Novel Coronavirus (SARS-Cov-2) Antigen Rapid Test Device (saliva) Package Insert

A RAPID TEST FOR THE QUALITATIVE DETECTION OF NOVEL CORONAVIRUS ANTIGENS IN HUMAN SALIVA.

For professional In Vitro Diagnostic Use Only

INTENDED USE

The Novel Coronavirus (SARS-Cov-2) Antigen Rapid Test Device (saliva) is an in vitro diagnostic test for the qualitative detection of novel coronavirus antigens in human saliva, using the rapid immunochromatographic method. The identification is based on the monoclonal antibodies specific for the novel coronvirus antigen. It will provide information for clinical doctors to prescribe correct medications.

SUMMARY

The novel coronaviruses belong to the ß 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 Novel Coronavirus (SARS-Cov-2) Antigen Rapid Test device (saliva) is an immunochromatographic membrane assay that uses highly sensitive monoclonal antibodies to Novel coroinavirus.

The test strip is composed of the following three parts, namely sample pad, reagent pad and reaction membrane. The reagent membrane contains the colloidal-gold conjugated with the monoclonal antibodies against Novel coroinavirus; the reaction membrane contains the secondary antibodies for Novel coroinavirus, and the polyclonal antibodies against the mouse globulin which are pre-immobilized on the membrane

When the test device was inserted into saliva sample, conjugates dried in the reagent pad are dissolved and migrate along with the sample. If Novel coroinavirus is present in the sample, a complex formed between the anti- Novel coroinavirus conjugate and the virus will be caught by the specific anti- Novel coroinavirus monoclonal coated on the T region.

Whether the sample contains the virus or not, the solution continues to migrate to encounter another reagent (an anti-mouse log antibody) that binds the remaining conjugates, thereby producing a red line on the region C.

REAGENTS

The reagent membrane contains the colloidal-gold conjugated with the monoclonal antibodies against Novel coroinavirus; the reaction membrane contains the secondary antibodies for Novel coroinavirus, and the polyclonal antibodies against the mouse globulin, which are pre-immobilized on the membrane

PRECAUTIONS

· For in vitro diagnostic use only.

· Do not use after the expiration date.

· Ensure foil pouch containing test device is not damaged before opening for use.

Perform test at room temperature 15 to 30°C.

•Wear gloves when hanging the samples, avoid touching the reagent membrane and sample window.

· All samples and used accessories should be treated as infectious and discarded according to local regulations. · Avoid using bloody samples

STORAGE AND STABILITY

Store The Novel Coronavirus (SARS-Cov-2) Antigen Rapid Test device (saliva) at room temperature or refrigerated (2-30°C). Do not freeze. All reagents are stable until the expiration dates marked on their outer packaging and buffer vial.

SPECIMEN COLLECTION AND PREPARATION

1. Specimen collection:

The oral fluid specimen should be collected using the collection tools provided with the kit.Follow the detailed Directions for Use below.No other collection tools should be used with this assay. Oral fluid collected at any time of the day may be used.

2. Specimen preparation:

There are two methods to collect saliva, when the saliva is collected, follow the each direction to prepare the specimen with buffer provided with the kit.

	MATERIALS			
Materials provided				
 Test device 	 Saliva collector 	 Extraction buffer 		
 Package Insert 	Nozzle	 Extraction tube 		
 Tube stand* 	 Saliva collect cup/bag 	 Dropper 		

Plastic bag

*The 20-test package contains the tube stand, the 1-test and 5-test package use the test box itself as tube stand.

Materials required but not provided

• Timer

DIRECTIONS FOR USE

Allow the test device, specimen, extraction buffer to equilibrate to room temperature

(15-30°C) prior to testing.Do not place anything in the mouth including food,drink,gum, tobacco,water and mouthwash products for at least 10 minutes prior to collection of oral fluid specimen.

Saliva can be collected by saliva collector or saliva collect cup:

For saliva collect cup:

1. Spit enough saliva into the saliva collect cup/bag.

2. draw the saliva from the cup with a dropper, transfer 4 drops of saliva to the extraction tube. 3. Take out an extraction tube and a bottle of extraction buffer, remove the extraction buffer bottle cap, add all the extraction buffer into the extraction tube.

