Zika Virus IgG/IgM+NS1 Antigen Rapid Test Kit (Colloidal Gold)

Instruction for Use

Read this instruction carefully before use

A rapid test for the qualitative detection of Zika Virus IgG/IgM+NS1 Antigen *in human* serum, plasma or whole blood. *For professional medical institutions use only,Not for self testing.*

PRODUCT NAME

Zika Virus IgG/IgM+NS1 Antigen Rapid Test Kit (Colloidal Gold)

SPECIFICATION

25 tests/kit, 5 tests/kit, 1 tests/kit

INTENDED USE

The Zika Virus IgG/IgM+NS1 Antigen Rapid Test is a lateral flow chromatographic immunoassay for the qualitative detection of Zika Virus IgG/IgM antibody and NS1antigen in human serum ,plasma or whole blood. It is intended to be used as a screening test and as an aid in the diagnosis of infection with Zika Virus viruses. Any reactive specimen with the Zika Virus IgG/IgM+NS1 antigen Rapid Test must be confirmed with alternative testing method(s) and clinical findings.

SUMMARY AND EXPLANATION THE TEST

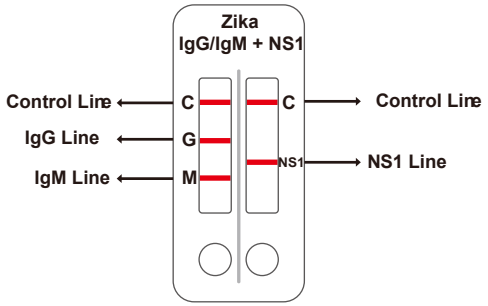
Zika virus (Zika): mainly transmitted through the bite of Aedes mosquito,mother and child, blood transfusion and sexual transmission.Because there is no vaccine at present,people is generally susceptible to infection. IgG/IgM antibody is produced one week after onset, so the detection of IgG/IgM is of great significance for the early diagnosis of Zika virus. Zika is diagnosed based on serological analysis and viral isolation in mice or tissue culture. An IgM immunoassay is the most practical lab test method. The zika IgM/IgG Rapid Test utilizes recombinant antigens derived from its structure protein, it detects IgM/IgG anti-zika in patient serum or plasma within 15 minutes. The test can be performed by untrained or minimally skilled personnel, without cumbersome laboratory equipment.

PRINCIPLE

The Zika Virus IgG/IgM+NS1 antigen Rapid Test is a lateral flow chromatographic immunoassay. The test cassette consists of IgG/IgM Strip and NS1 strip.

IgG/IgM strip:1) a burgundy colored conjugate pad containing Zika Virus recombinant envelope antigens conjugated with colloid gold (Zika Virus conjugates) and rabbit IgG-gold conjugates,2) a nitrocellulose membrane strip containing two test bands (G and M bands) and a control band (C band). The G band is pre-coated with the antibody for the detection of IgG anti-Zika Virus virus, M band is coated with antibody for the detection of IgM anti-Zika Virus virus, and the C band is pre-coated with goat anti rabbit IgG.

NS1 strip:1) a burgundy colored conjugate pad containing mouse anti-Zika Virus NS1 antigen conjugated with colloid gold (Zika Virus Ab conjugates), 2) a nitrocellulose membrane strip containing a test band (T band) and a control band (C band). The T band is pre-coated with rabbit anti-Zika Virus NS1 antigen, and the C band is pre-coated with goat anti-mouse IgG antibody.



IgG/IgM strip:When an adequate volume of test specimen is dispensed into the sample well of the test cassette, the specimen migrates by capillary action across the cassette. IgG anti-Zika Virus virus if present in the specimen will bind to the Zika Virus conjugates. The immunocomplex is then captured by the reagent coated on the G band, forming a burgundy colored G band, indicating Zika Virus virus IgG positive test result and suggesting a recent or repeat infection. IgM anti-Zika Virus virus, if present in the specimen, will bind to the Zika Virus conjugates. The immunocomplex is then captured by the reagent pre-coated on the M band, forming a burgundy colored M band, indicating Zika Virus virus IgM positive test result and suggesting a fresh infection. Absence of any test bands (G and M) suggests a negative result.The test contains an internal control (C band) which should exhibit a burgundy colored band of the immunocomplex of goat anti rabbit IgG/rabbit IgG-gold conjugate regardless of the color development on any of the T bands. Otherwise, the test result is invalid and the specimen must be retested with another device.

