

RAPID SARS-COV-2 ANTIGEN TEST CARD

INSTRUCTION GUIDE FOR ANTERIOR NASAL SWAB SPECIMENS

For self-testing

REF	1N40C5-2	For 1 Test/Box
REF	1N40C5-4	For 5 Tests/Box
REF	1N40C5-6	For 20 Tests/Box

Please follow the instruction leaflet carefully.

INTENDED USE

Rapid SARS-CoV-2 Antigen Test Card is an immunoassay based one step in vitro test. It is designed for the rapid qualitative determination of SARS-CoV-2 virus antigen in anterior nasal swab from individuals suspected of COVID-19 within the first seven days of symptom onset. Rapid SARS-CoV-2 Antigen Test Card shall not be used as sole basis to diagnose or exclude SARS-CoV-2 infection. Children under 14 years of age should be assisted by an adult.

SUMMARY

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. 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.

MATERIALS PROVIDED

Components	For 1 Test/Box	For 5 Tests/Box	For 20 Tests/Box
Rapid SARS-CoV-2 Antigen Test Card (sealed foil pouch)	1	5	20
Swab	1	5	20
Extraction tube	1	5	20
Sample extraction buffer	1	5	20
Instructions for use (this leaflet)	1	1	1
Tube stand	1 (packaging)	1	1

PERFORMANCES (SENSITIVITY AND SPECIFICITY)

Rapid SARS-CoV-2-Antigen Test Card was compared to the confirmed clinical diagnosis. The Study involved 156 samples.

Sensitivity	96.7%
Specificity	99.20%
Accuracy	98.2%

A negative study demonstrated that:

99.10% of non-professionals carried out the test without requiring assistance

-97.87% of the different types of results were interpreted correctly

INTERFERENCES

None of the following substances at the tested concentration showed any interference with the test.

Whole Blood: 1%	Alkalot: 10%	Mucin: 2%
Phenylethyn: 15%	Tobramycin: 0.0004%	Oxymetazoline: 18%
Menthol: 0.15%	Cromolyn: 15%	Benzokaina: 0.15%
Fluticasone Propionate: 5%	Mupirocin: 0.25%	Zicam Nasal Spray: 5%
Oseletamin Phosphate: 0.5%	sodium chloride: 5%	Human Anti-mouse Antibody (HAMA): 60 ng/ml

IMPORTANT INFORMATION BEFORE THE EXECUTION

1. Read the instructions carefully before use.
2. Do not use the product beyond the expiration date.
3. Do not use the product if the pouch is damaged or the seal is broken.
4. Store the test device at 4 to 30°C in the original sealed pouch. Do Not Freeze.

5. The product should be used at room temperature (15°C to 30°C). If the product has been stored in a cool area (less than 15°C), leave it at normal room temperature for 30 minutes before using.

6. Handle all specimens as potentially infectious.

7. Inspect the test specimen collection, storage, and transport may yield inaccurate test results.

8. Correct specimen collection is the most important step in the procedure. Make sure to collect enough specimen material (nasal secretion) with the swab, especially for anterior nasal sampling.

10. Blow the nose several times before collecting specimen.

11. The specimens should be tested as soon as possible after collection.

12. Apply the test strip to the sample extraction solution. If the result is invalid, repeat the test.

13. When used as intended, there should not be any contact with the extraction buffer. In case of contact with skin, eyes, mouth or other parts, rinse with clear water. If an irritation persists, consult a medical professional.

15. Children under 14 years of age should be assisted by an adult.

LIMITATIONS

1. The test should be used exclusively for the qualitative detection of SARS-CoV-2 viral antigen in anterior nasal swab specimens. The exact concentration of SARS-CoV-2 viral antigen cannot be determined as part of this test.

2. Proper specimen collection is critical. Failure to follow the procedure may result in inaccurate test results. Improper collection, storage, or even freezing and thawing of the specimen can lead to inaccurate test results.

3. If the viral load of the specimen is below the detection limit of the test, the test may produce a negative result.

4. As with all diagnostic tests, a definitive clinical diagnosis should not be based on the result of a single test, but should be made by the physician after evaluation of all clinical and laboratory results.

