



EC Certificate

Full Quality Assurance System

Directive 98/79/EC on In Vitro Diagnostic Medical Devices (IVDD), Annex IV excluding (4, 6)
(List A and B and devices for self-testing)

No. V1 104507 0003 Rev. 06

Manufacturer: **ACON Laboratories, Inc.**
5850 Oberlin Drive, #340
San Diego CA 92121
USA

Product Category(ies): **Blood glucose measuring systems for self testing
and self-testing devices for clinical chemistry,
hematology and pregnancy and ovulation**

The Certification Body of TÜV SÜD Product Service GmbH declares that the aforementioned manufacturer has implemented a quality assurance system for design, manufacture and final inspection of the respective devices / device families in accordance with IVDD Annex IV. This quality assurance system conforms to the requirements of this Directive and is subject to periodical surveillance. For marketing of List A devices an additional Annex IV (4) certificate is mandatory. All applicable requirements of the testing and certification regulation of TÜV SÜD Group have to be complied with. For details and certificate validity see: www.tuvsud.com/ps-cert?q=cert:V1_104507_0003_Rev.06

Report no.: SH22743EXT01

Valid from: 2022-05-04

Valid until: 2025-05-26

Date, 2022-05-04

Christoph Dicks
Head of Certification/Notified Body



EC Certificate

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Directive 98/79/EC on In Vitro Diagnostic Medical Devices (IVDD), Annex IV excluding (4, 6)
(List A and B and devices for self-testing)

No. V1 104507 0003 Rev. 06

Model(s):

On Call Plus Blood Glucose Monitoring System,
On Call Plus Blood Glucose Test Strips,
On Call EZ II Blood Glucose Monitoring System,
On Call Advanced Blood Glucose Monitoring System,
On Call Advanced Blood Glucose Test Strips,
On Call Chosen Blood Glucose Test Strips,
On Call Vivid Blood Glucose Monitoring System (OGM-101),
On Call Vivid Blood Glucose Test Strips (OGS-101),
On Call Sharp Blood Glucose Monitoring System (OGM-121),
On Call Sharp Blood Glucose Test Strips (OGS-121)
On Call Plus II Blood Glucose Monitoring System (OGM-171),
On Call Plus II Blood Glucose Test Strips (OGS-171),
On Call Extra Blood Glucose Monitoring System (OGM-191),
On Call Extra Blood Glucose Test Strips (OGS-191),
On Call GK Dual Blood Glucose & Ketone Monitoring System (OGM-161),
On Call Blood Ketone Test Strips (OGS-161),
Urinalysis Reagent Strips (Urine),
UTI Urinary Tract Infection Test Strips,
Cholesterol Monitoring System (CCM-111),
CHOL Total Cholesterol Test Devices (CCS-111),
TRIG Triglycerides Test Devices (CCS-112),
HDL High Density Lipoprotein Test Devices (CCS-113),
3-1 Lipid Panel Test Devices (CCS-114),
Cholesterol CTRL Control Devices,
Cholesterol Monitoring System (CCM-101),
CHOL Total Cholesterol Test Strips (CCS-101),
PT/INR Monitoring System (CCM-151),
PT/INR Test Strips (CCS-151),
Hemoglobin Testing System (CCM-141),
Hemoglobin Test Strips (CCS-141),
hCG Pregnancy Rapid Test Cassette (Urine),
Pregnancy Rapid Test Midstream,
On Call Extra Mobile Blood Glucose Monitoring System (OGM-281),
On Call Sure Blood Glucose Monitoring System (OGM-211),
On Call Sure Sync Blood Glucose Monitoring System (OGM-212),
On Call Sure Blood Glucose Test Strips (OGS-211),
GIMA Blood Glucose Monitoring System,
GIMA Bluetooth Blood Glucose Monitoring System,
GIMA Blood Glucose Test Strips,
On Call GU Dual Blood Glucose & Uric Acid Monitoring



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Directive 98/79/EC on In Vitro Diagnostic Medical Devices (IVDD), Annex IV excluding (4, 6)
(List A and B and devices for self-testing)

No. V1 104507 0003 Rev. 06

System (OGM-201),
On Call Blood Uric Acid Test Strips (OGS-201),
LH Ovulation Rapid Test Cassette (Urine),
Ovulation Rapid Test Midstream,
Ovulation & Pregnancy Test Combo Pack,
On Call Extra Voice Blood Glucose Monitoring System
(OGM-291),
Early Detection Pregnancy Test,
Digital Pregnancy Test,
Go-Keto Blood Glucose & Ketone Monitoring System (OGM-
161),
Go-Keto Blood Ketone Test Strips (OGS-161),
Go-Keto Blood Glucose Test Strips,
On Call Extra GM Blood Glucose Monitoring System(OGM-
191),
On Call Extra GM Blood Glucose Test Strips (OGS-191),
On Call Plus GM Blood Glucose Monitoring System,
On Call Plus GM Blood Glucose Test Strips,
Go-Keto Urinalysis Reagent Strips

Facility(ies):

ACON Laboratories, Inc.
5850 Oberlin Drive, #340, San Diego CA 92121, USA

ACON Laboratories, Inc.
10125 Mesa Rim Road, San Diego CA 92121, USA

AZURE Institute, Inc.
10125 Mesa Rim Road, San Diego CA 92121, USA

Acon Laboratories Inc.
Guerrero Negro 9942 Parque Industrial Pacifico IV, 22644 Tijuana
B.C. CP, MEXICO

Declaration of Conformity

We, the manufacturer, under compliance to Article 17 of regulation (EU) 2017/746, declare under our sole responsibility that the medical device:

Device Name	REF Number
Mission® U120 Smart Urine Analyzer	U117-101, U117-111
Mission® U120 Smart Urine Analyzer Data Transfer Kit	U127-131
Mission® Urine Analyzer Barcode Reader	U221-111
Mission® Printer Paper Rolls	U121-101
Insight® U120 Smart Urine Analyzer	U117-105, U117-115
Insight® U120 Smart Urine Analyzer Data Transfer Kit	U127-135
Insight® Barcode Reader	U221-115
Insight® Printer Paper Rolls	U121-105
Urispin U120 Smart Urine Analyzer	5004003

of class A according to Rule 5(b) of Annex VIII of regulation (EU) 2017/746, is in conformity with

Regulation (EU) IVDR 2017/746 of the European Parliament and of the Council of 5 April 2017 on in vitro diagnostic medical devices and repealing Directive 98/79/EC and Commission Decision 2010/227/EU

and

Directive 2011/65/EU of the European Parliament and of the Council of 8 June 2011 on the restriction of the use of certain hazardous substances in electrical and electronic equipment, and further amendments to the directive issued and in force at the date of this declaration.*

It has been demonstrated that the requirements specified in Article 4 have been met.

The materials in ACON's products are assessed in accordance with ACON's procedure for approval which uses documents and contractual agreements to evaluate compliance and approve new materials and components.*

This declaration is based on:

Manufacturer's Name: ACON Laboratories, Inc.

Manufacturer's Address: 5850 Oberlin Drive, #340 San Diego, CA 92121

Manufacturer's SRN: US-MF-000023913

Authorized Representative Name: Medical Device Safety Service GmbH

Authorized Representative Address: Schiffgraben 41, 30175 Hannover, Germany

Basic UDI-DI: 68260799999004149

Intended Purpose of device: The U120 Smart Urine Analyzer is intended for use in conjunction with the Urinalysis Reagent Strips for the semi-quantitative detection of the following analytes in human urine: Albumin, Creatinine, Glucose, Bilirubin, Ketone (Acetoacetic acid), Specific Gravity, pH, Blood, Protein, Urobilinogen, Leukocytes, Ascorbic Acid and Calcium, as well as the qualitative detection of Nitrite. The instrument is intended for professional, *in vitro* diagnostic use only. The measurement can



be used in general evaluation of health, and aids in the diagnosis and monitoring of metabolic or systemic diseases that affect kidney function, endocrine disorders and diseases or disorders of the urinary tract.

Signed this 20 day of May, 2022
in San Diego, CA USA



Qiyi Xie, MD, MPH
Senior Staff, Regulatory Affairs & Clinical Affairs
ACON Laboratories, Inc.

* This statement is based on information and data provided by third parties and may not have been verified through destructive testing or other chemical analysis.



Declaration of Conformity

ACON Laboratories, Incorporated
5850 Oberlin Drive #340
San Diego, CA 92121, USA

**We, the manufacturer, declare under our sole responsibility that the
in vitro diagnostic device:**

Mission[®] Urinalysis Reagent Strips (U031-XX1)

classified as Others in the directive 98/79/EC,

**meets all the provisions of the directive 98/79/EC on *in vitro* diagnostic
medical devices which apply to it**

**The self-declaration is according to Annex III
(excluding Section 6) of the Directive.**

Authorized Representative:
Medical Device Safety Service GmbH
Schiffgraben 41
30175 Hannover, Germany

Signed this 11 day of February, 2020
in San Diego, CA USA



Qiyi Xie, MD, MPH
Senior Staff, Regulatory Affairs & Clinical Affairs
Acon Laboratories, Inc.