4. Take out a nozzle and close into the extraction tube, gently shake the extraction tube vertically for about 5 seconds to allow saliva mix well with extraction buffer.

5. Fold the used cup/bag in half and discard it into the plastic bag as medical waste in accordance with local regulations



For saliva collector*:

1. Insert the sponge of saliva collector into the mouth, actively swab the inside of the mouth and tongue to collect oral fluid for approximately 10 seconds until the sponge becomes soft and fully saturated, The sponge will be free from hard spots when fully saturated.

2. Take out an extraction tube and a bottle of extraction buffer, remove the extraction buffer bottle cap, add all the extraction buffer into the extraction tube. Remove the collector from the mouth and put the saturated saliva collector into the extraction tube.

4. Squeeze the wall of the extraction tube against the sponge by hand, so that the saliva in the sponge of the saliva collector flows into the extraction tube, fix sponge across the tube wall to separate sponge and plastic holder. After separation, discard plastic holder and leave sponge in the tube.

5. Take out a nozzle and close into the extraction tube, gently shake the extraction tube vertically for about 5 seconds to allow saliva mix well with extraction buffer.

*:Since there are some differences in saliva of each person, the adsorption capacity of the sponge for different people will be different. We recommend using saliva collect cup/bag and dropper when collecting saliva.



When the sample is ready, take the following procedures to complete the test:

1. Remove the test device from the sealed foil pouch and use it as soon as possible. Best results will be obtained if the assay is performed immediately after opening the foil pouch. Put the test device on a clean and flat surface.



NTERPRETATION OF RESULTS

(Please refer to the illustration above) **POSITIVE:** Two red lines appear. One red line appears in the control region(C), and one red line in the test region(T). The shade of color may vary, but it should be considered positive whenever there is even a faint line.

NEGATIVE: Only one red line appears in the control region(C), and no line in the test region(T). The negative result indicates that there are no Novel coroinavirus particles in the sample or the number of viral particles is below the detectable range.

INVALID: No red line appears in the control region(C). The test is invalid even if there is a line on test region(T). Insufficient sample volume or incorrect procedural techniques are the most likely reasons for control line failure. Review the test procedure and repeat the test using a new test device. If the problem persists, discontinue using the test kit immediately and contact your local distributor.

LIMITATIONS

• The Novel Coronavirus (SARS-Cov-2) Antigen Rapid Test device (saliva) is an acute-phase screening test for qualitative detection. Sample collected may contain antigen concentration below the reagent's sensitivity threshold, so a negative test result does not exclude infection with novel coronavirus

• The Novel Coronavirus (SARS-Cov-2) Antigen Rapid Test device (saliva) detects viable and non-viable novel coronavirus antigen. Test performance depends on antigen load in the sample and may not correlate with cell culture performed on the same sample. A positive test does not rule out the possibility that other pathogens may be present, therefore, the results must be compared with all other available clinical and laboratory information to make an accurate diagnosis.

· A negative test result may occur if the level of extracted antigen in a specimen is below the sensitivity of the test or if poor quality specimen is obtained.

· Performance of the test has not been established for monitoring antiviral treatment of novel coronavirus

· Positive test results do not rule out co-infections with other pathogens.

· Negative test results are not intended to rule in other coronavirus infection except the SARS-Cov-2

· Children tend to shed virus for longer periods of time than adults, which may result in differences in sensitivity between adults and children List.

 The concentration of virus in saliva is greatly affected by factors such as meals, diet, smoking, breath fresheners, etc. Therefore, please strictly follow this manual before collecting samples

A negative result may occur if the concentration of antigen in a specimen is below the detection limit of the test or if the specimen was collected or transported improperly, therefore a negative test result does not eliminate the possibility of SARS-Cov-2 infection, and should be confirmed by viral culture or PCR.