5. A negative result does not exclude viral infection except for SARS-CoV-2 and should be confirmed by molecular diagnostic methods if COVID-19 is suspected.

6. A positive result does not exclude coinfection with other pathogens.

7. The SARS-CoV-2 rapid antigen test can detect both viable and non-viable SARS-CoV-2 material. The performance of the SARS-CoV-2 rapid test is dependent on viral load and may not correlate with other diagnostic methods performed on the same specimen.

8. Use short time intervals as soon as possible after specimen collection and within two hours of specimen collection.

9. Sensitivity of test is lower for non-viable swabs. Use of alternative swabs is recommended to use the nasopharyngeal swab specimens by healthcare professionals.

10. Monoclonal antibodies may fail to detect, or detect with less sensitivity, SARS-CoV-2 viruses that have undergone minor amino acid changes in the target peptide region.

11. The amount of antigen in a sample may decrease as the duration of illness increases. Specimens collected after day 5-7 of illness are more likely to be tested negative compared to a RT-PCR assay.

12. The test may differ with the associated swabs. Use of alternative swabs may result in false negative results.

13. The validity of Rapid SARS-CoV-2 Antigen Test Card has not been proven for identification/confirmation of tissue culture isolates and should not be used in this capacity.

14. Cross-reactivity of the Test Device was evaluated by testing viruses and other microorganisms. The final test concentrations of viruses and other microorganisms are documented in the Cross-Reactivity-Study. The therefore following viruses and other microorganisms except the Human SARS-coronavirus have no effect on the results of the Test Device. Positive test results do not rule out co-infections of tissue culture isolates and should not be used in these cases in infections of infection with SARS-CoV.

PREPARATION

- Clean, dry and a flat surface.
- Check the test kit contents. Make sure that nothing is damaged or broken.
- Timer at hand.
- Blow your nose several times before collecting specimen.
- Wash hands.

DISPOSAL

The test kit may be disposed of with normal household waste in accordance with the applicable local regulations.

This test is suitable for people of all ages. The recommended operators are aging from 14 to 90. Children under 14 years of age should be tested by an adult. Do not continue the test if the child feels any pain.



1. Rotate the lid of sample extraction buffer bottle.

Caution: Open it away from your face and be careful not to spill any of the liquid.



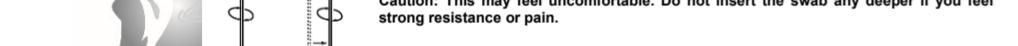
2. Squeeze all extraction buffer out of the bottle into the extraction tube.

Caution: Avoid touching the bottle against the tube.



3. Soft tip Handle

Find the swab in the sealed wrapper in front of you. Identify the soft, fabric tip of the swab.



4. Peel open the swab packaging and gently take out the swab.

Caution: Never touch the soft, fabric tip of the swab with your hands.



5. Carefully insert swab into one nostril. The swab tip should be inserted no less than 2.5 cm (1 inch) from the edge of the nostril. Roll swab 3-4 times along the mucosa inside the nostril. Leave swab in the nostril for several seconds. Using the same swab, repeat this process for the other nostril. Withdraw swab from the nasal cavity.

Caution: This may feel uncomfortable. Do not insert the swab any deeper if you feel strong resistance or pain.



6. Place swab into extraction tube. Roll swab three to five (3-5) times. Leave swab in extraction buffer for 1 minute.



7. Pinch extraction tube with fingers and remove the solution from swab as much as possible.

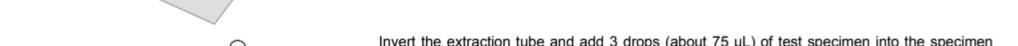


8. Install the nozzle cap onto the sample extraction tube tightly.



9. Bring the kit components to room temperature before testing. Open the pouch and remove the card. Place the card on a flat and level surface.

Caution: Once opened, the test card must be used immediately.



10. Invert the extraction tube and add 3 drops (about 75 µl) of test specimen into the specimen well (S) by gently squeezing the extraction tube.

Caution: The formation of air bubbles in the specimen well (S) must be avoided.



11. Read the results at 15-20 minutes.

Caution: Results after 20 minutes may not be accurate.