Certificate

No. Q5 104507 0001 Rev. 03

Holder of Certificate: **ACON Laboratories, Inc.**
5850 Oberlin Drive, #340
San Diego CA 92121
USA

Certification Mark:



Scope of Certificate: **Design and Development, Manufacture and distribution of In Vitro Diagnostic Test Kits and Reagents for the Determination of Infectious Diseases, Clinical Chemistry, Drugs of Abuse, Tumor/Cardiac Marker, Fertility/Pregnancy and Blood Glucose Monitoring System, Lancing Devices and Lancets**

The Certification Body of TÜV SÜD Product Service GmbH certifies that the company mentioned above has established and is maintaining a quality management system, which meets the requirements of the listed standard(s). All applicable requirements of the testing and certification regulation of TÜV SÜD Group have to be complied with. For details and certificate validity see: [www.tuvsud.com/ps-cert?q=cert:Q5 104507 0001 Rev. 03](http://www.tuvsud.com/ps-cert?q=cert:Q5_104507_0001_Rev._03)

Report No.: SH22743A01

Valid from: 2022-09-15
Valid until: 2025-09-06

Date, 2022-09-15



Christoph Dicks
Head of Certification/Notified Body

Certificate

No. Q5 104507 0001 Rev. 03

Applied Standard(s):

EN ISO 13485:2016
Medical devices - Quality management systems -
Requirements for regulatory purposes
(ISO 13485:2016)
DIN EN ISO 13485:2016

Facility(ies):

ACON Laboratories, Inc.
5850 Oberlin Drive, #340, San Diego CA 92121, USA

Address holder for registration only

ACON Laboratories, Inc.
10125 Mesa Rim Road, San Diego CA 92121, USA

Manufacture and distribution of
In Vitro Diagnostic Test Kits and Reagents for the Determination of
Infectious Diseases, Clinical Chemistry, Drugs of Abuse,
Tumor/Cardiac Marker, Fertility/Pregnancy and Blood Glucose
Monitoring System, Lancing Devices and Lancets

ACON Laboratories, Inc.
6865 Flanders Dr., Suite B, San Diego CA 92121, USA

Storage of
In Vitro Diagnostic Test Kits and Reagents for the Determination of
Infectious Diseases, Clinical Chemistry, Drugs of Abuse,
Tumor/Cardiac Marker, Fertility/Pregnancy and Blood Glucose
Monitoring System, Lancing Devices and Lancets

AZURE Institute, Inc.
10125 Mesa Rim Road, San Diego CA 92121, USA

Design and Development of
In Vitro Diagnostic Test Kits and Reagents for the Determination of
Infectious Diseases, Clinical Chemistry, Drugs of Abuse,
Tumor/Cardiac Marker, Fertility/Pregnancy and Blood Glucose
Monitoring System, Lancing Devices and Lancets

Acon Laboratories Inc.
Guerrero Negro 9942 Parque Industrial Pacifico IV, 22644
Tijuana B.C. CP, MEXICO

Manufacture of
blood glucose test strips, antigen rapid test and IgG/IgM antibody
rapid test for infectious disease.



STATEMENT

We, ACON Laboratories, Inc., having a registered office at *5850 Oberlin Drive #340, San Diego, CA 92121* authorize SRL Sanmedico having a registered office at *A. Corobceanu street 7A, apt. 9, Chisinău, MD-2012, Moldova*

to register, notify, renew or modify the registration of medical devices on the territory of the Republic of Moldova.

Date: January 3, 2023

Signature:

A handwritten signature in black ink, appearing to read "Xie", is written over a horizontal line.

Qiyi Xie, Md, MPH
Sr. Officer, Regulatory & Clinical Affairs
ACON Laboratories, Inc.
Ph: 858-875-8011
Email: qxie@aconlabs.com

Mission[®] Urinalysis Reagent Strips and Urine Analyzers



Obtain reliable and cost-effective results with *Mission*[®] Urinalysis Reagent Strips and Urine Analyzers!

- **Accurate**
- **Reliable**
- **Convenient**



Urinalysis Reagent Strips

Simple and Accurate

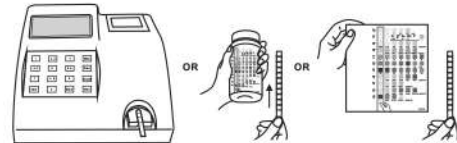
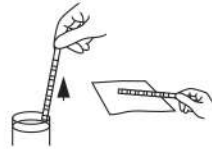
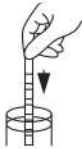
- Analytical sensitivity better than or comparable to market leaders
- High quality color chart ensures accurate visual reading

Flexible

- Compatible for visual and analyzer reading
- Over 35 different combinations available

Multiple Packaging Options and Long Shelf Life

- Canister Packaging
 - Available in 25, 50 and 100 strips per canister
 - 2 year shelf life for unopened canisters which 150 strips per kit without MA/CRE Combo offers cost savings and convenience for high volume testing
 - 3 month shelf life for strips in opened canisters
- Pouch Packaging
 - Individually packaged strips available in kit of 3 or 6 strips for visual reading only (includes 1 color chart)
 - Unique packaging maintains 2 year shelf life for all strips in the kit compared to 3 months for remaining strips in an opened canister



Step 1: Immerse strip into urine

Step 2: Remove excess urine

Step 3: Obtain results by analyzer or visual reading

No.	Catalog No.	No. of Parameters	Type of Strip [§]		Reading Availability				Parameters														
			Visual Reading	Analyzer Reading	Visual	U120	U120 Ultra	U500	ASC	GLU	BIL	KET	SG	BLO	PH	PRO	URO	NIT	LEU	ALB	CRE	CA	
1	U031-141	14	14C√		Yes	Yes	Yes	Yes	*	*	*	*	*	*	*	*	*	*	*	*	*	*	
2	U031-131	13	13CE√		Yes	Yes	Yes	Yes	*	*	*	*	*	*	*	*	*	*	*	*	*	*	
3	U031-111	11	11A√†		Yes	Yes	Yes	Yes	*	*	*	*	*	*	*	*	*	*	*	*	*	*	
4	U031-101	10	10U√x		Yes	Yes	Yes	Yes		*	*	*	*	*	*	*	*	*	*	*	*	*	
5	U031-191	9	9U√x		Yes	Yes	Yes	Yes		*	*	*	*	*	*	*	*	*	*	*	*	*	
6	U031-081	8	8U√x		Yes	Yes	Yes	Yes		*	*	*	*	*	*	*	*	*	*	*	*	*	
7			8N√x		Yes	Yes	Yes	Yes		*		*	*	*	*	*	*	*	*	*	*	*	
8			8S√x		Yes	Yes	No	Yes		*		*	*	*	*	*	*	*	*	*	*	*	*
9			8K√x		Yes	Yes	No	Yes		*	*	*		*	*	*	*	*	*	*	*	*	*
10	U031-071	7	7N√x		Yes	Yes	Yes	Yes		*		*		*	*	*		*	*				
11	U031-061	6	6N√x	6NE√x	Yes	Yes	No	Yes		*				*	*	*		*	*				
12			6U√x	6UE√x	Yes	Yes	No	Yes			*		*	*	*	*	*	*	*				
13	U031-051	5	5B√x	5BE√x	Yes	Yes	No	No		*		*		*	*	*							
14			5N√x	5NE√x	Yes	Yes	Yes	No		*				*	*	*		*	*				
15			5S√x	5SE√x	Yes	Yes	No	No		*			*	*	*	*	*	*	*	*			
16			5U√x	5UE√x	Yes	Yes	No	No			*		*		*		*	*	*	*	*		
17	U031-041	4	4P√x	4PE√x	Yes	Yes	Yes	Yes		*					*		*	*					
18			4S√x	4SE√x	Yes	Yes	Yes	Yes		*		*		*	*	*							
19			4B√x	4BE√x	Yes	Yes	No	No		*			*	*	*	*	*	*	*	*			
20			4K√x	4KE√x	Yes	Yes	Yes	Yes		*		*		*	*	*	*	*	*	*	*		
21			4G√x	4GE√x	Yes	Yes	No	No		*			*	*	*	*	*	*	*	*	*	*	*
22	4N√x	4NE√x	Yes	Yes	No	Yes					*	*	*	*	*	*	*	*	*	*	*		
23	U031-031	3	3P√x	3PE√x	Yes	Yes	Yes	Yes		*				*	*	*	*	*	*	*	*	*	
24			3K√x	3KE√x	Yes	Yes	Yes	Yes		*		*		*	*	*	*	*	*	*	*	*	
25			3G√x	3GE√x	Yes	Yes	No	Yes		*		*		*	*	*	*	*	*	*	*	*	*
26			3N√x	3NE√x	Yes	Yes	No	Yes					*	*	*	*	*	*	*	*	*	*	*
27	U031-021	2	2G√x	2GE√x	Yes	Yes	Yes	Yes		*				*	*	*	*	*	*	*	*	*	
28			2K√x	2KE√x	Yes	Yes	Yes	Yes		*		*		*	*	*	*	*	*	*	*	*	*
29			2N√x	2NE√x	Yes	Yes	Yes	Yes											*	*			
30			2B√x	2BE√x	Yes	Yes	No	Yes					*	*	*	*	*	*	*	*	*	*	*
31			2U√x	2UE√x	Yes	Yes	No	Yes			*					*	*	*	*	*	*	*	*
32			2S√x	2SE√x	Yes	Yes	No	Yes				*		*	*	*	*	*	*	*	*	*	*
33	2C√	2CE√	Yes	Yes	Yes	Yes						*	*	*	*	*	*	*	*	*	*		
34	U031-011	1	1B√x	1BE√x	Yes	Yes	No	No					*	*	*	*	*	*	*	*	*	*	
35			1P√x	1PE√x	Yes	Yes	No	No						*	*	*	*	*	*	*	*	*	*
36			1G√x	1GE√x	Yes	Yes	Yes	No		*													
37			1K√x	1KE√x	Yes	Yes	No	No				*											
38			1R√x	1RE√x	Yes	Yes	No	No								*	*	*	*	*	*	*	*