NS1 Strip:When an adequate volume of test specimen is dispensed into the sample well of the cassette, the specimen migrates by capillary action across the test cassette. Zika Virus NS1 Ag if present in the specimen will bind to the Zika Virus Ab conjugates. The immunocomplex is then captured on the membrane by the pre-coated rabbit anti-NS1 antibody, forming a burgundy colored T band, indicating Zika Virus Ag positive test result. Absence of the T band suggests a negative result. The test contains an internal control (C band) which should exhibit a burgundy colored band of the immunocomplex of goat anti-mouse IgG/mouse IgG-gold conjugate regardless of the presence of colored T band. Otherwise, the test result is invalid and the specimen must be retested with another device.

REAGENTS AND MATERIALS PROVIDED

Components	25tests/kit	5tests/kit	1test/kit
Cassettes	25 cassettes with dependent sealed foil pouch	5 cassettes with dependent sealed foil pouch	1 cassette with dependent sealed foil pouch
Sample Diluent Solution with dropper	25tubes (300ul/tube)	5tubes (300ul/tube)	300ul/tube
Transfer tube	25 pcs	5 pcs	1 pcs
Package insert	1	1	1

MATERIALIS REQUIRED BUT NOT PROVIDED

Clock or Timer

WARNINGS AND PRECAUTIONS

For in Vitro Diagnostic Use

1.This package insert must be read completely before performing the test. Failure to follow the insert gives inaccurate test results.
2.Do not open the sealed pouch, unless ready to conduct the assay.
3.Do not use expired devices.
4.Bring all reagents to room temperature (15°C-30°C) before use.
5.Do not use the components in any other type of test kit as a substitute for the components in this kit.
6.Do not use hemolized blood specimen for testing.
7.Wear protective clothing and disposable gloves while handling the kit reagents and clinical specimens. Wash hands thoroughly after performing the test.
8.Users of this test should follow the US CDC Universal Precautions for prevention of transmission of HIV, HBV and other blood-borne pathogens.
9.Do not smoke, drink, or eat in areas where specimens or kit reagents are being handled.
10.Dispose of all specimens and materials used to perform the test as biohazardous waste.
11.Handle the Negative and Positive Control in the same manner as patient specimens.
12.The testing results should be read within 25 minutes after a specimen is applied to the sample well or sample pad of the device. Read result after 25 minutes may give erroneous results.
13.Do not perform the test in a room with strong air flow, ie. electric fan or strong air-conditioning.

REAGENT PREPARATION AND STORAGE INSTRUCTIONS

All reagents are ready to use as supplied. Store unused test device unopened at 2°C-30°C. The positive and negative controls should be kept at 2°C-8°C. If stored at 2°C-8°C, ensure that the test device is brought to room temperature before opening. The test device is stable through the expiration date printed on the sealed pouch. Do not freeze the kit or expose the kit over 30°C.

SPECIMEN COLLECTION AND HANDLING

Consider any materials of human origin as infectious and handle them using standard bio-safety procedures.

Plasma

1.Collect blood specimen into a lavender, blue or green top collection tube (containing EDTA, citrate or heparin, respectively in Vacutainer®) by veinpuncture.
2.Separate the plasma by centrifugation.
3.Carefully withdraw the plasma into new pre-labeled tube.

Serum

1.Collect blood specimen into a red top collection tube (containing no anticoagulants in Vacutainer®) by veinpuncture.
2.Allow the blood to clot.
3.Separate the serum by centrifugation.
4.Carefully withdraw the serum into a new pre-labeled tube.
5.Test specimens as soon as possible after collecting. Store specimens at 2°C to 8°C if not tested immediately.
6.Store specimens at 2°C to 8°C up to 5 days. The specimens should be frozen at -20°C for longer storage

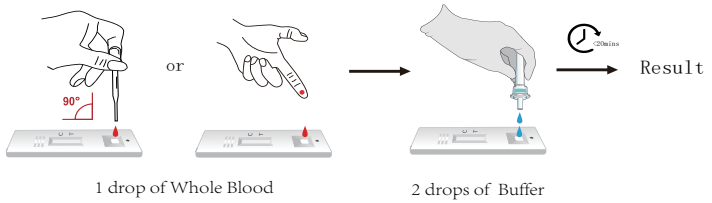
Blood

Drops of whole blood can be obtained by either finger tip puncture or veinpuncture. Do not use any hemolized blood for testing.

