COVID-19 Ag Detection Kit
(Colloidal Gold Immunochromatography)
Catalog Number 41A254
(Please read this instruction manual before use.)

INTENDED USE

COVID-19 Ag Detection Kit (Colloidal Gold Immunochromatography) is a lateral flow antigen rapid diagnostic test that uses highly specific monoclonal antibodies to qualitatively detect SARS-CoV-2 Nucleocapsid protein (NP) from nasopharyngeal/nasal or oropharyngeal secretions of individuals suspected of COVID-19.

SUMMARY

The spread of Severe Acute Respiratory Syndrome Coronavirus-2 (SARS-CoV-2) has caused a worldwide COVID-19 pandemic. Rapid identification and isolation of COVID-19 patients is the main strategy to contain this pandemic.
COVID-19 Ag Detection Kit (Colloidal Gold Immunochromatography) is a rapid flow immunoassay for the qualitative detection and diagnosis of SARS-CoV-2 from nasopharyngeal/nasal or oropharyngeal swab.

ASSAY PRINCIPLE

This assay is based on the specific antibody-antigen reaction with colloidal gold immunochromatography. A monoclonal antibody against SARS-CoV-2 NP conjugated with colloidal gold particles is pre-coated on the conjugation pad together with colloidal gold conjugated goat anti-chicken IgY as the control particles. Another monoclonal antibody against SARS-CoV-2 NP is immobilized on the membrane, while the chicken IgY is pre-coated as the control line.
During testing, SARS-CoV-2 NP present in the samples bind to the monoclonal antibody conjugated colloidal gold. The complex migrates upward by the capillary effect and is captured by the anti-SARS-CoV-2 NP monoclonal antibodies immobilized on the membrane forming a test line (T). The remaining conjugate continues to migrate until it binds to the chicken IgY and forms a control line (C). The result is visible within 15 minutes.

REAGENTS AND MATERIALS

1. COVID-19 Ag strip
2. Sample lysis buffer
3. Swabs
4. Product Insert

OTHER MATERIALS REQUIRED, BUT NOT PROVIDED

1. Timer or clock.
2. Disinfectant

STORAGE

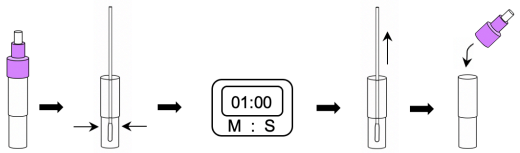
- The kit needs to be stored at 4 °C ~30 °C and in a dry environment.
- Avoiding freezing strips and buffer.
- The test strip is stable until the expiry date only if it has not been opened and kept in the sealed aluminum pouch.
- Do not open the sealed pouch until use.
- Do not reuse the device.

PRECAUTIONS

- All reagents are for *in vitro* diagnostics use only.
- Before using this kit, please take off your hand jewelry and then wash hands with soap or an alcohol-based sanitizer.
- All reagents should be equilibrated to room temperature before use.
- Avoid touching nitrocellulose membrane with your fingers.
- The kit is suitable for people aged 18-70 to perform self-test. People aged 1 to 18 should be accompanied by adults to use the kit.
- Specimens should be tested immediately after collection.
- Please use the right volume of samples for the testing, otherwise it may lead to biased results.
- The quality of expired reagents cannot be guaranteed or if reagents are not stored under required conditions as indicated in the manual.
- Do not use the strip if the pouch is damaged or the seal is broken.
-If buffer solution contacts eyes and/or skin, flush abundantly with water.

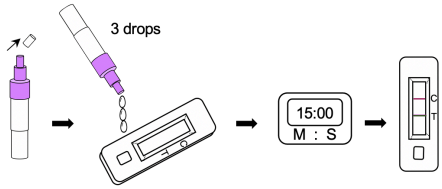
ANTERIOR NASAL SPECIMEN PREPARATION

1. Carefully insert the swab into the user's nostril. The swab tip should be inserted up to 1 inch (2.5 cm) form the edge of the nostril.
2. Dab along the lining of the nostril and roll the swab at least five times.
3. Remove the swab from the nasal cavity.
4. Insert the swab into the sample lysis buffer. Rotate the swab 5 times and wait for 1 minute.
5. Squeeze the wall of the tube to remove the solution from the swab and remove the swab.
6. Screw the nozzle cap tightly onto the tube.