§Type of Strip:

Visual Strip Size: 1-6 Parameters: 80 mm x 5 mm; 7-14 Parameters: 108 mm x 5 mm
 U120/U500 Strip Size: 1-14 Parameters: 108 mm x 5 mm
 *E" means extended strip length for 1-6 Parameters and exclusive strip length for 13 Parameter
 Default Type of Strip (U120/U500): 11A, 10U, 9U and 8N
 Standard Black Canisters : Available for 25, 50 and 100 strips; 150 strips per kit without MA/CRE Combo
 Pouch: Single-strip pouch available in kit of 3 or 6 for visual reading only

✓ CE Marked for sale in the European Community
 † FDA 510(k) Cleared
 x FDA 510(k) Cleared and CLIA Waived

U120 Urine Analyzer



Accurate

- Up to 120 tests/hour in Continuous Test Option
- Test categories include Routine, STAT and QC
- Automatic calibration for accurate results and easy operation

Reliable

- Can read strips with up to 14 parameters, including Microalbumin/Creatinine/Calcium
- Minimal training required

Convenient Operation

- Saves and recalls the last 2,000 results automatically
- Audible beep signals operator to dip strips in urine
- Can print up to 3 copies per test for convenient reviewing and easy record keeping
- Option to print results on sticker paper for quick and simple record management

Easy Data Management

- Includes RS232C and USB ports for easy data transfer to an external computer or LIS
- Record Operator/Patient ID by Manual Entry and Barcode Reader

Specifications

Features	Specifications
Analyzer Type	Manual
Methodology	Reflectance Photometry
Detection	Photosensitive Diode
Throughput	Single Test Option: 60 tests/hour Continuous Test Option: 120 tests/hour
Test Categories	Routine, STAT and QC
Memory	Last 2,000 results
Strip Incubation Time	1 Minute
Wavelength of Monochromatic LED	525 nm and 635 nm
Default Strips	8, 9, 10, 11 Parameters (108 mm x 5 mm)
Strips Available	1-14 parameters (108 mm x 5 mm); see URS Parameters
Total Combinations Per Analyzer	4 Combinations
Analyzer Ports	RS232C Port for Barcode Reader or Data Transfer USB Port for Data Transfer 25 Pin Parallel Port for External Printer
Data Entry Capabilities	Operator/Patient ID - Manual Entry and Barcode Reader (Up to 20 characters)
Connection Capabilities	Internal Thermal Printer (included) RS232C Barcode Reader (optional) Optional External Printer (not included) USB or RS232C Data Transfer Cable (optional)
Major Readable Barcodes	Code 128, Code 39, Codabar (NW-7), EAN 8, EAN 13, Interleave 25, UPCA, UPCE
Calibration	Automatic
Available Languages on the Screen	English and additional language(s)
Operating Conditions	0-40°C (32-104°F); ≤85% RH
Storage Conditions	-5-50°C (23-122°F); ≤90% RH
Power Source	100-240 VAC, 50-60 Hz
Dimensions (L x W x H)	27.2 cm x 26.9 cm x 14.6 cm (10.7" x 10.6" x 5.7")
Display Dimensions (L x W)	10.8 cm x 5.7 cm (4.2" x 2.2")
Weight	2.6 kg (5.7 lbs) without batteries or power supply

Ordering Information

Product Name	Catalog No.	Components	Kit Box Dimensions (L x W x H) & Weight	Carton Dimensions (L x W x H) & Weight	Number of Kits/Carton
U120 Urine Analyzer	U111-101 ^{√X}	1 Urine Analyzer 1 Strip Holder 2 Printer Paper Rolls	2 Fuses (2.0A) 1 Power Cord 1 Quick Start Guide 1 Instruction Manual	42.0 cm x 41.5 cm x 31 cm; 5.0 kg 16.4" x 16.2" x 12.1"; 176.4 oz	1
U120 Urine Analyzer with Barcode Reader	U111-111 ^{√X}	1 Urine Analyzer 1 Strip holder 2 Printer Paper Rolls 1 Barcode Reader (RS232C)	2 Fuses (2.0A) 1 Power Cord 1 Serial Splitter Cable (RS232C) 1 Quick Start Guide 1 Instruction Manual	44.5cm x 44.5cm x 40.0cm; 5.5 kg 17.5" x 17.5" x 15.7"; 194 oz	1
Barcode Reader	U221-111 ^{√X}	1 Barcode Reader (RS232C)	1 Serial Splitter Cable (RS232C)	23.6 cm x 10.8 cm x 7.8 cm; 0.482 kg 9.3" x 4.3" x 3.1"; 17.0 oz 63.0 cm x 37.0 cm x 30.0 cm; 12.0 kg 24.8" x 14.6" x 11.8"; 423.3 oz	22
Printer Paper Rolls	U121-101	4 Printer Paper Rolls	Thermal Paper (0.06 m x 20 m): 200 results/roll Sticker Paper (0.06 m x 9 m): 100 results/roll	12.0 cm x 12.0 cm x 6.5 cm; 0.36kg 4.7" x 4.7" x 2.6"; 12.7oz 63.0 cm x 37.0 cm x 30.0 cm; 19.4 kg 24.8" x 14.6" x 11.8"; 684.3 oz 12.0 cm x 12.0 cm x 6.5 cm; 0.4 kg 4.7" x 4.7" x 2.6"; 14.1 oz 63.0 cm x 37.0 cm x 30.0 cm; 21.4 kg 24.8" x 14.6" x 11.8"; 684.3 oz; 754.9 oz	50
U120 Data Transfer Kit	U221-131 ^{√X}	1 Data Transfer Cable (RS232C)	1 Package Insert	16.0 cm x 13.0 cm x 3.5 cm; 0.147 kg 6.3" x 5.1" x 1.4"; 5.2 oz 25.0 cm x 21.0 cm x 15.0 cm; 1.36 kg 9.8" x 8.3" x 5.9"; 48.0 oz	8

✓ CE Marked for sale in the European Community 

X FDA 510(k) Cleared and CLIA Waived

U120 Ultra Urine Analyzer



Easy to Operate

- Large color touchscreen LCD for simple menu navigation
- Work List and Help Menu available for specimen review and troubleshooting
- Powered by AC adaptor or 6 AA batteries for easy portability
- Up to 2,000 patient memory and 800 Operator ID storage
- Ability to select Time Logout between 1-99 with minutes or hours option

Accurate and Efficient

- Advanced CMOS Image Sensor ensures accurate readings
- Can read strips with up to 14 parameters, including Microalbumin, Creatinine and Calcium
- Option to edit test number sequence, or skip then return to specific test numbers
- Ability to edit abnormal results

Simple Data Transfer

- Immediate transmission of LIS data using Bluetooth, LAN or WLAN
- Ability to update software with SD card or USB flash drive

Unique Lockout Functions

- Strip Lockout
 - Pre-set option to prevent using strips of another brand, with a barcode reader or by manual entry
- User Lockout
 - Option to eliminate unapproved users with up to 800 operators
- QC Lockout
 - Prevents testing without passing QC
 - If QC tests fail, analyzer will switch to STAT mode and list "E" at the end of each test number

Specifications

Feature	Specifications
Analyzer Type	Manual
Methodology	Reflectance Photometry
Detection	CMOS Image Sensor
Throughput	Single Test Option: 55 tests/hour; Continuous Test Option: 120 tests/hour
Test Modes	Quick Test Mode, Full Test Mode and Customized Test Mode
Test Category	Routine, STAT and QC
Lockout Functions	Strip Lockout: Available Upon Request; User/QC Lockout: Included with option to turn ON/OFF
Memory	Last 2,000 Records
Strip Incubation Time	1 Minute
Wavelength	390 nm - 770 nm
Strips Available	1-14 parameters (108 mm x 5 mm); see URS Parameters
Parameter Order	Can select the order of parameters for display and print out
Total Combinations Per Analyzer	Over 15 Combinations
Analyzer Ports	RS232C Port for Barcode Reader or Data Transfer and External Printer USB Ports for Keyboard or Data Transfer
Data Entry Capabilities	Operator ID, Patient ID/Name - Manual Entry and Barcode Reader (Up to 20 characters) Urine Color and Clarity, Strip Lot Number, and Expiration Date - Manual Entry
Connection Capabilities	Internal Thermal Printer (included) Bluetooth (included) Bluetooth Adaptor (optional) RS232C Barcode Reader (optional) USB or RS232C Data Transfer Cable (optional) SD Card or USB flash drive for Software Update (optional) Ethernet via USB to RJ45 Adaptor (optional) Keyboard (not included) Optional External Printer (not included)
Major Readable Barcodes	Code 39 EAN 8 French Pharmacode Matrix 25 RSS Code 93 EAN 13 Industrial 25 MSI Telepen Code 128 EAN 128 Interleave 25 Plessey UPCA Codabar (NW-7) Italy Pharmacode UPCE
Screen Type	Large color touch screen LCD (12 cm x 9 cm)
LIS Interface	Formatted and compatible with HL-7 compliant, ACON standard interface, S interface, D interface, U interface and R interface for downloading of LIS data
Calibration	Automatic
Available Languages on the Screen	More than 10 languages available, including English
Analyzer Operating Conditions	0-40°C (32-104°F); 5%-85% RH
System Operating Conditions	15-30°C (59-86°F); 20%-80% RH
Storage Conditions	-5-50°C (23-122°F); ≤90% RH
Power Source	100-240 VAC, 45-65 Hz; 6 AA Alkaline Batteries
Line Leakage Current	0.5 mA
Dimensions (L x W x H)	26 cm x 15 cm x 18 cm (10" x 6" x 7")
Display Dimensions (L x W)	12 cm x 9 cm (5" x 4")
Weight	1.7 kg (3.7 lb) without batteries or power supply

