Size:297*210mm

SEJOY

SARS-CoV-2 Antigen Rapid Test Cassette

Package Insert

Cat: COVG-602
Version: 01

Specimens: Saliva
Effective Date: 2021.02

For professional *in vitro* diagnostic use only.

INTENDED USE

The SARS-CoV-2 Antigen Rapid Test Cassette is a rapid chromatographic immunoassay for the qualitative detection of SARS-CoV-2 antigen in human saliva.The identification is based on the monoclonal antibodies specific for the Nucleocapsid (N) Protein of SARS-CoV-2.It is intended to aid in the rapid differential diagnosis of COVID-19 infection.

PACKAGE SPECIFICATIONS

1test/pack, 5tests/pack, 25 tests/pack, 50 tests/pack, 100 tests/pack

INTRODUCTION

The novel coronaviruses belong to β genus.COVID-19 is an acute respiratory infectious disease.People are generally susceptible.Currently, the patients infected by the novel coronavirus are the main source of infection;asymptomatic infected people can also be an infectious source.Based on the current epidemiological investigation,the incubation period is 1 to 14 days, mostly 3 to 7 days.The main manifestations include fever,fatigue and dry cough.Nasal congestion,runny nose,sore throat, myalgia and diarrhea are found in a few cases.

PRINCIPLE

The SARS-CoV-2 Antigen Rapid Test Cassette is a qualitative, lateral flow immunoassay for the detection of the N protein of SARS-CoV-2 in human saliva. In this test, antibody specific to the N protein of SARS-CoV-2 is separately coated on the test line regions of the test cassette.During testing, the extracted specimen reacts with the antibody to N protein of SARS-CoV-2 that are coated onto particles. The mixture migrates up the membrane to react with the antibody to N protein of SARS-CoV-2 on the membrane and generate one colored line in the test regions.The presence of this colored line of the test regions indicates a positive result.To serve as a procedural control, a colored line will always appear in the control region if the test has performed properly.

REAGENTS

The test cassette contains anti-SARS-CoV-2 Nucleocapsid protein particles and anti-SARS-CoV-2 Nucleocapsid protein coated on the membrane.

PRECAUTIONS

Please read all the information in this package insert before performing the test.
1.For professional in vitro diagnostic use only. Do not use after the expiration date.
2.The test should remain in the sealed pouch until ready to use .
3.All specimens should be considered potentially hazardous and handled in the same manner as an infection agent.
4.The used test should be discarded according to local regulations.
5.Avoid using bloody samples.
6.Wear gloves wen handing the samples,avoid touching the reagent membrane and sample well.

STORAGE AND STABILITY

The validity period is 18 months if this product is stored in an environment of 2-30℃.The test is stable through the expiration date printed on the sealed pouch.The test must remain in the sealed pouch until use.
DO NOT FREEZE.
Do not use beyond the expiration date.

SPECIMEN COLLECTION AND PREPARTION

1. Saliva collection:
Do NOT eat, drink, smoke, or chew gum for 30 minutes before saliva collection procedure.
Severe mouth ulcers and bronchitis may affect the collection Contact infection should be avoided from different tested ones.
Using running water to clean mouth 30 minutes before saliva collection.
2. Process the sample immediately with sample extraction solution provided in the kit after the sample is collected. If it cannot be processed immediately, the sample should be stored in a dry, sterilized and strictly sealed plastic tube. It can be stored at 2-8℃ for 8 hours , and can be stored for a long time at -70℃.
3. Samples that are heavily contaminated by oral food residues cannot be used for testing of this product. It is not recommended to use the samples that are processed with sample extraction solution not provided in this kit for testing of this product.

KIT COMPONENTS

Materials provide

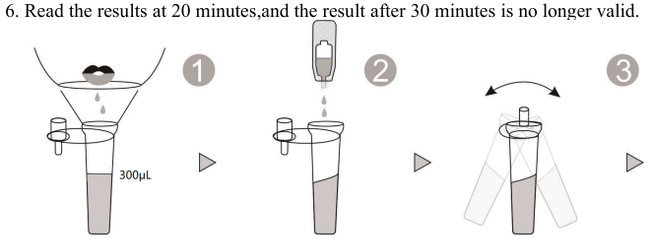
Test cassettes Extraction Reagent Saliva Collection kit
Package Insert Work station

Materials required but not provide

Timer For timing use.

