

## **SARS-CoV-2**Antigen Test

(Colloidal Gold)

| Cat.No.                        | SC6h1-01 | SC6h2-50 |
|--------------------------------|----------|----------|
| Reactions/Box                  | 1        | 50       |
| Single extraction reagent      | 280μl×1  | 280μl×50 |
| Extraction tube (with dropper) | 1        | 50       |
| Nasopharyngeal Swab            | 1        | 50       |
| Nasal Swab                     | 1        | /        |
| Test card                      | 1        | 50       |

### Intend Use:

The product is used for the detection of N protein antigen from SARS-CoV-2 in Nasopharyngeal Swab or Nasal Swab form individuals who are suspected of COVID-19. Antigen detection is generally used for the detection of samples in the acute infection period, that is, within 7 days of the onset of symptoms in suspected patients.

### **Product Advantages:**

- Direct interpretation of the results, without professionals and equipment.
- Easy to store and transport, room temperature storage (2-30°C) for 12 months.
- Easy to Use, only need to add sample and read.
- Fast Detection: result in 20 minutes.

- Individually packaged for easy distribution.
- To meet the needs of home testing and on-site testing, the products are complete, including sampling, sample pretreatment and other consumables, which can be sampled and tested anytime and anywhere.

### **Product Component:**















### Sampling Steps:

### Nasopharyngeal Swab:



### **Nasal Swab:**

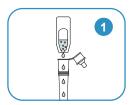








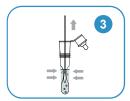
### **Detection Steps:**



Open the package of single extraction reagent and pour it into the extraction tube (with dropper) provided in the kit.



Insert the swab into the tube, rotating 10 times, hold still for 1 minute.



Thoroughly squeeze the swab head several times from the outside to immerse the swab, remove the swab.



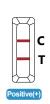
Cover the dropper onto the reagent tube



Open the package and take out the test card,lay it flat,Add 3 drops (about 80µI) swab eluate into the sample well of the test card. Lay it flat, the result will be readed at 10-15min, and will be invalid after 20 minutes.

### **Determination of test results:**

- Positive(+): Red bands appear at both of T and C line in 15 minutes.
- Negative(-): A red band appears at C line while no red band appears at T line in 15 minutes after sample loading.
- Invalid: As long as no red band appears at C line, it indicates that the test result is invalid, and should retest the sample with another test card.















## 3 Analytical specificity

Cross reactivity with the following organisms has been studied. Samples positive for the following organisms were found negative when tested with the SARS-CoV-2 Antigen Test. 1) Cross Reactivity

| No. | Type             | Pathogens                           | Concentration              |
|-----|------------------|-------------------------------------|----------------------------|
| 1   |                  | Respiratory syncytial virus Type A  | 6.4×10' PFU/mL             |
| 2   |                  | Respiratory syncytial virus Type B  | 2.8×10 <sup>6</sup> PFU/mL |
| е   |                  | Novel influenza A H1N1 virus (2009) | 1×10 <sup>6</sup> PFU/mL   |
| 4   |                  | Seasonal influenza A H1N1 virus     | 1×10 <sup>s</sup> PFU/mL   |
| 5   |                  | Influenza A H3N2 virus              | 1×10 <sup>e</sup> PFU/mL   |
| 9   |                  | Influenza A H5N1 virus              | 1×10 <sup>6</sup> PFU/mL   |
| 7   |                  | Influenza B Yamagata                | 1×10° PFU/mL               |
| œ   |                  | Influenza B Victoria                | 1×10 <sup>e</sup> PFU/mL   |
| o   |                  | Rhinovirus                          | 1×10 <sup>e</sup> PFU/mL   |
| 10  | Virus            | Adenovirus 3                        | 5×10' PFU/mL               |
| 11  |                  | Adenovirus 7                        | 2×10 <sup>e</sup> PFU/mL   |
| 12  |                  | EV-A71                              | 1×10° PFU/mL               |
| 13  |                  | Mumps virus                         | 1×10 <sup>s</sup> PFU/mL   |
| 41  |                  | Human coronavirus 229E              | 1×10 <sup>5</sup> PFU/mL   |
| 15  |                  | Human coronavirus OC43              | 1×10 <sup>s</sup> PFU/mL   |
| 16  |                  | Human coronavirus NL63              | 1×10 <sup>e</sup> PFU/mL   |
| 17  |                  | Human coronavirus HKU1              | 1×10° PFU/mL               |
| 18  |                  | Parainfluenza virus 1               | 7.3×10° PFU/mL             |
| 19  |                  | Parainfluenza virus 2               | 1×10 <sup>6</sup> PFU/mL   |
| 20  |                  | Parainfluenza virus 3               | 5.8×10 <sup>e</sup> PFU/mL |
| 21  |                  | Parainfluenza virus 4               | 2.6×10 <sup>6</sup> PFU/mL |
| 22  |                  | Haemophilus influenzae              | 5.2×10 <sup>6</sup> CFU/mL |
| 23  |                  | Streptococcus pyogenes              | 3.6×10° CFU/mL             |
| 24  |                  | Mycobacterium tuberculosis          | 1×10 <sup>s</sup> CFU/mL   |
| 25  | 0<br>0<br>0<br>0 | Streptococcus pneumoniae            | 2×10 <sup>6</sup> CFU/mL   |
| 26  | ספכום            | Candida albicans                    | 1×10° CFU/mL               |
| 27  |                  | Bordetella pertussis                | 1×10° CFU/mL               |
| 28  |                  | Staphylococcus aureus               | 3×10' CFU/mL               |
| 29  |                  | Legionella pneumophila              | 1×10⁴ CFU/mL               |
| 30  | Mycoplasma       | Mycoplasma pneumoniae               | 1.2×10 <sup>6</sup> CFU/mL |
| 31  | Chlamydia        | Chlamydia pneumoniae                | 2.3×10° IFU/mL             |