Ordering Information

Product Name	Catalog No.	Components	Kit Box Dimensions (L x W x H) & Weight	Carton Dimensions (L x W x H) & Weight	Number of Kits/Carton
U120 Ultra Urine Analyzer	U114-101 ✓	1 Urine Analyzer 2 Test Tables 2 Test Table Inserts 2 Printer Paper Rolls	1 Power Cord and Supply Adapter 1 Brush 1 Quick Start Guide 1 Instruction Manual	40 cm x 39 cm x 36 cm; 4 kg	1
				16" x 15" x 14"; 141 oz	
U120 Ultra Urine Analyzer with Barcode Reader	U114-111 ✓	1 Urine Analyzer 2 Test Tables 2 Test Table Inserts 2 Printer Paper Rolls 1 Barcode Reader (RS232C)	1 Power Cord and Supply Adapter 1 Brush 1 Quick Start Guide 1 Instruction Manual	40 cm x 39 cm x 36 cm; 4 kg	1
				16" x 15" x 14"; 141 oz	
Barcode Reader	U124-111 ✓	1 Barcode Reader (RS232C)		23.6 cm x 10.8 cm x 7.8 cm; 0.36 kg	22
				9.3" x 4.3" x 3.1"; 17.0 oz	
Printer Paper Rolls	U121-101	4 Printer Paper Rolls	Thermal Paper (0.06 m x 20 m): 200 results/roll Sticker Paper (0.06 m x 9 m): 100 results/roll	12.0 cm x 12.0 cm x 6.5 cm; 0.36 kg	50
				4.7" x 4.7" x 2.6"; 12.7oz	
				24.8" x 14.6" x 11.8"; 684.3 oz	
U120 Ultra Data Transfer Kit	U124-131 ✓	1 Data Transfer Cable (RS232C) 1 Package Insert		12.0 cm x 12.0 cm x 6.5 cm; 0.4 kg	8
				63.0 cm x 37.0 cm x 30.0 cm; 21.4 kg	
				4.7" x 4.7" x 2.6"; 14.1 oz	
				24.8" x 14.6" x 11.8"; 684.3 oz; 754.9 oz	
				16.0 cm x 13.0 cm x 3.5 cm; 0.147 kg	
				6.3" x 5.1" x 1.4"; 5.2 oz	
				25.0 cm x 21.0 cm x 15.0 cm; 1.36 kg	
				9.8" x 8.3" x 5.9"; 48.0 oz	

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U500 Urine Analyzer



Accurate and Efficient

- Up to 500 tests/hour for medium/large volume sample testing
- Professional accuracy equivalent to market leader
- Automatic strip detection and alignment for better efficiency
- Test categories include Routine, STAT and QC

Easy to Operate

- Large touch screen LCD offers simple menu navigation
- Uniquely designed strip platform/waste tray unit for easy one-step cleaning

Convenient

- Automatic calibration and waste disposal reduce hands-on time
- Can read strips with up to 14 parameters, including Microalbumin/Creatinine/Calcium
- Strip selection of up to 4 combinations for analyzer reading
- Stores up to 2,000 records and automatically flags abnormal results
- Capable of printing results on sticker paper for quick and easy record management

Data Management Capability

- Includes RS232C port for easy data transfer to an external computer or LIS
- Record Operator/Patient ID by Manual Entry and Barcode Reader

Unique Lockout Functions

- Strip Lockout
 - Pre-set option to prevent using strips of another brand, with a barcode reader or by manual entry
- User Lockout
 - Option to eliminate unapproved users with up to 10 operators
- QC Lockout
 - Prevents testing without passing QC
 - If QC tests fail, analyzer will switch to STAT mode and list "E" at the end of each test number

Specifications

Feature	Specifications
Analyzer Type	Semi-Automatic
Methodology	Reflectance Photometry
Detection	Photosensitive Diode
Throughput	500 tests/hour (Measuring cycle: 7 seconds/test)
Test Categories	Routine, STAT and QC
Lockout Functions	Strip Lockout: Available Upon Request; User/QC Lockout: Included with option to turn ON/OFF
Memory	Last 2,000 Records
Strip Incubation Time	1 Minute
Wavelength	525 and 635 nm
Default Strips	8, 9, 10, 11 Parameters (108 mm x 5 mm)
Strips Available	1-14 parameters (108 mm x 5 mm); see URS Parameters
Parameter Order	Can select the order of parameters for display and print out
Total Combinations Per Analyzer	4 Combinations
Waste Disposal Capacity	Up to 150 Strips
Analyzer Ports	RS232C Port for Barcode Reader or Data Transfer 25 Pin Parallel Port for External Printer
Data Entry Capabilities	Operator/Patient ID - Manual Entry and Barcode Reader (Up to 25 characters)
Connection Capabilities	Internal Thermal Printer (included) RS232C Barcode Reader (optional) Optional External Printer (not included) RS232C Data Transfer Cable (optional)
Major Readable Barcodes	Code 128, Code 39, Codabar (NW-7), EAN 8, EAN 13, Interleave 25, UPCA, UPC-E
Calibration	Automatic
Available Languages on the Screen	English and additional language(s)
Operating Conditions	0-40°C (32-104°F); ≤85% RH
Storage Conditions	-5-50°C (23-122°F); ≤90% RH
Power Source	100-240 VAC, 50-60 Hz
Dimensions (L x W x H)	36.6 cm x 28.3 cm x 19.5cm (14.4" x 11.1" x 7.7")
Display Dimensions (L x W)	11.5 cm x 9.0 cm (4.5" x 3.5")
Weight	4.0 kg (8.8 lbs) without batteries or power supply

Ordering Information

Product Name	Catalog No.	Components	Kit Box Dimensions (L x W x H) & Weight	Carton Dimensions (L x W x H) & Weight	Number of Kits/Carton
U500 Urine Analyzer	U211-101 [†]	1 Urine Analyzer 1 Strip Platform/Waste Tray 2 Printer Paper Rolls	2 Fuses (2.0A) 1 Power Cord 1 Instruction Manual	51.0 cm x 42.0 cm x 38.5 cm; 7 kg 20.1" X 16.5" x 15.2"; 246.9 oz	1
U500 Urine Analyzer with Barcode Reader	U211-111 [†]	1 Urine Analyzer 1 Strip Platform/Waste Tray 2 Printer Paper Rolls 1 Barcode Reader (RS232C)	2 Fuses (2.0A) 1 Power Cord 1 Serial Splitter Cable (RS232C) 1 Instruction Manual	55.0 cm x 55.0 cm x 55.0cm; 9.2 kg 21.7" x 21.7" x 21.7"; 324.5 oz	1
Barcode Reader	U221-111 [†]	1 Barcode Reader (RS232C)	1 Serial Splitter Cable (RS232C)	23.6 cm x 10.8 cm x 7.8 cm; 0.482 kg 9.3" x 4.3" x 3.1"; 17.0 oz	22
Printer Paper Rolls	U121-101	4 Printer Paper Rolls	Thermal Paper (0.06 m x 20 m): 200 results/roll Sticker Paper (0.06 m x 9 m): 100 results/roll	12.0 cm x 12.0 cm x 6.5 cm; 0.360 kg 4.7" x 4.7" x 2.6"; 12.7oz 63.0 cm x 37.0 cm x 30.0 cm; 19.4 kg 24.8" x 14.6" x 11.8"; 684.3 oz 12.0 cm x 12.0 cm x 6.5 cm; 0.40 kg 4.7" x 4.7" x 2.6"; 14.1oz 63.0 cm x 37.0 cm x 30.0 cm; 21.4 kg 24.8" x 14.6" x 11.8"; 684.3 oz; 754.9 oz	50
U500 Data Transfer Kit	U221-131 [†]	1 Data Transfer Cable (RS232C)	1 Package Insert	16.0 cm x 13.0 cm x 3.5 cm; 0.147kg 6.3" x 5.1" x 1.4"; 5.2 oz	8

✓ CE Marked for sale in the European Community 
 † FDA 510(k) Cleared

Urine Controls

Reliable

- Use with *Mission*[®] and *Mission*[®] *Expert* Urinalysis Reagent Strips and Urine Analyzers for optimum quality control
- Validate urinalysis results and prevent procedure errors