The used device may be disposed of with normal household waste in accordance with the applicable local regulations.



12. Invalid: If no color line appears in the control area (C) within 15-20 minutes, the test is invalid. Repeat the test with a new test card.



13. Negative: If one colored band appears in the Control Zone (C) and no colored band appears in the Test Zone (T) within 15-20 minutes, the test result is negative.



14. Positive: If two colored bands appear with one colored band in the Control Zone (C) and another in the Test Zone (T) within 15-20 minutes, the test result is positive.



15. Result interpretation: If the result is positive, contact the nearest medical facility according to the recommendations of your local authorities.

To be sure to blow your nose multiple times before collecting the specimen.

Be sure to collect several nasal samples (nasal secretions).

Perform the test carefully after taking the sample.

Follow the instructions for use carefully.

Apply the drops of extraction solution only to the sample well (S).

Too many or few drops of extraction solution can lead to an invalid or incorrect test result.

4. The test strip is clearly discolored or smudged? What is the reason for this?

Please note that the test strip is discolored or smudged if the liquid absorption of the test strip is naturally limited. If the control line does not appear or the test strip is discolored or discolored, it is irreparable, please repeat the test according to the instructions.

5. I have taken the test, but I don't see a control line (C). What should I do?

Your test result is invalid. Observe the answer to question 4 and repeat the test according to the instructions for use.

6. I am unsure about reading the result. What should I do?

For the result to be positive, 2 straight horizontal lines must be clearly visible with the full width of the cassette. If you are still unsure about the results, contact the nearest health facility according to the recommendations of your local authorities.

If your result is positive and the test kit thus clearly indicates the control line as well as the test line, you should contact the nearest medical facility as recommended by your local authorities. Your test result may be double-checked and the authority or facility will explain the appropriate next steps.

8. My result is negative. What should I do?

If the test kit only clearly shows the control line, this may mean that you are negative or that the viral load is too low to be detected. If you experience symptoms (headache, fever, migraine, loss of sense of smell or taste, etc.), please consult your primary care physician, or the nearest health care facility as recommended by your local authorities.

9. How can I dispose of the product?

The test kit may be disposed of with normal household waste in accordance with the applicable local regulations.

ACCESORIES:

Accessory	Manufacturer	EC Representative	CE-Mark
Swab A	Jiangsu Changfeng Medical Industry Co., Ltd. Toushou Town, Guangling District Yangzhou 225109 Jiangsu P.R.China	Lins Service & Consulting GmbH Obere Seegasse 34/2,69124 Heidelberg Germany	CE 0197 acc. 93/42/EEC
Swab B</td			

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Páginas de instruções de utilização.

FINALIDADE DE UTILIZAÇÃO: O teste rápido de antígeno do SARS-CoV-2 é um teste in vitro de nível único, com base numa imunoabsorção. Foi concebido para a identificação rápida e qualitativa de antígenos do vírus SARS-CoV-2, em esfregaços nasais anteriores (zona frontal do nariz), de pessoas com suspeita de COVID-19 nos primeiros sete dias após a ocorrência de sintomas. O teste rápido de antígeno do SARS-CoV-2 não deve ser utilizado como base única para o diagnóstico ou associação a uma infecção por SARS-CoV-2. As crianças com idade inferior a 14 anos devem ser auxiliadas por um adulto.

RESUMO: Os novos coronavírus pertencem ao género betacoronavirus. A COVID-19 é uma doença respiratória aguda e contagiosa. Em geral, as pessoas são assintomáticas ou têm sintomas leves que desaparecem em poucos dias. No entanto, pode haver casos de infecção grave, com necessidade de pessoas intubadas e ventilatorias também podem ser uma fonte de infecção. Ocasionalmente, estes resultados são interpretados incorretamente.

