

COVID-19 Test Kit

(Colloidal Gold Method)

INTENDED USE

COVID-19 Test Kit (Colloidal Gold Method) is a solid phase immunochromatographic assay for the rapid, qualitative detection of antigen to 2019 Novel Coronavirus. This test provides only a preliminary test result. Therefore, any reactive specimen with the COVID-19 Test Kit (Colloidal Gold Method) must be confirmed with alternative testing method(s) and clinical findings.

PACK FORMATS

20 tests/box INTRODUCTION

The novel coronaviruses belong to the β 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; asymptomatically 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

The COVID-19 Test Kit (Colloidal Gold Method) is a colloidal gold immunochromatographic assay. The test uses COVID-19 lest Nit (Colloidal Gold Method) is a colloidal gold inimitanci infinital organital assay. The test uses COVID-19 (SARS-CoV-2) antibody (test line T) and goat anti-mouse IgG (control line C) immobilised on a nitrocellulose strip. The burgundy colored conjugate pad contains colloidal gold conjugated to another COVID-19 (SARS-CoV-2) antibody conjugated with colloid gold and mouse IgG-gold conjugates. When the processed buffer containing the sample is added to the sample well, COVID-19 (SARS-CoV-2) will combine with the COVID-19 antibody conjugate to form an antigen-antibody complex. This complex migrates through nitrocellulose membrane by capillary action. When the complex meets the line of the COVID-19 antibody of test line T, the complex is trapped

forming a burgundy colored band which confirm a reactive test result. Absence of a colored band in the test region indicates a non-reactive test result.

The test contains an internal control (C band) which should exhibit a burgundy colored band of the immunocomplex goat anti-mouse IgG-gold conjugate regardless of the color development on any of the test bands. Otherwise, the test result is invalid and the specimen must be retested with another device.

MATERIALS SUPPLIED

Sealed pouches each containing a test cassette, a desiccant

Sampling cotton swabs

Antigen extract buffer

Antigen extraction tube

Paper workbench (The small one-test-box can be used as a workbench) Instruction for use

MATERIAL REQUIRED BUT NOT PROVIDED

STORAGE AND STABILITY

The kit can be stored at room temperature or refrigerated (4-30°C). The test device is stable through the expiration date printed on the sealed pouch. The test device must remain in the sealed pouch until use.

Do not use beyond the expiration date.

WARNINGS AND PRECAUTIONS

- 1. For professional In Vitro diagnostic use only. Do not use after expiration date.
 2. This package insert must be read completely before performing the test. Failure to follow the insert gives This package insert must be read completely before performing the test. Failure to follow the insert gives inaccurate test results.
 Do not use it if the tube/pouch is damaged or broken.
 Test is for single use only. Do not re-use under any circumstances.
 Handle all specimens as if they contain infectious agents. Observe established precautions against microbiologi-

- cal hazards throughout testing and follow the standard procedures for proper disposal of specimens.

 6. Wear protective clothing such as laboratory coats, disposable gloves and eye protection when specimens are
- assayed.
 7. Humidity and temperature can adversely affect results.
- 8. Do not perform the test in a room with strong air flow, ie. electric fan or strong air-conditioning.

- SPECIMEN COLLECTION
 1. COVID-19 Test kit (Colloidal Gold Method) can be performed using three samplings, including
- I.) Nasal swab
- II.) oropharyngeal swab and
- III.) Nasopharyngeal swab.

- 2. Testing should be performed immediately after specimen collection.
 3. Bring specimens to room temperature prior to testing.
 4. If specimens are to be shipped, they should be packed in compliance with local regulations covering the transportation of etiologic agents.

SPECIMEN COLLECTION

- I.) Nasal Swab collection (Recommended for self-test usage)
- It is important to gain as much secretion as possible. Insert a sterile swab (stick) into the nostril.

The sterile swab (stick) should be inserted into 2.5cm (1 inch) from the edge of the nostril. Hit the swab 5 times along the mucous membrane inside the nostrils to ensure that both mucus and cells are collected.

Repeat this procedure for the second nasal stick to ensure that a sample is taken from both nasal cavities When removing the tampon, please do not touch the swab.

- II.) Oropharyngeal swab collection (Recommended for self-test usage)
- It is important to gain as much secretion as possible. Insert a sterile swab (stick) into the neck,

which is essential secretion from the red area of the throat and maxillary mandies to take a sample from the neck. Moderately you will test the bilateral cervical tonsils and the stench of the throat to get a sample. When removing the tampon, please do not touch the swab.

III.) Nasopharyngeal swab collection (Recommended for professional usage)

It is important to gain as much secretion as possible. Insert a sterile swab (stick) into the nostril,

which during visual inspection nostrils are the most hidden part. Push the swab into the posterior part of the nasal cavity. Turn the swab 10 times and then remove it from the nostril. When removing the tampon, please do not touch the swab







www.goodtest.eu

TEST PROCEDURE

Allow test cassette, specimen, and Antigen extract buffer control to equilibrate to room temperature (15-30°C) prior to testing.

- I. Remove the test cassette from the sealed foil pouch and use it as soon as possible. Best results will be obtained if the assay is performed within one hour.

 2. Place the test device on a clean and level surface

Test procedure:

1. Place the antigen extraction tube on the workbench. Place the antigen extraction buffer bottle vertically downward, squeeze the bottle to make the buffer drip freely into the extraction tube without touching the edge of the tube, and add 6 drops (about 200ul) to the extraction tube.