PERFORMANCE CHARACTERISTICS

Clinical Evaluation

Clinical evaluation was performed to compare the results obtained by Novel Coronavirus (SARS-Cov-2) Antigen Rapid Test device (saliva) and PCR. The results were summarized helow

Table: Novel Coronavirus (SARS-Cov-2) Antigen Rapid Test device (saliva) vs. PCR

Method		2019-nCoV Nucleic Acid Test Kit (RT-PCR)		Total Results
The Novel Coronavirus	Results	Positive	Negative	
(SARS-Cov-2) Antigen Rapid	Positive	62	0	62
Test device (saliva)	Negative	4	156	160
Total Results		66	156	222

Clinical sensitivity = 62/66= 93.94 % (95%CI*84.99% to 98.06%)

Clinical specificity =156/156>99.9% (95%CI* 98.98% to 100%) Accuracy: (62+156)/ (62+0+4+156) *100%=98.20% (95%CI* 95.29% to 99.46%)

*Confidence Interval

Limit of Detection (LoD)

Realy Teo	ch product					
1 X 10 ⁵ T	CID ₅₀ /mL					
1/100	1/200	1/400	1/800	1/1600		
1X10 ³	5X10 ²	2.5X 10 ²	1.25X10 ²	62.5		
100(20/20)	100(20/20)	100(20/20)	95(19/20)	10(2/20)		
1.25 X 10 ² TCID ₅₀ /mL						
	1 X 10 ⁵ T 1/100 1X10 ³ 100(20/20)	1X10 ³ 5X10 ² 100(20/20) 100(20/20)	1 X 10 ⁵ TCID ₅₀ /mL 1/100 1/200 1/400 1X10 ³ 5X10 ² 2.5X 10 ² 100(20/20) 100(20/20) 100(20/20)	1 X 10° TCID ₅₀ /mL 1/100 1/200 1/400 1/800 1X103 5X102 2.5X 102 1.25X102 100(20/20) 100(20/20) 100(20/20) 95(19/20)		

Cross Reaction

The test results are below the corresponding concentration of the substances in the table below. which has no effect on the negative and positive test results of this reagent, and there is no cross-reaction

Virus/Bacteria/Parasite	Strain	Concentration
MERS-coronavirus	N/A	72 µg/mL
	Type 1	1.5 x 10 ⁶ TCID ₅₀ /mL
	Туре 3	7.5 x 10 ⁶ TCID ₅₀ /mL
	Туре 5	4.5 x 106TCID ₅₀ /mL
	Туре 7	1.0 x 106TCID ₅₀ /mL
Adenovirus	Туре 8	1.0 x 106TCID ₅₀ /mL
	Type 11	2.5 x 106TCID ₅₀ /mL
	Type 18	2.5 x 106TCID ₅₀ /mL
	Туре 23	6.0 x 10 ⁶ TCID ₅₀ /mL
	Type 55	1.5 x 106TCID ₅₀ /mL
Influenza A	H1N1 Denver	3.0 x 108TCID ₅₀ /mL
Influenza A	H1N1 WS/33	2.0 x 108TCID 50/mL



