	0.25	0.56	0.39	0.82	0.02	0.26	None	0.80	0.14	1.37	None	0.50	None	0.71	0.25	1.08	0.06	0.20	None	1.03	0.10	0.
Mean PHR±SD	0.78 ± 0.14	0.86 ± 0.09	0.69 ± 0.18	0.73 ± 0.15	0.47 ± 0.21	0.45 ± 0.26	None	0.62	0.79 ± 0.13	0.84 ± 0.13	None	0.55 ± 0.28	None	0.12	0.83 ± 0.16	0.66 ± 0.19	None	0.65 ± 0.15	None	0.80 ± 0.15	0.69 ± 0.22	0. = 0.

Figure 7: Allele count, mean peak height (PH), mean intra-colour balance (ICB), and mean peak height ratio (PHR) from 12 tissues samples (orange for muscle, green for bone marrow) processed with RapidHIT (RH). Corresponding waste pads from these 12 samples were retrieved after RH processing and processed using standard laboratory workflow (Std). Results from waste pad Std processing (blue) were compared. No allele was detected from samples M6, BM5, BM11 by RH, and BM11 waste by waste pad processing via Std.

DNA recovery from waste pad processing via Std higher (~ 67% higher) than that from corresponding tissue samples via RapidHIT. Considerably higher peak heights and ICB obtained from waste pad processing via Std, in contrast to tissue samples via RapidHIT. Waste pad processing via Std also offers the advantage of having control over the DNA input amount for analysis. Waste pad processing via Std managed to rescue alleles for tissues with poor allele recovery via RapidHit (M6, BM4, BM9). Subsequent waste pad processing via Std can be considered if RapidHit analysis fails/repeat analysis required for result verification.

BM5		BM6		BM7		BM8		BM9		BM	110	BM11		BM12	
ne	390 ± 304	2,881 ± 4,261	6,033 ± 2,173	502 ± 690	562 ± 513	2,692 ± 5131	2,642 ± 2,642	93	1,794 ± 1,988	353 ± 429	2,754 ± 2,163	None	197 ± 63	2,384 ± 4,643	4, 4,
ne	0.42	0.17	0.49	0.25	0.38	0.06	0.16	None	0.24	0.10	0.18	None	0.94	0.07	0
ne	0.63 ± 0.16	0.77 ± 0.12	0.85 ± 0.09	0.83 ± 0.16	0.76 ± 0.15	0.64 ± 0.15	0.76 ± 0.10	None	0.77 ± 0.14	0.69 ± 0.22	0.81 ± 0.14	None	None	0.71 ± 0.17	0

For email correspondence: Lim_Hong_Han@hsa.gov.sg Long_Jia_Jie@hsa.gov.sg









Figure 8: Example of electropherograms obtained from the analysis of bone marrow samples (BM10) for each respective analysis methods stated. Intra-colour balance (ICB) is shown for red (top) and purple (**bottom**) channels for each EPG.

Ski-slope effect was least pronounced from waste pad processing via standard workflow. Ski-slope effect more pronounced for RapidHIT.

5. Conclusion

RapidHIT generally works well with muscle tissue samples; lesser extent for bone marrow samples. RapidHIT may not work well with highly degraded

- samples due to low ICB/high ski-slope effect.
- Waste pad processing a good supplement to RapidHIT.

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