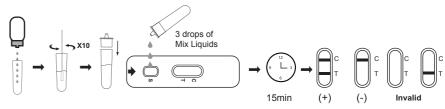
2. Put the swab specimen into the extraction tube pre-added with the antigen extraction buffer, and rotate the swab

about 10 times while pressing the swab head against the tube wall to release the antigen in the swab, then let it stand for about 1 minute.

- 3. Remove the swab while squeezing the tip of the swab so that as much liquid in the swab can be discharged as possible. Dispose of used swabs in accordance with biohazard waste disposal methods.

 4. Install the dripper on the extraction tube and cap it tightly, and let it stand for about 1 minute.

 5. Open the aluminum foil bag and take out the test card, add 3 drops (about 100ul) into the sample hole of the test
- card (or use a pipette to add 100ul), and start the timer.
- 6. Wait for the colored line to appear. The result should be read in 15 minutes. Do not interpret the result after 20



INTERPRETATION OF RESULTS

NEGATIVE: If only the C band is present, the absence of any burgundy color in the T band indicates that no COVID-19 (SARS-CoV-2) antigen are detected in the specimen. The result is negative. COVID-19 positive:

In addition to the presence of C band, if T band is developed, the test indicates for the presence of COVID-19 (SARS-CoV-2) antigen in the specimen. The result is COVID-19 positive

Control line fails to appear. Insufficient specimen volume or incorrect procedural techniques are the most likely reasons for control line failure. Review the procedure and repeat the test with a new test cassette. If the problem persists, discontinue using the test kit immediately and contact your local distributor.

- 1. Use fresh samples whenever possible.
- Optimal assay performance requires strict adherence to the assay procedure described in this insert sheet. Deviations may lead to aberrant results.
 A negative result for an individual subject indicates absence of detectable COVID-19 (SARS-CoV-2) antigen.
- However, a negative test result does not preclude the possibility of exposure to or infection with COVID-19.

 4. A negative result can occur if the quantity of the COVID-19 (SARS-CoV-2) antigen present in the specimen is below the detection limits of the assay, or failed to collect the COVID-19 (SARS-COV-2) antigen
- 5. As with all diagnostic tests, a definitive clinical diagnosis should not be based on the result of a single test, but should only be made by the physician after all clinical and laboratory findings have been evaluated.

PERFORMANCE CHARACTERISTICS

A total of 518 samples were tested in this study. The results of test reagent and control reagent both were 309 negative specimens and 209 positive specimens.

Method		RT-PCR			
		Positive	Negative	- Total	
COVID-19 Test Kit	Positive	206	3	209	
COVID-19 Test Nit	Negative	3	306	309	
Total		209	309	518	
Sensitivity		98.56 %	confidence interval	95.87 %~99.51 %	
Specificity		99.03 %	confidence interval	97.18 %~99.67 %	
Accuracy		98.84 %	confidence interval	97.50 %~99.47 %	

2. Analytical Specificity

Cross Reactivity	Human coronavirus 229E, human coronavirus OC43, human coronavirus HKU1, human Coronavirus NL63, adenovirus (type 5), adenovirus(type 7), adenovirus (type 18), human metapneumovirus (hMPV), parainfluenza virus(type 1), influenza A virus, influenza A virus, Haemophilus influenza,rhinovirus(type 2), rhinovirus (type 14), rhinovirus (type 16), respiratory syncytial virus(type A-2), Streptococcus pneumoniae, and Streptococcus thermo, there is no crossover with this product.
Interfering Substances	2mg/mL hemoglobin, 2mg/mL mucin, 5mg/L human anti-mouse antibody (HAMA), 10mg/mL biotin, 500μg/mL mucus, 3μg/mL gentamicin, 120μg/mL cromolyn sodium, 60μg/mL oxymetazoline hydrochloride, 200μg/mL phenylephrine hydrochloride, 200μg/mL human hydrochloride, 20μg/mL buprofen, 3μg/mL morpholino hydrochloride, 3μg/mL cephalexin kanamycin, 3μg/mL tetracycline, 3μg/mL chloramphenicol, 3μg/mL erythromycin, 3μg/mL vancomycin, 3μg/mL nalidixic acid, 3μg/mL hydrocortisone Pine and 3μg/mL human insulin will not affect the test results.

3. Limit of Detection

Limit of detection	2ng/ml

REFERENCE
1. Weiss SR, Leibowitz JL. Coronavirus pathogenesis. Adv Virus Res 2011; 81: 85-164.
2. Masters PS, Perlman S. Coronaviridae. In: Knipe DM, Howley PM, eds. Fields virology. 6th ed. Lippincott Williams & Wilkins, 2013: 825-58.
3. Su S, Wong G, Shi W, et al. Epidemiology, genetic recombination, and pathogenesis of coronaviruses. Trends Microbiol 2016; 24: 490-502.

4. Cui J, Li F, Shi ZL. Origin and evolution of pathogenic coronaviruses. Nat Rev Microbiol 2019; 17: 181-192.

SYMBOLS USED ON PACKAGING NOTICE								
EC REP	Authorized Representative	15- NE	Store between 4-30°C	IVD	For in vitro diagnostic use only			
(2)	Do not reuse	LOT	Lot Number		Don't use if package is damaged			
i	Consult instructions for use	2	Use by					



Hangzhou Singclean Medical Products Co., Ltd. No. 125(E), 10th street, Hangzhou Economic and Technological Development Zone, Zhejiang, China.P.C.: 310018



SUNGO Europe B.V.

Add: Olympisch Stadion 24, 1076DE Amsterdam, Netherlands

Rev.: 8.129.05.020-A1 Date of last revision: 2, 3, 2021

www.goodtest.eu