Quick and Convenient Testing

- Ensures accurate results for all parameters
- Obtain quick results in any setting
- Competitively priced



Two Types of Urine Controls Available

Liquid Urine Control

- Ready to use without dissolving in distilled water
- 24 months shelf life for unopened controls at 2-8°C
- Two Packaging Options
 - Dropper Tip Bottles
 - Dropper tip bottles provide efficient use of the control solution
 - Easily drop the control solution onto each reagent pad using the dropper tip bottle
 - Controls can be used up to 40 times within 30 days at room temperature
 - Diptubes
 - Diptube packaging allows for quick testing similar to using a urine specimen
 - Simply dip the strip into the control solution and read results
 - Controls can be used up to 20 times within 30 days at room temperature

Dry Strip Urine Control

- Portable for use anywhere with no refrigeration required
- Dissolve the dry strip urine control in distilled water, dip urine strip in the control solution, then compare to color chart
- Each control solution can be used for up to 12 tests at 2-30°C within 8 hours for all parameters
- 24 months shelf life at 2-30°C for unopened controls

Specifications

Features	Specifications		
Product Name	Liquid Urine Control	Liquid Diptube Urine Control	Dry Strip Urine Control
Test Parameters	LEU, NIT, URO, PRO, pH, BLO, SG, KET, BIL, GLU, ASC, ALB, CRE, CA (13)		
Solution Detection Levels	Level 1	Negative: LEU, NIT, URO, PRO, pH, BLO, SG, KET, BIL, GLU, ASC, ALB, CRE, CA	
	Level 2	Positive: LEU, NIT, URO, PRO, pH, BLO, SG, KET, BIL, GLU, ALB CRE, CA and Negative ASC	
Compatible Urine Strips	<i>Mission</i> [®] Urinalysis Reagent Strips, <i>Mission</i> [®] <i>Expert</i> Urinalysis Reagent Strips		
Reading Time/Stability	Refer to insert	Refer to insert	Refer to insert
Storage Temperature	2-8°C	2-8°C	2-30°C
Unopened Control Shelf Life	24 months	24 months	24 months
Opened Control Stability	30 days at 15-30°C or until the expiration date at 2-8°C	30 days at 15-30°C or until the expiration date at 2-8°C	2-30°C: 3 months for Dry Strip; 8 hours for Control Solution for all parameters
Maximum Tests per Unit	20 or 40 tests/bottle	20 tests/diptube	12 tests/control solution of 1 dry strip

Ordering Information

Product Name	Catalog No.	Components	Kit Box Dimensions (LxWxH) & Weight	Carton Dimensions (LxWxH) & Weight	# Kits/Carton
Liquid Urine Control ✓X	U021-011	Level 1: 3 x 10 mL/bottle; Level 2: 3 x 10 mL/bottle	85 mm x 55 mm x 60 mm; 107 g	400 mm x 270 mm x 345 mm; 5.2 kg	198
		Level 1: 3 x 5 mL/bottle; Level 2: 3 x 5 mL/bottle	85 mm x 55 mm x 60 mm; 75 g	400 mm x 270 mm x 345 mm; 4.2 kg	198
		Level 1: 1 x 10 mL/bottle; Level 2: 1 x 10 mL/bottle	55 mm x 28 mm x 60 mm; 41 g	400 mm x 270 mm x 345 mm; 6.6 kg	228
		Level 1: 1 x 5 mL/bottle; Level 2: 1 x 5 mL/bottle	55 mm x 28 mm x 60 mm; 31 g	400 mm x 270 mm x 345 mm; 5.5 kg	228
Liquid Diptube Urine Control ✓X	U021-071	Level 1: 2 x 12 mL/diptube; Level 2: 2 x 12 mL/diptube	130 mm x 55 mm x 55 mm; 101 g	385 mm x 255 mm x 320 mm; 4.7 kg	30
		Level 1: 1 x 12 mL/diptube; Level 2: 1 x 12 mL/diptube	130 mm x 55 mm x 55 mm; 62 g	385 mm x 255 mm x 320 mm; 3.5 kg	30
Dry Strip Urine Control ✓X	U021-041	Level 1: 1 x 25 strips/canister; Level 2: 1 x 25 strips/canister	100 mm x 51 mm x 110 mm; 126 g	280 mm x 280 mm x 260 mm; 3.6 kg	24
		Level 1: 1 x 10 strips/canister; Level 2: 1 x 10 strips/canister	100 mm x 51 mm x 110 mm; 106 g	280 mm x 280 mm x 260 mm; 3.1 kg	24

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X FDA 510(k) Cleared and CLIA Waived

We also offer other rapid diagnostic and medical products for:

Blood Glucose Monitoring Systems, Clinical Chemistry including Urinalysis, Immunoassay EIA/ELISA and more.

Contact us for worldwide distribution and custom manufacturing (OEM) opportunities



ACON Laboratories, Inc., 10125 Mesa Rim Road, San Diego, CA 92121, U.S.A. • Tel: 1-858-875-8000 • Fax: 1-858-200-0729 • E-mail: info@aconlabs.com
Please visit our website for details: www.aconlabs.com

ПАСПОРТ

Масло иммерсионное, тип А (классическое), 100 мл

Серия 454/16 Дата выпуска 01.2022 Годен до 01.2025
Количество флаконов в серии 20000

Наименование показателя	Требования по ГОСТ 13739-78	Результаты анализа
1. Внешний вид	Жидкость от бесцветного до светло-желтого цвета	соответствует
2. Технические характеристики		
2.1. Вязкость кинематическая (ν), при 20 °С, м ² /с*10 ⁻⁴ , не менее	6	13
2.2. Коэффициент пропускания (Т), при толщине слоя 1 мм, %		
при длине волны 635 нм, не менее	95	96
при длине волны 440 нм, не менее	92	98
2.3. Коэффициент преломления (n), при 20 °С	1,515 ± 0,001	1,515
2.4. Средняя дисперсия (n _f -n _c), при 20 °С	0,0106 +/- 0,0003	0,0107

Заключение ОКК ООО «Агат-Мед»:

Набор серии 454/16 требованиям ГОСТ 13739-78 соответствует.

Начальник ОКК ООО «АГАТ-МЕД» Гладун В.В.

« 01 » января 2022 г.




МП

CE Declaration of Conformity

We,
Atlas Medical GmbH
 Head office: Ludwig-Erhard-Ring 3
 15827 Blankenefelde-Mahlow Germany
 Tel: +49(0)33708355030
 Email: info@atlas-site.com

Middle East Site: : Sahab Industrial Zone Area, King Abdullah II Industrial City
 Amman 11512, Jordan
 Tel.: +962 6 4026468
 Fax: +962 6 4022588
 Email: info@atlas-medical.com

Declare our responsibility that the following product:

Blood Grouping Reagents:
(Anti-A Monoclonal Reagent, Anti-B Monoclonal Reagent , Anti-AB Monoclonal Reagent and Anti-D IgG/IgG blend Reagent)
 see the attached list of variants

That are classified as Annex II, list A

Is produced under Atlas quality system (ISO13485: 2016) supported by GMED certificate and complies with the essential requirements of

In Vitro Diagnostic Medical Devices Directive 98/79/EC

And

EN ISO 18113-1, -2 :2011, EN ISO 15223:2016
 EN ISO 14971:2019, EN ISO 23640 :2015 , ISO 2859 :2017,
 EN 13612:2002, EN 13641:2002 , EN 13975:2003,
 EN ISO 13485:2016, EN 62366-1:2020

And

Intended for In-Vitro Professional use only.

Conformity Assessment Route:

Annex IV.3 –Approval full Quality Assurance System.

Annex IV.4-EC Design Examination (of the product)

Notified Body:

G-MED	CE	0459
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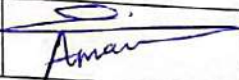
GMED, Laboratoire national de métrologie et d'essais

1 rue Gaston Boissier 75015 Paris

Tél. : 01 40 43 37 00 , TVA:FR 28 839 022 522

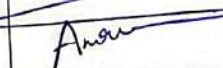
EC Certificates No.:

- CE Certificate of Approval full Quality Assurance System: 33540 rev4.
- CE Certificate Of EC Design Examination: 33544 rev3.

