

2019-nCoV Saliva Ag EASY TEST (Immunochromatography)

For professional use only

Catalog Number: 0674C4X001 0674C4X002 0674C4X005 0674C4X010 0674C4X020 0674C4X025

INTENDED USE

The Test is a lateral flow immunoassay intended for the qualitative detection of nucleocapsid protein antigen from 2019-nCoV in saliva specimens directly collected from individuals who are suspected of COVID-19.

Results are for the identification of 2019-nCoV nucleocapsid protein antigen, Positive results indicate the presence of viral antigens, but clinical correlation with patient history and other diagnostic information is necessary to determine infection status.

SUMMARY AND EXPLANATION

The novel coronaviruses belong to the beta 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.

PRINCIPLE OF THE TEST

This test uses double-antibody sandwich to legally detect the antigen of novel coronavirus (2019-nCoV) in saliva samples. During detection, the gold labeled anti-2019-nCoV monoclonal antibody in the labeling pad binds to the 2019-nCoV antigen in the sample to form a complex, and the reaction complex moves forward along the nitrocellulose membrane under the action of chromatography, it is captured by the anti-2019-nCoV monoclonal antibody pre-coated by the detection zone (T) on the nitrocellulose membrane, and finally a red color reaction line is formed in the T zone.

MATERIALS AND COMPONENTS

Table with 7 columns: Specifications, 0674C 4X001, 0674C 4X002, 0674C 4X005, 0674C 4X010, 0674C 4X020, 0674C 4X025. Rows: Ingredients, Midstream, Instructions for use, Quick Reference Instructions.

Materials required but not provided

- 1. Timer

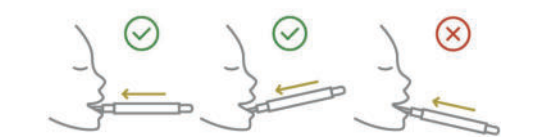
STORAGE AND STABILITY

- 1. Store the test as packaged between 2-30°C.
2. The Test stable until the expiration date printed on the outer packing, the product will be expired after 24 months.
3. Do not use beyond the expiration date.
4. Do not freeze any contents of the test.
5. The test must remain in the sealed pouch until use.

TEST PROCEDURE

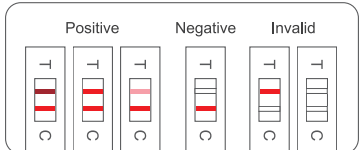
- Before test, please read the instructions carefully.
1. Take the midstream to equilibrate to room temperature.
2. Open the aluminum foil bag, take out the midstream.
3. Insert the absorbent tip into the mouth. Make sure midstream is horizontally placed.
4. Swab the absorbent tip in the mouth and tongue to collect oral fluid.
5. Take the absorbent tip out from the mouth when the purple color move across the result window in the center of the midstream.
6. Wait for 10 minutes and read the results.

NOTE:
\*When sampling, gently hold it in mouth and let saliva naturally adsorb on the absorbent tip.
\*Do not eat, drink, or smoke prior to the test for at least 30 Minutes.
\*Any saliva specimen is appropriate for testing but the saliva specimen collected in the morning, before mouth rinsed, eating or drinking, is recommended.



INTERPRETATION OF TEST RESULTS

This product can only perform qualitative analysis on the detection object.
Positive Result: If both C and T lines are visible within 10 minutes, the test result is positive and valid.
Negative Result: If test area (T line) has no color and the control area displays a colored line, the result is negative and valid.
Invalid Result: The test result is invalid if a colored line does not form in the control region. The sample must be re-tested, using a new test.



INTERNAL CONTROL

The test contains a built-in internal control in the midstream. A color band appearing in the control region (C) is designed as an internal control. The appearance of the control line confirms that sufficient flow has occurred, and that the midstream is working normally.

LIMITATIONS

1. The result of the test should not be taken as a confirmed diagnosis, for clinical reference only. Judgement should be made along with RT-PCR results, clinical symptoms, epidemiological information, and further clinical data.

- 2. The Test performance depends on the amount of virus (antigen) in the sample and may or may not correlate with viral culture results performed on the same sample.
3. The test must be equilibrated to room temperature (18°C~26°C) before used, otherwise the results may be incorrect.
4. A negative test result may occur if the level of antigen in a sample is below the detection limit of the test.
5. Failure to follow the Test Procedure may adversely affect test performance and/or invalidate the test result.
6. React less than 10 minutes may lead a false negative result; React more than 10 minutes may lead a false positive result.
7. Positive test results do not rule out co-infections with other pathogens.
8. Negative test results are not intended to rule in other viral or bacterial infections.
9. Negative results should be treated as presumptive and confirmed with a molecular assay.
10. Clinical performance was evaluated with fresh samples.
11. Users should test specimens as quickly as possible after specimen collection.