DIRECTIONS FOR USE

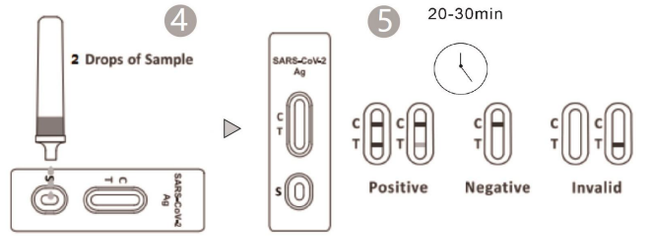
Allow the test,specimen,extraction reagent to equilibrate to room temperature(15-30℃) prior to testing.
1. Remove the test cassette from the sealed foil pouch and use it within 15 minutes. Best results will be obtained if the assay is performed immediately after opening the foil pouch.
2. Extend the tongue tip against the teeth of the upper or lower jaw to gather the saliva, then split it onto the oval funnel slightly till the saliva quantity could reach the 300µL of saliva (there is a 300µL scale on the tube wall) excluding bubbles is sufficient.
3. Place the Extraction Tube in the work station.Hold the extraction reagent bottle upside down vertically.Squeeze the bottle and let all of the solution (Approx,500µL) drop into the extraction tube freely without touching the edge of the tube to the Extraction Tube.
4. Fully mix the saliva and Antigen extraction reagent for 25-30 seconds by Pinching.
5. Install the dropper tip on the Antigen extraction tube, put 2 drops(Approx, 65µL) into the sample hole of the test card, and start the timer.
Notes: Applying sufficient amount of sample extraction liquid is essential for a valid test result. If migration (the wetting of membrane) is not observed in the test window after one minute, add one more drop in the extraction tube to sample well
6. Read the results at 20 minutes,and the result after 30 minutes is no longer valid.



Gather 300µL of saliva

Drop all of the extraction reagent (approx, 500µL) into the extraction tube

Fully mix the saliva and extraction reagent

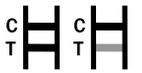


INTERPRETATION OF RESULTS

NEGATIVE RESULT:

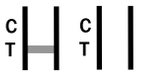
One colored line appears in the control line region (C).No line appears in the test region (T).A negative result indicates that SARS-CoV-2 antigen is not present in the specimen,or is present below the detectable level of the test.

POSITIVE RESULT:



Two lines appear.one colored line should be in the control region (C) and another apparent colored line should be in the test region (T).A positive result indicates that SARS-CoV-2 was detected in the specimen.

INVALID RESULT:



Control line fails to appear.Insufficient specimen volume or incorrect procedural techniques are most likely reasons for control line failure. Review the procedure and repeat the test with a new test. If the problem persists,discontinue using the test kit immediately and contact your local distributor.

NOTE:
The intensity of the color in test line region (T) will vary depending on the concentration of SARS-CoV-2 Antigen present in the specimen.Therefore,any shade of color in the test line region(T) should be considered positive.

QUALITY CONTROL

- A procedural control is included in the test. A colored line appearing in the control region(C) is considered an internal procedural control.It confirms adequate membrane wicking.
- Control standards are not supplied with this kit; however, it is recommended that positive and negative controls be tested as a good laboratory practice to confirm the test procedure and to verify proper test performance.

LIMITATIONS OF THE TEST

1. The SARS-CoV-2 Antigen Rapid Test Cassette is for professional in vitro diagnostic use only.The test should be used for the detection of SARS-CoV-2 Antigen in human saliva.Neither the quantitative value nor the rate of increase in SARS-CoV-2 concentration can be determined by this qualitative test.
2. The accuracy of the test depends on the quality of the saliva sample.False negatives may result form improper sample collection storage.
3. The SARS-CoV-2 Antigen Rapid Test Cassette will only indicate the presence of SARS-CoV-2 in the specimen from both viable and non-viable SARS-CoV-2 coronavirus strains.
4. As with all diagnostic tests,all results must be interpreted together with other clinical information available to the physician.
5. A negative result obtained from this kit should be confirmed by PCR.A negative result may be obtained if the concentration of the SARS-CoV-2 present in the saliva is not adequate or is below the detectable level of the test.
6. Excess blood or mucus on the saliva specimen may interfere with performance and may yield a false positive result.
7. A positive result for SARS-CoV-2 does not preclude an underlying co-infection with anther pathogen.Therefore the possibility of an unerlying bacterial infection should be considered.
8. Negative results do not rule out SARS-CoV-2 infection,particularly in those who have been in contact with the virus. Follow-up testing with a molecular diagnostic should be considered to rule out infection in these individuals.
9. Positive results may be due to present infection with non-SARS-CoV-2 coronavirus strains,such as coronavirus HKU1,NL63,OC43,or 229E.
10. Results from antigen testing should not be used as the sole basis to diagnose or exclude SARS-CoV-2 infection or to inform infection status.
11. Extraction reagent has the ability to kill the virus , but it cannot inactivate 100% of the virus.The method of inactivating the virus can be referred to: what method is recommended by WHO/CDC,or it can be handled according to local regulations.

PERFORMANCE CHARACTERISTICS

Sensitivity and Specificity

The SARS-CoV-2 Antigen Rapid Test Cassette has been evaluated with saliva specimens obtained from the patients.PCR is used as the reference method for the SARS-CoV-2 Antigen Rapid Test Cassette.Specimens were considered positive if PCR indicated a positive result.