Atlas Medical GmbH	Start of CE Marking	Date of expiry	Name & Position	Signature	MRXDO10F.11 21.10.2013
	09 th october 2017	26 th May 2025	Amani Al-habahbeh (RA Manager)		

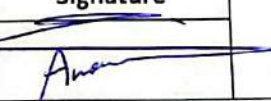


Product Code	Product Name	GMDN Code
8.02.00.0.0010	Anti-A Monoclonal Reagent (Titer: 1/512), 10ml/vial, 1 vial/Carton Box	52532
8.02.00.1.0100	Anti-A Monoclonal Reagent (Titer: 1/512), 10ml/vial. 10 vials / Plastic Pack	52532
8.02.00.1.0180	Anti-A Monoclonal Reagent (Titer: 1/512), 10ml/vial. 18 vials / Carton Box	52532
8.02.01.0.0010	Anti-B Monoclonal Reagent (Titer: 1/512), 10ml/vial, / Carton Box	52538
8.02.01.1.0100	Anti-B Monoclonal Reagent (Titer: 1/512), 10ml/vial, 10 vials / Plastic Pack	52538
8.02.01.1.0180	Anti-B Monoclonal Reagent (Titer: 1/512), 10ml/vial, 18 vials / Carton Box	52538
8.02.02.0.0010	Anti-AB Monoclonal Reagent (Titer: 1/512), 10ml/vial, 1 vial/ Carton Box	46442
8.02.02.1.0100	Anti-AB Monoclonal Reagent (Titer: 1/512), 10ml/vial, 10 vials/Plastic Pack	46442
8.02.02.1.0180	Anti-AB Monoclonal Reagent (Titer: 1/512), 10ml/vial, 18 vials/Carton Box	46442
8.02.03.0.0010	Anti-D IgG/IgM Blend Reagent (Titer: 1/128), 10ml/vial, 1 vial/ Carton Box	52647
8.02.03.1.0100	Anti-D IgG/IgM Blend Reagent (Titer: 1/128), 10ml/vial, 10 vials / Plastic Pack	52647
8.02.03.1.0180	Anti-D IgG/IgM Blend Reagent (Titer: 1/128), 10ml/vial, 18 vials / Carton Box	52647
8.02.04.0.0010	Anti-A Monoclonal Reagent (Titer: 1/256), 10ml/vial, 1 Vial/Carton Box	52532
8.02.04.0.0100	Anti-A Monoclonal Reagent (Titer: 1/256), 10ml/vial, 10 vials / Plastic Pack	52532
8.02.05.0.0010	Anti-B Monoclonal Reagent (Titer: 1/256), 10ml/vial, 1vial/Carton Box	52538
8.02.05.0.0100	Anti-B Monoclonal Reagent (Titer: 1/256), 10ml/vial, 10 vials /Plastic Pack	52538
8.02.05.6.0030	ABO Set (Anti-A (1/256), Anti-B (1/256), Anti-D (1/64)),3x10ml / plastic Pack	45308
8.02.05.7.0020	ABO Set: Anti-A (1/256), Anti-B (1/256), 2x10ml /Plastic Pack	52695
8.02.06.0.0010	Anti-AB Monoclonal Reagent (Titer: 1/256), 10ml/vial, 1vial/Carton Box	46442
8.02.06.1.0100	Anti-AB Monoclonal Reagent (Titer: 1/256), 10ml/vial,10 vials /Plastic Pack	46442
8.02.06.1.0180	Anti-AB Monoclonal Reagent (Titer: 1/256), 10ml/vial,18 vials / Carton Box	45308
8.02.07.0.0010	Anti-D IgG/IgM Blend Reagent (Titer: 1/64), 10ml/vial, 1Vial/ Carton Box	52647
8.02.07.1.0100	Anti-D IgG/IgM Blend Reagent (Titer: 1/64), 10ml/vial, 10 vials / Plastic Pack	52647

Atlas Medical GmbH	Start of CE Marking	Date of expiry	Name & Position	Signature.	MRXDO10F.11 21.10.2013
	09 th october 2017	26 th May 2025	Amani Al-habahbeh (RA Manager)		

8.02.47.0.0030	ABO Set (Anti-A (1/512), Anti-B (1/512), Anti-D (1/128)),3x10ml/Plastic Pack	45308
8.02.47.1.0030	ABO Set (Anti-A (1/256), Anti-B (1/256), Anti-D (1/64)), 3x10ml /Carton Box.	45308
8.02.47.3.0030	ABO Set (Anti-A (1/256), Anti-B (1/256), Anti-D (1/64)), 3x10ml /Plastic Pack	45308
8.02.47.5.0030	ABO Set (Anti-A (1/256), Anti-B (1/256), Anti-D (1/128)), 3x10ml/Plastic Pack	45308
8.02.49.0.0040	ABO Set (Anti-A (1/256), Anti-B (1/256), Anti-AB (1/256), Anti-D (1/64)), 4x10ml/Carton Box	45308
8.02.49.2.0040	ABO Set (Anti-A (1/256), Anti-B (1/256), Anti-AB (1/256), Anti-D (1/128)), 4 x 10ml, 4 vials/Plastic Pack	45308
8.02.53.0.0040	ABO Set (Anti-A (1/512), Anti-B (1/512), Anti-AB (1/512) Anti-D (1/128)), 4x10ml/Plastic Pack	45308
8.02.53.1.0040	ABO Set (Anti-A (1/512), Anti-B (1/512), Anti-AB (1/512) Anti-D (1/128)), 4x10ml, 4vials/Plastic Pack	45308
8.02.70.0.0010	Anti-A monoclonal reagent , Titer (1/1024), 10 ml/vial, 1Vial/ Carton Box	52532
8.02.71.0.0010	Anti-B Monoclonal reagent (Titer: 1/1024) , 10 ml/vial ,1Vial/ Carton Box	52538
8.02.72.0.0010	Anti-AB Monoclonal reagent (Titer: 1/1024) , 10 ml/vial , 1Vial/ Carton Box	45308
8.02.85.0.0010	Anti-D IgG/IgM Blend Reagent , Titer 1/256, 10ml/vial, 1Vial/ Carton Box	52647



Atlas Medical GmbH	Start of CE Marking	Date of expiry	Name & Position	Signature	MRXDO10F.11 21.10.2013
	09 th october 2017	26 th May 2025	Amani Al-habahbeh (RA Manager)		

CE Declaration of Conformity

Name and address of Manufacturer	Atlas Medical GmbH Ludwig-Erhard-Ring 3, 15827 Blankenefelde-Mahlow Germany . Tel: +49(0)33708355030 Email: info@atlas-medical.com
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Atlas Medical GmbH declared our his own responsibility that the following IVD medical devices:

Product Code	Product Name	GMDN code
8.17.003.0300	Atlas Periodic Acid Schiff (PAS) Stain Kit, 3x100ml	43587
8.17.004.0300	Atlas Iron Stain Kit, 3x100ml	43587
8.17.009.1000	Atlas Gram Stain Kit	43733
8.17.010.0750	Atlas ZN (Kinyoun) stain pack , 3x250ml	43587
8.15.144.0250	Atlas ZN Decolouriser, 250 ml /Bottle	43587
8.17.015.0500	Atlas Diff-3 Stain.	43587
8.17.016.1000	Atlas Papanicolau Stain Pack.	43587
8.17.110.0250	Atlas Papanicolau Stain EA35, 250 ml /Bottle.	43587
8.17.111.0250	Atlas Papanicolau Stain EA36, 250 ml /Bottle	43587
8.17.112.0250	Atlas Papanicolau Stain EA65, 250 ml /Bottle.	43587
8.17.114.0250	Atlas Papanicolau Stain EA50, 250 ml /Bottle.	43587
8.17.115.0250	Atlas Papanicolau Stain OG6, 250 ml /Bottle.	43587
8.17.014.1000	Atlas Reticulocytes stain (Methylene Blue) , 1000 ml /Bottle	43587
8.15.037.0250	Atlas Eosin Y (1%) Stain, 250 ml/Bottle	43587
8.15.038.0250	Atlas Eosin Y (5%) Stain, 250 ml/Bottle.	43587
8.15.041.0250	Atlas Field Stain (Solution A), 250ml/Bottle	43587
8.15.042.0250	Atlas Field Stain (Solution B), 250ml/Bottle	43587
8.15.043.0750	Atlas Field Stain Kit 3x250ml (250ml Fixing Reagent , 250ml Eosin Reagent, 250ml Methylene Blue Reagent).	43587
8.15.047.0250	Atlas Giemsa Stain, 250 ml/Bottle.	43587
8.15.059.0250	Atlas Haematoxylin Harris Stain , 250 ml/Bottle	43587
8.15.069.0250	Atlas Leishman Stain , 250 ml/Bottle.	43587
8.15.069.1000	Atlas Leishman Stain , 1000 ml/Bottle.	43587
8.15.074.0250	Atlas Lugol's Iodine, 250 ml/Bottle.	43587
8.15.078.0250	Atlas May Grunwald Stain, 250 ml/Bottle.	43587
8.15.105.0250	Atlas New Methylene Blue for Reticulocytes, 250 ml/Bottle.	43587
8.15.143.0250	Atlas Wright's Stain, 250 ml/Bottle.	43587
8.15.146.0100	Atlas Immersion oil, 100 Bottle/Box	43587

Declaration Ref No: DC21-0249

Date: 15.10.2021

Meets the essential requirements of In Vitro Diagnostic Medical Devices Directive 98/79/EC Annex I
 And
 EN ISO 13485 :2016 , EN 18113-1, -2,;2011, EN ISO 15223:2016
 EN ISO 14971:2019, EN ISO 23640:2015, ISO 2859/1:1999,
 EN ISO 13612:2002, EN ISO 13641:2002 , EN ISO 62366-1+A1:2020.

IVD Categorization	Directive 98/79, Other IVDs (Non-annex II, non-self-test).
Conformity Assesment Route	Directive 98/79/EC , Annex III.
Name , Address and Identification number of notified body	N/A

Date of issuance:	15. October.2021
Place	Atlas Medical GmbH
Signed by:	Amani AL-Habahbeh 
Position :	Regulatory Affairs Manager

Atlas Medical GmbH
 Ludwig - Erhard Ring 3
 15827 Blankenfelde - Mahlow
 Tel. (0049) 33708 - 355030

Declaration Ref No: DC22-0065

CE Declaration of Conformity

According to Annex III of the IVD Directive 98/79/EC

We,

Atlas Medical GmbH

Head office: Ludwig-Erhard-Ring 3
Blankenfelde-Mahlow, Germany.