PERFORMANCE CHARACTERISTIC

1. Clinical Verification
The performance of Test was established with 232 sample collected from symptomatic patients, who with symptoms onset within 7 days.

Table comparing 2019-nCoV Saliva Ag EASY TEST results with Comparative RT-PCR Test Result (Positive, Negative, Total) for Sensitivity, Specificity, and Accuracy.

Positive results broken down by days since symptom onset:

Table showing Days since symptom onset, RT-PCR Positive (+), 2019-nCoV Saliva Ag EASY TEST (Immunochromatography), and PPA percentages.

Positive results broken down by Ct value:

Table comparing 2019-nCoV Saliva Ag EASY TEST results with Comparative RT-PCR Method (Positive by Ct Value) for Positive (Ct<=25) and Positive (Ct>25) counts and agreement percentages.

2. Limit of Detection
The experimental results show that for the virus culture concentration above 100 TCID50/mL, the positive rate of detection is greater than or equal to 95%. For the virus culture concentration of 50 TCID50/mL and below, the positive rate of detection is lower than 95%. So, the limit of detection of the Test is 100 TCID50/mL.

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

Table listing various specimens (No. 1-21) and their concentrations (Conc.), such as HCoV-HKU1, Staphylococcus aureus, Streptococcus pyogenes, Measles virus, Paramyxovirus parotitis, Adenovirus 3, Mycoplasma pneumoniae, Parainfluenza virus 2, Human Metapneumovirus (hMPV), Human coronavirus OC43, Human coronavirus 229E, Human coronavirus NL63, MERS-Coronavirus EMC/2012, Bordetella parapertussia, Influenza B (Victoria strain), Influenza B (Y strain), Influenza A (H1N1 2009), Influenza A (H3N2), Avian influenza virus (H7N9), Avian influenza virus (H5N1), Epstein-Barr virus.

Table listing Enterovirus CA16, Rhinovirus, Respiratory syncytial virus, Streptococcus pneumoniae, Candida albicans, Chlamydia pneumoniae, Bordetella pertussis, Pneumocystis jirovecii, Mycobacterium tuberculosis, and Legionella pneumophila with their respective concentrations.

4. Interference Substances
The test results do not be interfered with the substance at the following concentration:

Table listing various interference substances (No. 1-10) and their concentrations (Conc.), such as Whole Blood, Ibuprofen, Tetracycline, Chloramphenicol, Erythromycin, Tobramycin, Throat spray (Menthol), Mupirocin, Throat lozenge (Menthol), Tamiflu (Oseltamivir).

Table listing various medical products (No. 11-18) and their concentrations, such as Naphthoxoline hydrochloride nasal drops, Mucin, Fisherman's Friend, Compound Benzocain Gel, Cromoglycate, Sinex (Phenylephrine Hydrochloride), Afrin (Oxymetazoline), Fluticasone propionate spray.

5. Precision
1. Test 10 replicates of negative and positive by using the reference materials of enterprises. The negative agreement and the positive agreement were 100%.
2. Test three different lots kits including positive and negative reference materials of enterprises. The negative results and the positive results were 100%.
6. Hook Effect
The Test was tested up to 1.6 × 10^5 TCID50/ml of heat-inactivated 2019-nCoV strain and no high-dose effect was observed.

PRECAUTIONS

- 1. For in vitro diagnostic use.
2. Use appropriate precautions in the collection, handling, storage, and disposal of patient samples and used test contents.
3. Use of Nitrile, Latex (or equivalent) gloves is recommended when handling patient samples.
4. Do not reuse the used midstream or saliva swab.
5. Should never open the foil pouch of the midstream exposing it to the ambient environment until the midstream is ready for immediate use.
6. Discard and do not use any damaged or dropped midstream or material.
7. Inadequate or inappropriate sample collection, storage, and transport may yield false test results.
8. Sample collection and handling procedures require specific training and guidance.
9. To obtain accurate results, do not use visually bloody or overly viscous samples.
10. To obtain accurate results, an opened and exposed midstream should not be used.
11. Testing should be performed in an area with adequate ventilation.
12. Wear suitable protective clothing, gloves, and eye/face protection when handling the contents of this test.
13. Wash hands thoroughly after handling.

KEY TO SYMBOLS USED

Icons and descriptions for symbols: Consult instructions for use, Temperature limit 2°C~30°C, Use-by date, Manufacturer, Batch code, In Vitro Diagnostic Medical Device, Authorized representative in the European Community, Date of manufacturer, Do not re-use, Keep away from Sunlight, Contains sufficient for <n> tests, Catalogue Number, Keep Dry.

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