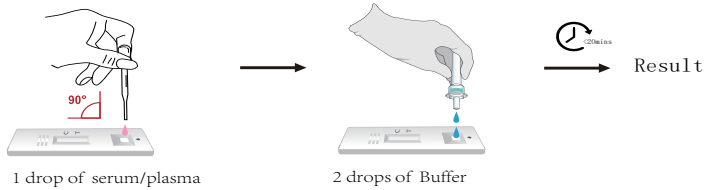
Whole blood specimens should be stored in refrigeration (2°C-8°C) if not tested immediately. The specimens must be tested within 24 hours of collection.Avoid multiple freeze-thaw cycles. Prior to testing, bring frozen specimens to room temperature slowly and mix gently. Specimens containing visible particulate matter should be clarified by centrifugation before testing.

ASSAY PROCEDURE

Step 1: Bring the specimen and test components to room temperature if refrigerated or frozen. Once thawed, mix the specimen well prior to assay.
Step 2: When ready to test, open the pouch at the notch and remove device. Place the test device on a clean, flat surface.
Step 3: Be sure to label the device with specimen's ID number.
Step 4: **For whole blood test**
- Apply 1 drop of whole blood (about 20 μL) into the sample well.
- Then add 2 drops (about 60-70 μL) of Sample Diluent immediately.



For serum or plasma test
- Fill the pipette dropper with the specimen.
- Holding the dropper vertically, dispense 1 drop (about 30 μL-35 μL) of specimen into the sample well making sure that there are no air bubbles.
- Then add 2 drops (about 60-70 μL) of Sample Diluent immediately.



Step 5:Set up timer.
Step 6: Results can be read in 20 minutes. Positive results can be visible in as short

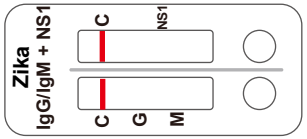
as 1 minute.
Don't read results after 30 minutes.To avoid confusion, discard the test device after interpreting the result.

QUALITY CONTROL

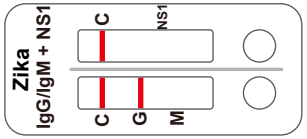
Internal Control: This test contains a built-in control feature, the C band. The C line develops after adding specimen and sample diluent. Otherwise, review the whole procedure and repeat test with a new device.
External Control: Good Laboratory Practice recommends using the external controls, positive and negative, to assure the proper performing of the assay, in particularly, under the following circumstances:
a. New operator uses the kit, prior to performing testing of specimens.
b.A new lot of test kit is used.
c.A new shipment of kits is used.
d.The temperature used during storage of the kit fall outside of 2°C -30°C.
e.The temperature of the test area falls outside of 15°C -30°C.

INTERPRETATION OF ASSAY RESULT

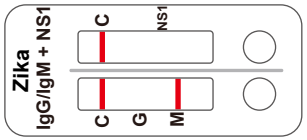
Negative Control
If only the C band is present, the absence of any burgundy color in the both test bands (G and M) indicates that no anti-Zika virus antibodies are detected. The result is negative or non-reactive.



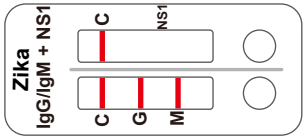
Positive Control
IgG Positive: In addition to the presence of C band, if only G band is developed, indicates for the presence of IgG anti-Zika Virus; the result suggests past infection or re-infection of Zika Virus.



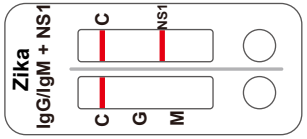
IgM Positive: In addition to the presence of C band, if only M band is developed, the test indicates for the presence of IgM anti-Zika Virus. The result suggests fresh infection of Zika Virus.



IgG/IgM Positive: In addition to the presence of C band, both G and M bands are developed, indicates for the presence of IgG and IgM anti-Zika Virus. The result suggests current infection or secondary infection of Zika Virus.

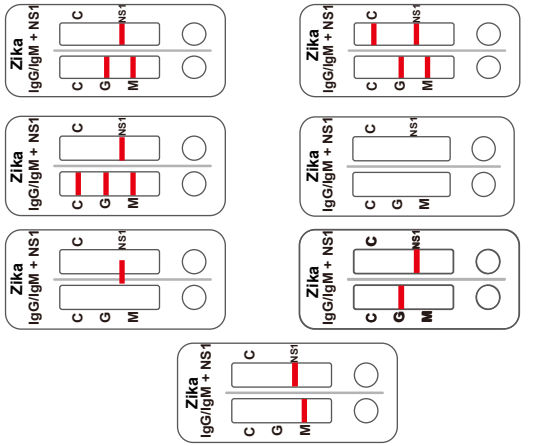


NS1 positive: Both C and NS1 bands show color development.The appearance of any burgundy color in the Zika Virus NS1 band, regardless of intensity, must be considered as presence of the band.