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Email: info@atlas-medical.com

Manufacturing Site: Sahab Free Zone Area, P. O. Box 204, Amman 11512, Jordan.

Tel.: +962 6 4026468

Fax: +962 6 4022588

Email: info@atlas-medical.com

Declare our responsibility that the following product:

See Attached list


- Comply with all essential requirements (Annex I) of the IVD Directive 98/79/EC. This compliance has been properly documented and covers the items listed in Annex I of the IVD Directive.
- This product is produced under Atlas quality system (ISO13485:2016) issued by GMED:
Certificate N^o.: 36655 rev 1
Expiry Date: October 8th.2023
- Comply with the essential requirements of following standards (EN 18113-1, -2,-4:2011, EN ISO 15223:2016 , EN ISO 23640:2015, EN ISO 14971:2019, ISO 2859/1:1999, EN ISO 13612:2002, EN ISO 13641:2002.

And

Intended for In-Vitro Professional use only.

Manufacturer
Atlas Medical
Ludwig-Erhard-Ring 3
Blankenfelde-Mahlow , Germany.



Atlas Medical	Issue date	Date of review	Management approval 	MRXDO10F.10 08.02.2011
	May.2022	21.05.2022		

CE Declaration of Conformity

According to Annex III of the IVD Directive 98/79/EC

Item code	Product Description
8.00.01.0.0100	Atlas CRP Latex Kit with Buffer (100 Tests)
8.00.05.0.0100	Atlas RF Latex kit with Buffer(100 Tests)
8.00.11.0.0050	Atlas SLE Latex kit (50 Tests)
8.00.11.0.0100	Atlas SLE Latex kit (100 Tests)
8.00.12.0.0100	Atlas Staphylococcus Latex Kit (100 Tests)
8.00.17.0.0050	Atlas D-Dimer Latex Kit (50 Tests)
8.00.19.3.0100	Atlas TPHA Kit (100 Tests)
8.00.19.3.0200	Atlas TPHA Kit (200 Tests)
8.00.20.3.2500	Atlas VDRL Kit, 5ml+55ml buffer
8.04.38.0.0020	Atlas Fecal Occult Blood Test (FOB) Test Cassette , 20 Tests/Box
8.04.85.0.0050	Atlas Fecal Occult Blood Test (FOB) Test Strip, 50 Tests/Box
8.04.109.0.0020	Atlas Procalcitonin test (PCT) , 20 Tests/Box
8.16.78.0.0025	Atlas Calprotectin Test Cassette , 25 Tests/Box
8.04.45.0.0001	Atlas Troponin I Test Cassette, Bulk
8.04.45.0.0020	Atlas Troponin I Test Cassette , 20 Tests/Box.
8.04.45.0.0030	Atlas Troponin I Test Cassette , 30 Tests/Box.
8.04.46.0.0001	Atlas Myoglobin Test Cassette, Bulk
8.04.46.0.0020	Atlas Myoglobin Test Cassette , 20 Tests/Box.
8.04.46.0.0030	Atlas Myoglobin Test Cassette , 30 Tests/Box.
8.04.47.0.0001	Atlas CK-MB Test Cassette , Bulk.
8.04.47.0.0020	Atlas CK-MB Test Cassette , 20 Tests/Box.
8.04.47.0.0030	Atlas CK-MB Test Cassette , 30 Tests/Box.
8.04.48.0.0001	Atlas Cardiac Triple Tests Cassette (Troponin I, CK-MB, Myoglobin), Bulk.
8.04.48.0.0020	Atlas Cardiac Triple Tests Cassette (Troponin I, CK-MB, Myoglobin), 20 Tests/Box.
8.04.48.0.0030	Atlas Cardiac Triple Tests Cassette (Troponin I, CK-MB, Myoglobin), 30 Tests/Box.
8.14.19.1.0096	Helicobacter pylori Antigen ELISA, 96 Tests.
8.51.00.0.0096	25-OH VITAMIN D Elisa Kit, 96 Tests.
8.57.00.0.0096	Vitamin B12 Elisa Kit, 96 Tests

LA

Atlas Medical
Quality Diagnostic Products

GMED certifie que le système de management de la qualité développé par
GMED certifies that the quality management system developed by

ATLAS MEDICAL GmbH
Ludwig-Erhard-Ring 3
15827 Blankenfelde-Mahlow GERMANY

pour les activités
for the activities

Conception et développement, fabrication et vente de dispositifs médicaux de diagnostic in vitro .

Design and Development, Manufacturing and Sales of in vitro diagnostic medical devices.

réalisées sur le(s) site(s) de
performed on the location(s) of

Voir addendum

See addendum

est conforme aux exigences des normes internationales
complies with the requirements of the international standards

ISO 13485: 2016

Début de validité / Effective date October 9th, 2023 (included)

Valable jusqu'au / Expiry date : October 8th, 2026 (included)

Etabli le / Issued on : October 9th, 2023

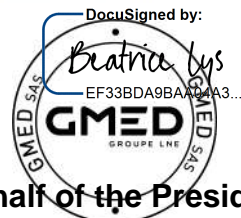


CERTIFICATION DE SYSTEMES DE MANAGEMENT
Accréditation n°4-0608
Liste des sites accrédités
et portée disponible sur
www.cofrac.fr

GMED N° 36655-2

Ce certificat est délivré selon les règles de certification GMED / This certificate is issued according to the rules of GMED certification

Renouvelle le certificat 36655-1



On behalf of the President
Béatrice LYS
Technical Director

Ce certificat couvre les activités et les sites suivants :
This certificate covers the following activities and sites:

French version :

Conception et développement, fabrication et vente de dispositifs médicaux de diagnostic *in vitro* à usage professionnel et/ ou d'autodiagnostic, dans les domaines du groupage sanguin, de la microbiologie, de la biochimie, de la toxicologie, de l'oncologie, de la cardiologie, de l'histologie, de l'endocrinologie et des maladies infectieuses, dans les techniques d'Agglutination/ ELISA/ Tests rapides/ Colorimétrie/ Disques antibiotiques.

English version:

Design and Development, Manufacturing and Sales of in vitro diagnostic medical devices for professional use and/or for self-testing, in the field of Immunohematology, Microbiology, Biochemistry, Toxicology, Oncology, Cardiology, Histology, Endocrinology Biosensors and Infectious diseases, in techniques of Agglutination/ ELISA/ Rapid tests/ Colorimetry/Antibiotic disks.

**ATLAS MEDICAL GmbH
Ludwig-Erhard-Ring 3
15827 Blankenfelde-Mahlow
GERMANY**

French version:

Siège social, responsable de la mise sur le marché

English version:

Headquarter, legal manufacturer

**Sahab Industrial Zone Area
King Abdullah II Industrial City
Amman 11512
JORDAN**


French version:

Conception, fabrication et contrôle final

English version:

Design, manufacture and final control

2 sites / 2 sites

DocuSigned by:
Beatrice Lys
FF33BDA8...AA04A3...


**On behalf of the President
Béatrice LYS
Technical Director**

Date: 05/Jan/2023

STATEMENT


We, Atlas Medical having a registered office at Ludwig-Erhard-Ring 3, 15827 Blankenfelde-Mahlow, Berlin, Germany assign SRL Sanmedico having a registered office at A. Corobceanu Street 7A, apt.9, Chisinau MD-2012, Moldova, as authorized representative in correspondence with the conditions of directive 98/79/EEC.

We declare that the company mentioned above is authorized to register, notify, renew or modify the registration of medical devices on the territory of the Republic of Moldova.

On Behalf of Manufacturer:

General Manager

Haya Amawi

Signature: 

Date: 05.01.2023

Atlas Medical GmbH
Ludwig - Erhard Ring 3
15827 Blankenfelde - Mahlow
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Middle East Site: P.O Box 204, King Abdullah II Industrial Estate, Amman, 11512, Jordan
Tel: +962 6 4026468

Blood Grouping Reagents:

Anti-A Monoclonal Reagent, Anti-B Monoclonal Reagent, Anti-AB Monoclonal Reagent, Anti-D IgG/IgM blend Reagent, & Their variants SLIDE AND TUBE TESTS

IVD For In-Vitro and professional use only

2°C  8°C Store at 2- 8°C

INTENDED USE

The blood grouping reagents are used to detect the presence or absence of A, B or Rhesus Antigens on the surface of human red blood cells based on hemagglutination using slide or tube test techniques in whole blood samples or anticoagulant blood samples collected in EDTA, citrate or heparin tubes.

INTRODUCTION & PRINCIPLES

Blood grouping reagents are prepared from In-Vitro culture supernatants of hybridized immunoglobulin-secreting mouse cell lines. The reagents are diluted with phosphate buffer containing sodium chloride, EDTA and bovine albumin to give reagents that are optimized for use in tube and slide procedures. **Anti-A monoclonal reagent is colored with acid blue (patent blue) dye, Anti-B monoclonal reagent is colored with acid yellow (tartrazine) dye, and Anti-AB monoclonal reagent is not colored.** The test procedure is based on hemagglutination principle, where red cells possessing the antigen agglutinate in the presence of the corresponding antibody indicating that the result is positive. The test is considered negative when no agglutination appears.