2) Interfering Substances. The following substances, naturally present in respiratory specimens or that may be artificially introduced into the nasal cavity or nasopharynx, were evaluated with the SARS-CoV-2 Antigen. Test at the concentrations listed below and were found not to affect test performance.

| Š. | Pathogens               | Concentration | Š. | Pathogens                     | Concentration |
|----|-------------------------|---------------|----|-------------------------------|---------------|
|    | Human blood             | (4.7)         | ω  | Azithromycin                  | 5 mg/mL       |
|    | (EDTA anticoagulated)   | ZU% (WV)      | 6  | Meropenem                     | 5 mg/mL       |
| 2  | Mucin                   | 5 mg/mL       | 10 | 10 Tobramycin                 | 5 mg/mL       |
|    | Pooled human nasal wash | N/A           | =  | Phenylephrine                 | 5 mg/mL       |
|    | 0.9% sodium chloride    | 20% (v/v)     | 12 | Oxymetazoline                 | 5 mg/mL       |
|    | Oseltamivir phosphate   | 5 mg/mL       | 13 | 13 A natural soothing ALKALOL | 5 mg/mL       |
| 9  | Ribavirin               | 5 mg/mL       | 14 | Beclomethasone                | 5 mg/mL       |
|    | 7 Levofloxacin          | 5 mg/mL       | 15 | 15 Hexadecadrol               | 5 mg/mL       |

# Hook Effect

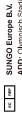
1. There was no hook effect of SARS-CoV-2 Antigen Test at the detection of nasopharyngeal swab samples.

2. No hign does hook effect was observed up to 0.5mg/ml SARS-CoV-2 nucleocapsid protein

### Symbols meaning

| <b>(29</b> ) | IDo not use if package<br>is damaged |           | Consult instructions for use                        |
|--------------|--------------------------------------|-----------|---|
| Œ            | CE symbol                            | EC REP    | Authorized representative in the European Community |
| $\bigotimes$ | Do not re-use                        |           | Tests per kit                                       |
| REF          | Catalogue number                     | ГОТ       | Batch code  |
| 3            | Manufacturer                         | STERILE R | Sterilized using irradiation                        |
|              | Temperature limit(2-30°C)            |           | USE- by date  |

## **EU Representative**



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Version: A/1

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(Colloidal Gold)















### Intend Use 1

detection of samples in the acute infection period, that is, within 7 days of the onset of symptoms in The product is used for the detection of N protein antigen from SARS-CoV-2 in nasal or saliva form individuals who are suspected of COVID-19. Antigen detection is generally used for the

The antigen test provides individuals with the option to self-collect and test their nasal or saliva sample. The antigen test can not be used for the diagnosis of COVID-19 alone, but should be combined with nucleic acid test, imaging and other diagnostic information, medical history, contact nistory to determine the infection status.

### [ Principle ]

SARS-CoV-2 Antigen in human nasal or saliva was determined by colloid gold immunochromatography.

IgG antibody (Control line,C). When the sample is added into the sample well, conjugates absorbed in the conjugate pad are dissolved and migrate along with the sample. If SARS-CoV-2 antigen is present in the sample, the complex of the anti-SARS-CoV-2 conjugate and the SARS-CoV-2 will be captured by the specific anti-SARS-CoV-2 monodonal antibodies coated on the test region, a red line will appear on the test region (Test line, T), indicating a positive result. If SARS-CoV-2 antigen is absent in the The test card is composed of the following parts: namely sample pad, conjugate pad, nitrocellulose membrane, and absorbing pad. The conjugate pad contains the colloidal gold labeled monoclonal antibody against the nucleocapsid protein of SARS-CoV-2; the nitrocellulose membrane contains the secondary antibody for nucleocapsid protein of SARS-CoV-2 (Test line,T) and goat anti-mouse sample, complex cannot be formed in the test region, and no red line appears on the test region No matter whether the samples contain antigens or not, the colloidal gold labeled monoclonal antibody will be captured by the goat anti-mouse IgG antibody in the quality control region (Control ine, C), a red line will always appear in the quality control region (Control line, C).

### [ Constitute

# Storage conditions and Expiration period I

.This product is expected to be stored at  $2\,\mathbb{C}\!\sim\!\!30\,\mathbb{C}$  or 38-83  $\mathbb{F}$ 

The test card must be used within one hour if opened.