Samples with positive or reactive results should be confirmed with alternative testing method(s) such as ELISA or PCR and clinical findings before a diagnostic decision is made.

INVALID:
If no C band is developed, the assay is invalid regardless of any burgundy color in the test bands(G and M) as indicated below. Repeat the assay with a new device.



PERFORMANCE CHARACTERISTICS

1. Clinical Performance For IgM Test
A total of 224 patient samples from susceptible subjects were tested by the Zika Virus IgG/IgM +NS1 Antigen Rapid Test and by a commercial EIA. Comparison for all subjects is showed in the following table:

	Zika Virus IgG/IgM+NS1 Antigen Rapid Test		
IgM EIA Test	Positive	Negative	Total
Positive	50	2	52
Negative	1	171	172
Total	51	173	224

Relative Sensitivity:96.15% , Relative Specificity:99.41%, Overall Agreement: 98.66%

2. Clinical Performance For IgG Test
A total of 276 patient samples from susceptible subjects were tested by the Zika IgG/IgM +NS1 Antigen Rapid Test and by a commercial EIA. Comparison for all subjects is showed in the following table:

	Zika Virus IgG/IgM+NS1 Antigen Rapid Test		
IgG EIA Test	Positive	Negative	Total
Positive	48	2	50
Negative	1	225	226
Total	49	227	276

Relative Sensitivity: 96.0% , Relative Specificity: 99.56%, Overall Agreement: 98.91%

3. Clinical Performance For NS1 Test
A total of 380 patient samples from susceptible subjects were tested by the Zika IgG/IgM +NS1 Antigen Rapid Test and by a commercial EIA. Comparison for all subjects is showed in the following table:

	Zika Virus IgG/IgM+NS1 Antigen Rapid Test		
NS1 EIA Test	Positive	Negative	Total
Positive	78	2	80
Negative	1	299	300
Total	79	301	380

Relative Sensitivity: 97.5% , Relative Specificity: 99.67%, Overall Agreement: 99.21%

LMITATIONS OF TEST

1.The Assay Procedure and the Test Result Interpretation must be followed closely when testing the presence of antibodies and NS1 antigens to Zika Virus in serum, plasma or whole blood from individual subjects. Failure to follow the procedure may give inaccurate results.
2.The Zika Virus IgG/IgM+NS1antigen Rapid Test is limited to the qualitative detection of antibodies and NS1 antigen to Zika Virus virus in human serum, plasma or whole blood. The intensity of the test band does not have linear correlation with the antibody titer in the specimen.
3.The Zika Virus IgG/IgM+NS1antigen Rapid Test can not be used to differentiate if the infection is primary or secondary.
4.Serological cross reactivity with other flaviviruses is common (e.g., Japanese encephalitis, West Nile, yellow fever, etc.), therefore, it is possible that patients infected with these viruses may show some level of the reactivity with this test.
5.A negative or non-reactive result for an individual subject indicates absence of detectable Zika Virus antibodies and NS1 antigen. However, a negative or non-reactive test result does not preclude the possibility of exposure to or infection with Zika Virus.
6.A negative or non-reactive result can occur if the quantity of the Zika Virus antibodies present in the specimen is below the detection limits of the assay, or the antibodies that are detected are not present during the stage of disease in which a sample is collected. Therefore, a follow up test or alternative tests such antigen test or PCR test method is recommended if the clinical findings strongly suggest an infection or when there is an outbreak.
7.If the symptom persists, while the result from Zika Virus IgG/IgM+NS1antigen Rapid Test is negative or non-reactive result, it is recommended to re-sample the patient few days late or test with an alternative test device.
8.Some specimens containing unusually high titer of heterophile antibodies or rheumatoid factor may affect expected results.
9.The results obtained with this test should only be interpreted in conjunction with other diagnostic procedures and clinical findings.

SYMBOLS

Symbol	Used For	Symbol	Used For
	Use-by date		Consult instructions for use
LOT	Batch code	IVD	In vitro diagnostic medical device
	Temperature limit		Manufacturer
	Please don't reuse it		Keep away from sunlight
	Don’t use the product when the package is damaged		Keep dry
	Date of manufacture		Tests per kit
CE	CE Mark		Biological Risks
EC REP	Authorized representative in the European Community		

BASIC INFORMATION

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EC REP

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