3. Read the result at 10~20 minutes. Don't interpret the result after 20 minutes.

	H1N1 A/Mal/302/54	1.5 x 108TCID ₅₀ /mL
	H1N1 New Caledonia	7.6 x 108TCID ₅₀ /mL
	H3N2 A/Hong Kong/8/68	4.6 x 108TCID ₅₀ /mL
	Nevada/03/2011	1.5 x 108TCID ₅₀ /mL
Influenza B	B/Lee/40	8.5 x 10 ⁸ TCID ₅₀ /mL
initiacitza D	B/Taiwan/2/62	4.0 x 10 ⁸ TCID ₅₀ /mL
B		2.5 x 10°TCID ₅₀ /mL
Respiratory syncytial virus	N/A	
	Bloomington-2	1 x 10 ⁵ PFU/mL
Legionella pneumophila	Los Angeles-1	1 x 10 ⁵ PFU/mL
	82A3105	1 x 10 ⁵ PFU/mL
Rhinovirus A16	N/A	1.5 x 106TCID50/mL
	К	1 x 10 ⁵ PFU/mL
	Erdman	1 x 10 ⁵ PFU/mL
Mycobacterium tuberculosis	HN878	1 x 10 ⁵ PFU/mL
	CDC1551	1 x 10 ⁵ PFU/mL
	H37Rv	1 x 10 ⁵ PFU/mL
	4752-98 [Maryland (D1)6B-17]	1 x 10 ⁵ PFU/mL
Otropto co cours anoumonio	178 [Poland 23F-16]	1 x 10 ⁵ PFU/mL
Streptococcus pneumonia	262 [CIP 104340]	1 x 10 ⁵ PFU/mL
	Slovakia 14-10 [29055]	1 x 10 ⁵ PFU/mL
Streptococcus pyrogens	Typing strain T1 [NCIB 11841, SF 130]	1 x 10⁵PFU/ml
	Mutant 22	1 x 10⁵PFU/ml
Mycoplasma pneumoniae	FHstrainofEatonAgent [NCTC10119]	1 x 10 ⁵ PFU/ml
	36M129-B7	1 x 10⁵PFU/ml
	229E	1.5 x10 ⁶ TCID ₅₀ /ml
	OC43	1.5 x10 ⁶ TCID ₅₀ /ml
Coronavirus	NL63	1.5 x 10 ⁶ TCID ₅₀ /ml
	HKU1	1.5 x 10 ⁶ TCID ₅₀ /ml
		1.5 X 10 1010 ₅₀ /111
Human etapneumovirus (hMPV) 3 Type B1	Peru2-2002	1.5 x 10 ⁶ TCID ₅₀ /ml
Human Metapneumovirus (hMPV) 16 Type A1	IA10-2003	1.5 x 106TCID ₅₀ /ml
	Туре 1	1.5 x 106TCID ₅₀ /ml
Dentification	Type 2	1.5 x 106TCID ₅₀ /ml
Parainfluenza virus	Type 3	1.5 x 106TCID ₅₀ /ml
	Type 4A	1.5 x 106TCID ₅₀ /ml
	חד סקני	1.5 X 100101250/111

Interfering Substances Reaction When tested using the Novel Coronavirus (SARS-Cov-2) Antigen Rapid Test Device (saliva), there was no interference between the device reagents and the Potential interference substances listed in below table that would create false positive or negative results for SARS-Cov-2 antigen.

Substance	Concentration	Substance	Concentration
Mucin	100µg/mL	Acetylsalicylic acid	3.0 mM
Whole Blood	5% (v/v)	Ibuprofen	2.5 mM
Biotin	100µg/mL	Mupirocin	10 mg/mL
Neo-Synephrine (Phenylephrine)	5%(v/v)	Tobramycin	10µg/mL
Afrin Nasal Spray (Oxymetazoline)	5%(v/v)	Erythromycin	50uM
Saline Nasal Spray	5%(v/v)	Ciprofloxacin	50uM
Homeopathic	5%(v/v)	Ceftriaxone	110mg/mL
Sodium Cromoglycate	10 mg/mL	Meropenem	3.7µg/mL
Olopatadine Hydrochloride	10 mg/mL	Tobramycin	100µg/mL
Zanamivir	5 mg/mL	Histamine Hydrochloride	100µg/mL
Oseltamivir	10 mg/mL	Peramivir	1mmol/mL
Artemether-lumefantrine	50uM	Flunisolide	100µg/mL
Doxycycline hyclate	50uM	Budesonide	0.64nmol/ L
Quinine	150uM	Fluticasone	0.3ng/mL
Lamivudine	1 mg/mL	Lopinavir	6µg/mL
Ribavirin	1 mg/mL	Ritonavir	8.2mg/mL
Daclatasvir	1 mg/mL	Abidor	417.8ng/mL
Acetaminophen	150uM	Pooled human nasal wash	N/A

ĺ	SYMBOL				
	Symbol	Meaning	Symbol	Meaning	
	IVD	In vitro diagnostic medical device	X	Storage temperature limit	
	***	Manufacturer	EC REP	Authorized representative in the European Community	

~~	Date of Manufacture	\Box	Use by date
\otimes	Do not reuse	Ĩ	Consult instruction for use
LOT	Batch code	CE	Meet the requirements of EC Directive 98/79/EC

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