Saliva: clinical study compare with RT-PCR

Method		RT-PCR		Total Results
SARS-CoV-2 Antigen Rapid Test Cassette	Results	Positive	Negative	
	Positive	110	3	113
	Negative	5	400	405
Total Results		115	403	518

Relative Sensitivity: 95.65%(95%CI*:90.14%-98.57%)
Relative Specificity: 99.26%(95%CI*:97.84%-99.85%)
*Confidence Intervals

Detection Limit

When the virus content is greater than 400$TCID_{50}$/ml, the positive detection rate is greater than 95%.When the virus content is less than 200$TCID_{50}$/ml, the positive detection rate is less than 95%, so the minimum detection limit of this product is 400$TCID_{50}$ /ml.

Precision

Three consecutive batches of reagents were tested for precision.Different batches of reagents were used to test the same negative sample 10 times in succession,and the results were all negative.Different batches of reagents were used to test the same positive sample 10 times in succession, and the results were all positive.

HOOK effect

When the virus content in the sample to be tested reaches 4.0*10^5TCID_{50}/ml, the test result still does not show the HOOK effect.

Cross-Reactivity

Cross-reactivity of the kit was evaluated.The results showed no cross reactivity with the following specimen.

Name	Concentration
HCOV-HKU1	10^5TCID_{50} /ml
Staphylococcus aureus	10^6TCID_{50} /ml
Group A streptococci	10^6TCID_{50} /ml
Measles virus	10^5TCID_{50} /ml
Mumps virus	10^5TCID_{50} /ml
Adenovirus type 3	10^5TCID_{50} /ml
Mycoplasmal pneumonia	10^6TCID_{50} /ml
Paraimfluenzavirus,type2	10^5TCID_{50} /ml
Human metapneumovirus	10^5TCID_{50} /ml
Human coronavirus OC43	10^5TCID_{50} /ml
Human coronavirus 229E	10^5TCID_{50} /ml
Bordetella parapertusis	10^6TCID_{50} /ml
Influenza B Victoria STRAIN	10^5TCID_{50} /ml
Influenza B YSTRAIN	10^5TCID_{50} /ml
Influenza A H1N1 2009	10^5TCID_{50} /ml
Influenza A H3N2	10^5TCID_{50} /ml
H7N9	10^5TCID_{50} /ml
H5N1	10^5TCID_{50} /ml
Epstein-Barr virus	10^5TCID_{50} /ml
Enterovirus CA16	10^5TCID_{50} /ml
Rhinovirus	10^5TCID_{50} /ml
Respiratory syncytial virus	10^5TCID_{50} /ml
Streptococcus pneumoni-ae	10^6TCID_{50} /ml
Candida albicans	10^6TCID_{50} /ml
Chlamydia pneumoniae	10^6TCID_{50} /ml
Bordetella pertussis	10^6TCID_{50} /ml
Pneumocystis jiroveci	10^6TCID_{50} /ml
Mycobacterium tubercu- losis	10^6TCID_{50} /ml
Legionella pneumophila	10^6TCID_{50} /ml
Human coronavirus NL63	10^5TCID_{50} /ml
MERS coronavirus	10^5TCID_{50} /ml

Interfering Substances

The test results do not be interfered with the substance at the following concentration:

Interfering substance	Conc.	Interfering substance	Conc.
Whole Blood	4%	Compound Benzoin Gel	1.5mg/ml
Ibuprofen	1mg/ml	Cromolyn glycate	15%
tetracycline	3ug/ml	chloramphenicol	3ug/ml
Mucin	0.5%	Mupirocin	10mg/ml
Erythromycin	3ug/ml	Oseltamivir	5mg/ml
Tobramycin	5%	Naphazoline Hydrochlo-ride Nasal Drops	15%
menthol	15%	Fluticasone propionate spray	15%
Afrin	15%	Deoxyepinephrine hydro-chloride	15%

IBIBLIOGRAPHY

1.Weiss SR,Leibowitz JZ.Coronavirus pathogenesis. Adv Virus Res 2011;81:85-164
2.Cui J,Li F,Shi ZL.Origin and evolution of pathogenic coronaviruses.Nat Rev Mic robiol 2019;17:181-192.
3.Su S,Wong G,Shi W,et al.Epidemiology,genetic recombination,and pathogenesis of coronaviruses. TrendsMicrobiol 2016;24:490-502.

Index of Symbols

	Consult instructions for use	Σ	Tests per kit	EC REP	Authorized Representative
IVD	For *in vitro* diagnostic use only		Use by		Do not reuse
2℃ 30℃	Store between 2-30°C	LOT	Lot Number	REF	Catalogue number

Hangzhou Sejoy Electronics & Instruments Co.,Ltd.
Area C, Building 2, No.365, Wuzhou Road,Yuhang Economic Development Zone,311100 Hangzhou City,Zhejiang China
Website: www.sejoy.com

EC REP **Shanghai International Holding Corp. GmbH (Europe)**
Eiffestrasse 80, 20537 Hamburg, Germany

CE