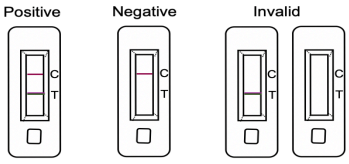
TEST PROCEDURE

Preparation of the test:
Equilibrate kit components in unopened packaging to room temperature (15-30 °C) before starting the test.
Clearly label the extraction tube with patient's information.
Analysis of Specimen:
1. Open the pouch and remove the strip.
2. Invert the extraction tube and add 3 drops of the extracted specimen to the specimen well (S).
3. Read the test result at 15 minutes.



Do not interpret the result after 20 minutes.

INTERPRETATION OF TEST RESULT



- ✧ **Positive:**
  The presence of two lines as the control line (C) and the test line (T) in the result window.
- ✧ **Negative:**
  The presence of a single line as the control line (C) in the result window.
- ✧ **Invalid:**
  If the control line (C) is not visible within the result window after performing the test, the result is invalid.

LIMITATIONS OF TEST

- A negative test result may occur if the level of the extracted antigen in a specimen is below the sensitivity of the test or if a poor-quality specimen is obtained.
- Negative test results do not rule out the possibility of SARS-CoV-2 infection, which should be further confirmed by RT-PCR.
- The test result must always be evaluated with other data available to the physician.

IMD ImmunoDiagnostics Limited
Website: www.immunodiagnostics.com.hk; **E-mail:** info@immunodiagnostics.com.hk;
Tel: (+852) 3502 2780 / (+86) 0755-2663 1330 ; **Fax:** (+852) 3502 2781

- The performance of this device has not been assessed in a population vaccinated against COVID-19.

WASTE DISPOSAL

- Use a household bleach spray or a 70%-75% alcohol spray to disinfect used product components and other place contacted with the sample.
- Wash the hands thoroughly.
- Each user is responsible for the management of any waste produced and must ensure that it is disposed of in accordance with the applicable legislation.

ASSAY PERFORMANCE

Sensitivity and specificity:

The COVID-19 Ag Detection Kit (Colloidal Gold Immunochromatography) has been evaluated with nasal specimens obtained from 105 COVID-19 patients and 425 non-infected negative controls. Tests were conducted within 7 days of symptom onset. Two nasal swabs were collected and tested using COVID-19 Ag Detection Kit (Colloidal Gold Immunochromatography). An FDA Emergency Use Authorized Real-time Polymerase Chain Reaction (RT-PCR) assay for the detection of SARS-CoV-2 was utilized as the comparator method for this study.

Reagent		RT-PCR		Total
		Positive	Negative	
COVID-19 Ag Detection Kit	Positive	97	11	108
	Negative	8	414	422
Total		105	425	530
Positive Agreement: 97/105 92.38% (95%CI: 87.44%-98.07%)				
Negative Agreement: 414/425 97.41% (95%CI: 95.47%-99.21%)				

Analytical Performance

Analytical Sensitivity

The LOD of COVID-19 Ag Detection Kit (Colloidal Gold Immunochromatography) was confirmed as $2.8x10^2$ $TCID_{50}$/ml.

$TCID_{50}$/ml	Number Positive/Total	% Detected
2.8×10^2	19/20	95
pg/ml	Number Positive/Total	% Detected
75	19/20	95

High Dose Hook Effect

No high dose hook effect was noted when tested with up to a concentration of $2.8x10^6$ $TCID_{50}$/ml of inactivated SARS-CoV-2 virus with COVID-19 Ag Detection Kit (Colloidal Gold Immunochromatography).

Endogenous Substances Interference Test

The following substances with test concentration in the table do not affect the performance of COVID-19 Ag Detection Kit (Colloidal Gold Immunochromatography).