4.The lot number and expiration date are printed on the packing box.

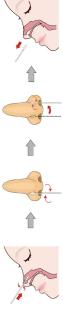
How to use

Please read the instruction carefully before testing. Sample, test reagent and other test material shall be balanced to room temperature, and the test shall be carried out at room temperature

### Sample collection

## A. Nasal swabs sample collection

- 1. Using the sterile swab provided in the kit, carefully insert the swab into one nostril of the patient. The swab tip should be inserted up to 2-4 cm until resistance is met.
- 2. Roll the swab 5 times along the mucosa inside the nostril to ensure that both mucus and cells
- 3. Using the same swab, repeat this process for the other nostril to ensure that an adequate sample is collected from both nasal cavities.
- 4. Withdraw the swab from the nasal cavity. The specimen is now ready for preparation using the extraction reagent provided in the kit. (see Figure 1)



## B.Saliva sample collection

- 1. Rinse your mouth with water 30minutes before sampling, and do not eat, smoke, drink alcohol or drinks after rinsing.
  - Place the tip of tongue against the upper or lower tooth root to enrich saliva, and spit saliva into a plastic container gently until the liquid saliva fills the bottom of the container(no bubbles). (see Figure 2)



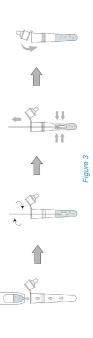
## 2 Sample extraction

## A.Nasal swabs sample extraction

- 1. Open the package of single extraction reagent and pour it into the extraction tube (with dropper)
- provided in the kit.

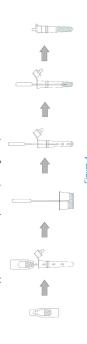
2. Insert the swab into the tube, rotating 10 times, hold still for 1 minute

- 3. Thoroughly squeeze the swab head several times from the outside to immerse the swab,
  - Cover the dropper onto the reagent tube. (see Figure 3.) remove the swab.



## B.Saliva sample extraction

- 1. Open the package of single extraction reagent and squeeze the bottle to make all extraction reagent into the extraction tube.
- 2. The collected saliva was sucked to the straw, and 7 drops (about 200µl) was dripped into the solution of the sample extraction tube. Squeeze the extraction tube by hand to blend the liquid. 3. Cover the dropper and wait for inspection. (see Figure 4.)



## Sample testing

- Open the package and take out the test card, lay it flat.
  Add 3 drops (about 80µl) swab eluate into the sample well of the test card.
  Lay it flat, the result will be read at 10-15min, and will be invalid after 20 minutes, (see Figure 5)

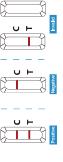
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## Determination of test results

Positive: Two red lines. One red reaction line in the test area (T) and one red reaction line in the Negative: A red line. A red reaction line occurs only in control area (C).

Invalid: When no red line appears in the control area (C), the test is invalid. It is recommended to re-test with a new test card, especially pay attention to whether the sample amount is enough (see Figure 6)



### Precautions ]

- This product is disposable in vitro diagnostic reagent, do not reuse.
- After adding the sample, the test card is always in the horizontal state. The product must be used within the validity period.
  - The depth of color does not affect the result.
- Avoid testing in an excessively high temperature environment: the test card stored below room temperature should be restored to room temperature before opening the aluminum foil bag to avoid moisture absorption.
  - 7. Please use the extraction reagent provided with this reagent to handle the sample. Do not mix It is recommended to use fresh samples instead of repeated freeze-thaw samples.
- different batches of test card and extraction reagent.
  - 8. If the initial screening is positive, please contact your local public health authority. 9. The used swab, test card and extract should be disposed of properly.
    - - Do not contact the extraction reagent directly with skin. 11.Do not suck extraction reagent with your mouth.
- Carefully read this Instructions before starting the procedure.

## Performance Characteristics

## 1 Clinical performance

A total of 228 fresh nasal swab samples were detected by RT-PCR assays, which includes 100 positive samples (Ct values30) and 128 negative samples. The SARS-CoV-2 Antigen Test esults were compared to RT-PCR assays for SARS-CoV-2 in nasal swab samples.

# Overall study results are shown in the table below.

| Total Results |          | 91                         | 137      | 228   |
|---------------|----------|----------------------------|----------|-------|
| ۲             | Negative | 2                          | 126      | 128   |
| PCR           | Positive | 88                         | 11       | 100   |
| Method        | Results  | Positive                   | Negative | tal   |
|               |          | SARS-CoV-2<br>Antigen Test |          | Total |

Relative Sensitivity: 89.00% (95% CI\*: 81.17% to 94.38%) Relative Specificity: 98.44% (95% CI\*: 94.47% to 99.81%) Accuracy: 94.30% (95%CI\*: 90.45% to 96.93%)

\* Confidence Intervals

## 2 Limit of Detection (LOD)

The Limit of Detection of the SARS-CoV-2 Antigen Test is about 1ng/ml SARS-CoV-2 nucleocapsid protein solution.