MATERIAIS FORNECIDOS:

Componentes	Para 1 teste/caixa	Para 5 testes/caixa	Para 20 testes/caixa
Cassetes de teste de antígeno do SARS-CoV-2 (bolsa de alumínio selada)	1	5	20
Cotonete esterilizado	1	5	20
Tubo de extração	1	5	20
Solução de extração	1	1	1
Instrumento de utilização (este suplemento)	1	1	1
Supporto de tubo	1 (em caixa)	1	1

DESENPELO (SENSIBILIDADE E ESPECIFICIDADE): O cartão de teste rápido de antígeno do SARS-CoV-2 foi comparado com o diagnóstico clínico confirmado. No estudo foram testadas 156 amostras. A sensibilidade é de 96,77% e a especificidade é de 99,20%. O resultado de viabilidade mostrou os seguintes resultados: -99,99% dos usuários não profissionais realizaram o teste autonomamente com êxito -97,87% dos vários tipos de resultados foram interpretados corretamente.

INTERFERÊNCIAS: Nenhuma das substâncias seguintes da concentração testada interferiu no teste.

Sangue total: 1%	Alcoólico: 10%	Mucina: 2%
Fenilefrina: 15%	Coronarina: 0,00004%	Oximetazolina: 15%
Menthol: 10%	Coricamida: 15%	Benzocaina: 0,5%
Propriionate de fluticasona: 5%	Mupirocina: 0,25%	Spray nasal: 5%
Fosfato de cestamycin: 0,5%	Cloreto de sódio: 5%	Anticorpos anti-ratos humanos (HAMA): 60 ng/ml

INFORMAÇÕES IMPORTANTES ANTES DA REALIZAÇÃO:

- Leia as presentes instruções atentamente.
- Não utilize o produto se a data de validade tiver terminado.
- Não utilize o produto se a embalagem tiver sido danificada ou o selo quebrado.
- Guarde o teste entre 4 e 30 °C, na bolsa original selada. Não congele.
- O produto deve ser utilizado à temperatura ambiente (entre 15 °C e 30 °C). Se o produto tiver sido guardado num ambiente mais fresco (inferior a 15 °C), deixe-o à temperatura ambiente normal 30 minutos antes da utilização.
- Manipule todas as amostras como potencialmente infeciosas.
- A recolha, o armazenamento e o transporte insuficientes ou imprecisos das amostras podem conduzir a resultados de teste imprecisos.
- Uma amostra com baixa concentração de antígeno pode resultar em resultados de teste inválidos ou incorretos.
- A recolha correta da amostra é o ponto mais importante na realização do teste. Preste atenção para recolher material de amostra (secreção nasal) suficiente com o cotonete, em particular na amostragem nasal anterior.
- As amostras devem ser analisadas com a maior brevidade possível após a recolha.
- Coloque as gotas da amostra de teste apenas no poço de amostra (S).
- Gostaria de obter mais informações? Consulte o manual de instruções.
- O cotonete deve ser utilizado como prelúdio ao extrator de esfregão. Deve ser usado para limpar o extrator de esfregão.
- As crianças com idade inferior a 14 anos devem ser auxiliadas por um adulto.

LIMITAÇÕES:

- O teste deve ser utilizado exclusivamente para a deteção qualitativa de antígenos virais do SARS-CoV-2, em amostras por esfregão nasal anteriores (zona frontal do nariz), de pessoas com suspeita de COVID-19 durante os primeiros sete dias após a ocorrência de sintomas. O teste rápido de antígeno do SARS-CoV-2 não deve ser utilizado como base única para o diagnóstico ou associação a uma infecção por SARS-CoV-2. As crianças com idade inferior a 14 anos devem ser auxiliadas por um adulto.
- A recolha da amostra é crucial. A inobservância dos procedimentos pode conduzir a resultados de teste imprecisos. A recolha e o armazenamento incorretos ou a congelação e a descongelação da amostra podem conduzir a resultados de teste imprecisos. A recolha e o armazenamento incorretos ou a congelação e a descongelação da amostra podem conduzir a resultados de teste imprecisos.
- Se a carga viral da amostra estiver abaixo do limite de detecção do teste, o teste pode apresentar um resultado negativo.
- Tal como acontece em todos os testes de diagnóstico, um diagnóstico clínico final não deve basear-se num único teste, mas ser estabelecido pelo médico após a avaliação de todos os resultados clínicos e laboratoriais.
- Um resultado positivo não exclui uma infecção viral, para além do SARS-CoV-2, e, em caso de suspeita de COVID-19, deve ser confirmado por outros métodos de diagnóstico molecular.
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- O teste rápido de antígeno do SARS-CoV-2 pode detectar material víreo e não víreo do SARS-CoV-2. O desempenho do teste rápido do SARS-CoV-2 depende da carga viral e pode não estar relacionado com outros métodos de diagnóstico que foram realizados na mesma amostra.
- Os utilizadores devem testar as amostras com a maior brevidade possível após a recolha da amostra, e, em todo o caso, até duas horas após a recolha da amostra.
- A sensibilidade por esfregão nasal e orofaringe pode ser menor do que por esfregão nasofaríngeo. O método do esfregão nasofaríngeo deve ser realizado por pessoal médico especializado.
- Os anticorpos monoclonais, que experimam poucas alterações de aminoácidos na região de epitólico alto, podem não detectar ou detetar os vírus SARS-CoV-2 com menor sensibilidade.
- A quantidade de antígenos na amostra pode diminuir com um maior tempo de doença. As amostras que foram recolhidas entre os 5.º e o 7.º dia do surto de COVID-19 apresentaram um menor resultado de teste.
- O kit foi validado com os cotonetes fornecidos. A utilização de cotonetes alternativos pode conduzir a resultados negativos incorretos.
- A validade do teste rápido de antígeno do SARS-CoV-2 não foi comprovada para a identificação/confirmação de culturas de tecidos isoladas e não deve ser utilizada nessa qualidade.
- A reatividade cruzada da cassette de teste foi avaliada através de testes de virus e de outros microrganismos. As concentrações de teídos finais dos vírus e de outros microrganismos estão registadas no estudo de Reatividade Cruzada. O efeito do coronavírus SAR-CoV humano, os vírus e outros microrganismos indicados não têm qualquer influência nos resultados da cassette de teste. Os resultados de teste positivos não excluem co-infeções com outros agentes. Os resultados positivos podem ocorrer nos casos de infecção por SARS-CoV.

8

9

10

11

15-20 min

AΞΙΟΛΟΓΗΣΗ ΤΩΝ ΑΠΟΤΕΛΕΣΜΑΤΩΝ

Θετικό: Εάν εμφανίσονται δύο έγχρωμες γραμμές εντός 15-20 λεπτών με μία έγχρωμη γραμμή στη περιοχή ελέγχου (C) και άλλη μία στη περιοχή δοκιμής (T), το αποτέλεσμα της δοκιμασίας είναι θετικό.
Προσοχή! Πρέπει να αποφύγεται ο σχηματισμός φυσαλίδων αέρα στο φρέσκο δελγάτο (S).
Αρνητικό:
Εάν μια έγχρωμη γραμμή εμφανίζεται στη περιοχή ελέγχου (C) και δεν εμφανίστε έγχρωμη γραμμή στη περιοχή δοκιμής (T), το αποτέλεσμα πρέπει να είναι θετικό.
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Ακούστωντας την αποτέλεσμα:
Το αποτέλεσμα της δοκιμής είναι άκυρο εάν δεν υπάρχει έγχρωμη γραμμή στη ζώνη ελέγχου (C) εντός 15-20 λεπτών. Επαναλάβετε τη δοκιμή με μια νέα συσκευή δοκιμής.
Ακύρωσης γραμμής:
Η εμφάνιση δύο έγχρωμων φυσαλίδων αέρα στο φρέσκο δελγάτο (S) μπορεί να επαναλαμβάνεται όπως συναντήθηκε στην προηγούμενη φύλαξη. Επιστρέψτε την αποτέλεσμα της δοκιμής στην προηγούμενη φύλαξη.
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Η εμφάνιση δύο έγχρωμων φυσαλίδων αέρα στο φρέσκο δελγάτο (S) μπορεί να επαναλαμβάνεται όπως συναντήθηκε στην προηγούμενη φύλαξη. Επιστρέψτε την αποτέλεσμα της δοκιμής στην προηγούμενη φύλαξη.
Προσοχή! Η εμφάνιση δύο έγχρωμων φυσαλίδων αέρα στο φρέσκο δελγάτο (S) μπορεί να είναι θετικό.
Ακούστωντας την αποτέλεσμα:
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