Substance	Concentration	Substance	Active Ingredient	Concentration
Mucin	2% w/v	OTC Nasal Drop	Phenylephrine	12% v/v
Benzocaine	5 mg/ml	OTC Nasal Spray 1	Cromolyn	15% v/v
Tobramycin	5 ug/ml	OTC Nasal Spray 2	Oxymetazoline	15% v/v
Oseltamivir phosphate	10 mg/ml	OTC Nasal Spray 3	Fluconazole	5% w/v
Arbidol	5 mg/ml	OTC Homeopathic Nasal Spray 1	Zincum gluconium	5% w/v
Triamcinolone	10 mg/ml			
Mupirocin	10 mg/ml	OTC Homeopathic Nasal Spray 2	Alkalol	10% v/v
Zanamivir	5 mg/ml			
Ribavirin	5 mg/ml	OTC Homeopathic Nasal Spray 3	Fluticasone Propionate	5% v/v
Dexamethasone	5 mg/ml			

Cross Reactivity and Microbial Interference

Cross reactivity and potential interference of COVID-19 Ag Detection Kit (Colloidal Gold Immunochromatography) was tested in microorganisms listed in the table that may be present in the nasal cavity. No cross reactivity or interference was noted when tested at the concentration presented in the table below.

Type	Human Cross Reactant	Test Concentration
Coronavirus	Human coronavirus HKU1	1×10^5 $TCID_{50}$/ml
	Human coronavirus OC43	1×10^5 $TCID_{50}$/ml
	Human coronavirus NL63	1×10^5 $TCID_{50}$/ml
	Human coronavirus 229E	1×10^5 $TCID_{50}$/ml
	SARS-coronavirus	10 μg/ml
	MERS-coronavirus	10 μg/ml
Virus	Rhinovirus	1×10^5 PFU/ml
	Adenovirus	1×10^5 $TCID_{50}$/ml
	Human Metapneumovirus	1×10^5 $TCID_{50}$/ml
	Parainfluenza 1	1×10^5 $TCID_{50}$/ml
	Parainfluenza 2	1×10^5 $TCID_{50}$/ml
	Parainfluenza 3	1×10^5 $TCID_{50}$/ml
	Parainfluenza 4	1×10^5 $TCID_{50}$/ml
	Influenza A	1×10^5 $TCID_{50}$/ml
	Influenza B	1×10^5 $TCID_{50}$/ml
	Enterovirus	1×10^5 $TCID_{50}$/ml
	Respiratory syncytial virus	1×10^5 PFU/ml
Bacteria	Bordetella pertussis	1×10^6 cells/ml
	Chlamydia pneumoniae	1×10^6 IFU/ml
	Haemophilus influenzae	1×10^6 cells/ml
	Legionella pneumoniae	1×10^6 cells/ml
	Mycoblasma pneumoniae	1×10^6 U/ml
	Streptococcus pneumoniae	1×10^6 cells/ml
	Streptococcus pyogenes	1×10^6 cells/ml
	Mycobacterium tuberculosis	1×10^6 cells/ml
	Staphylococcus aureus	1×10^6 org/ml
	Staphylococcus epidermidis	1×10^6 cells/ml
Yeast	Candida albicans	1×10^6 cells/ml
Pooled human nasal wash		-

Note: $TCID_{50}$ -Median Tissue Culture Infectious Dose; PFU-Plaque Forming Unit

SYMBOLS

	Manufacturer	CE	EC Declaration of Conformity
	Expiry date		Consult Instruction
LOT	Lot number		Store
REF	Catalog number		Caution
IVD	In Vitro Diagnostic Device	EC REP	Name and Address of EU REP

ImmunoDiagnostics Limited
5F, Biotech Centre 2 (11W), No. 11 Science Park
West Avenue, Hong Kong Science Park, Shatin. NT, Hong Kong
E-mail: info@immunodiagnostics.com.hk
Tel: (+852) 3502 2780; Fax: (+852)3502 2781

EC REP **SUNGO Europe B.V.**
VAT：NL857821659B01
Address: Olympisch Stadion 24, 1076DE Amsterdam, Netherlands

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