Anti-D IgG/IgM blend reagent is prepared from carefully blended human monoclonal IgM and IgG. Anti-D IgG/IgM blend reagent is suitable for slide and tube test procedures. The reagent will directly agglutinate Rh D positive cells, including majority of variants (but not D^{VI}) and a high proportion of weak D (Du) phenotypes. The reagent will agglutinate category D^{VI} and low grade weak D (D^{VI}) phenotypes by the indirect anti-globulin techniques.

Anti-D IgG/IgM blend reagent is diluted with a sodium chloride solution, sodium phosphate solution and bovine albumin (sodium caprylate free). Anti-D IgG/IgM blend reagent is not colored. The procedure is based on hemagglutination principle, where red cells' possessing the antigen agglutinates in the presence of the corresponding antibody in the reagent indicating that the result is positive. The test is considered negative when no agglutination appears.

MATERIALS

MATERIALS PROVIDED

Blood Grouping Reagents:

- Anti-A monoclonal reagent (10 ml/vial), Clone: (9113D10).
- Anti-B monoclonal reagent (10 ml/vial), Clone: (9621A8).
- Anti-AB monoclonal reagent (10ml/vial), Clone: (152D12+9113D10).
- Anti-D IgG/IgM Blend reagent (10 ml/vial), Clone: (P3X61 + P3X21223B10 + P3X290 + P3X35).

MATERIALS NEEDED BUT NOT PROVIDED

- Plastic test tube or glass.
- Isotonic saline solution (% 0.9) NaCl).
- Applicator sticks.
- Centrifuge (100-1200 (g) for tube test).
- Timer.
- Incubator
- Anti-Human Globulin Reagent (can be ordered from Atlas Medical).
- White or transparent glass slide.

PRECAUTIONS

- The reagents are intended for in vitro diagnostic use only.
- The test is for well trained professional healthy user not for lay user.
- These reagents are derived from animal and human sources, thus, appropriate care must be taken in the use and disposal of these reagents, as there are no known test methods that can guarantee absence of infectious agents.
- Do not use reagents if it is turbid or contain particles as this may indicate reagent deterioration or contamination.
- Protective clothing should be worn when handling the reagents.
- **The reagents contain (0.1-0.2%) Sodium Azide and 0.02% sodium arseniate which is toxic and can be absorbed through the skin. When drained, the drains should be thoroughly flushed with water.**
- The reagents should be used as supplied and in accordance to the procedure mentioned below. Don't use beyond expiration date.
- Avoid cross contamination of reagents or specimens.
- Visible signs of microbial growth in any reagent may indicate degradation and the use of such reagent should be discontinued.

- Don't use these reagents if the label is not available or damaged.
- Do not use dark glass slide.
- Don't use the kit if damaged or the glass vials are broken or leaking and discard the contents immediately.
- Test materials and samples should be discarded properly in a biohazard container.
- Wash hands and the test table top with water and soap once the testing is done.
- Hemolysed blood sample should not be used for testing.
- The test should be performed at room temperature in a well lit area with very good visibility.
- Failure to follow the procedure in this package insert may give false results or safety hazard.
- Close the vial tightly after each test.
- The reagent is considered toxic, so don't drink or eat beside it.
- If spillage of reagent occurs clean with disinfectant (disinfectant used could be irritable so handle with care).

STORAGE CONDITIONS

- The reagents should be stored refrigerated between 2 - 8°C.
- Never Freeze or expose to elevated temperature.
- The reagent is stable until the expiry date stated on the product label. Do not use the reagents past the expiry date.

REAGENT PREPARATION

- The reagents are intended for use as supplied, no prior preparation or dilution of the reagent is required.
- All reagents should be brought to room temperature before use.

SPECIMEN COLLECTION AND PREPARATION

- Blood collected with or without anticoagulant (EDTA, Heparin or Citrate) can be used for Antigen typing.

Note: Blood collected without anticoagulant should be tested immediately.

- The specimens should be tested as soon as possible after collection. If testing is delayed, the specimens should be stored at 2- 8 °C. Sample must be retained to room temperature prior to analysis. (Testing should be carried out within five days of collections).
- Insure that there is no sign of hemolysis.
- At the time of the test, centrifuge the blood sample at 1200 RCF for 3 minutes.
- Blood collection is to be done with great care.

PROCEDURES

A. DIRECT TUBE METHOD AT ROOM TEMPERATURE

1. Prepare a 5% suspension of red blood cells in isotonic solution.
2. Using the vial dropper, transfer a drop (40±10µl) of each reagent into a separate and appropriately marked tube.
3. Add 50 µl of red blood cell suspension prepared in step 1.
4. Shake to homogenize the mixture, then centrifuge at 500g for **1 minute**.
5. Gently shake the tube in such a way to detach the cell pellet and macroscopically observe for any possible agglutination.
6. Read the reaction immediately.
7. For Anti-D tube, if the reaction is weak or negative, shake the tubes and incubate at 37°C for **15 minutes**.
8. Wash the red blood cells twice with isotonic saline solution (NaCl 0.9%) and discard the last washing liquid.
9. Add one drop (50µl) of the AHG reagent into the tube. Mix and centrifuge at 120g for **1 minute**.
10. Gently shake the tube in such a way to detach the cell pellet and macroscopically observe for any possible agglutination.
11. Read the reaction immediately.

B. ANTIGLOBULIN INDIRECT METHOD for ANTI-D

1. After immediately centrifuging and reading as above, if the reaction is weak or negative, shake the tubes and incubate at 37°C for 15 minutes.
2. Wash the red blood cells twice with isotonic saline solution (NaCl 0.9%) and discard the last washing liquid.
3. Add one drop (40 µl ± 10 µl) of ANTI-HUMAN GLOBULIN to the tube. Mix and centrifuge at 120 (g) for **1 minute**.
4. Gently shake the tube in such a way to detach the cell pellet and macroscopically observe for any possible agglutination.
5. Read the reaction immediately.

C. DIRECT SLIDE METHOD AT ROOM TEMPERATURE

1. Bring reagents and samples to room temperature (18-25°C).
2. Using the wax pen divide the slide into appropriate numbers of divisions.
3. Using the provided dropper, place one drop (40 µl ± 10 µl) of each reagent onto its correspondent division on the slide.
4. Add 25µl of the precipitated cells next to each drop of reagents.
5. Mix the reagent and the cells using a clean stirring stick over an area with a diameter of approximately 20-40mm.
6. Incubate the slide at room temperature (18-25°C) without stirring for **30 seconds**.
7. Hold the slide and gently rock the slide for **3 minutes** and observe macroscopically for any agglutination.
8. Read the reaction immediately.

READING THE RESULT

POSITIVE: If Agglutination appears.

NEGATIVE: If no agglutination is observed.

Use the below table to determine the blood group:

Result of each reaction				ABO Group
Anti-A monoclonal reagent	Anti-B monoclonal reagent	Anti-AB monoclonal reagent	Anti-D IgG/IgM blend reagent	
+	-	+	+	A+
+	-	+	-	A-
-	+	+	+	B+
-	+	+	-	B-
+	+	+	+	AB+
+	+	+	-	AB-
-	-	-	+	O+
-	-	-	-	O-

STABILITY OF THE REACTIONS

- ABO Blood Grouping Tube tests should be read immediately following centrifugation.
- Slide tests should be interpreted within three minutes to avoid the possibility that a negative result may be incorrectly interpreted as positive due to drying of reagents.
- Delay in reading and interpreting results may result in weekly positive or falsely negative reactions. Slide tests should be interpreted at the end of the three minutes.

PROCEDURE LIMITATION

- False positive/ negative results may occur due to:
 - Contamination from test materials.
 - Improper storage, cells concentration, incubation time or temperature.
 - Improper or excessive centrifugation.
 - Deviation from the recommended technique.
 - Blood samples of weak A or B subgroups may give rise to false negative results or weak reactions when tested using slide test method. It is advisable to re-test weak subgroups using tube test method.
- Weaker reactions may be observed with stored blood than with fresh blood.
- ABO antigens are not fully developed at birth, weaker reactions may therefore occur with cord or neonatal red cells.
- ABO blood grouping interpretation on individuals greater than 6 months old should be confirmed by testing serum or plasma of the individual against group A and group B red cells (reverse grouping). If the results obtained with the serum do not correlate with the red cell test, further investigation is required.
- Return the kit to the agent if it does not function properly.
- Anti-D IgG/IgM blend Reagent tests conducted on particular weak-D phenotypes, while satisfactory, cannot ensure recognition of all weak variants, due to the variability of antigen patterns.

DIAGNOSTIC PERFORMANCE CHARACTERISTICS

The following tables compare the results in slide and tube techniques of 3 lots of Atlas Medical reagents and the results of a CE marked device.

Slide Technique				
Group A				
Positive with anti-A monoclonal reagent and anti-AB monoclonal reagent Negative with anti-B and Negative control				
CE marked device	Lot A	Lot B	Lot C	Compliance
232	232	232	232	100%
Tube Technique				
Group A				
Positive with anti-A monoclonal reagent and anti-AB monoclonal reagent Negative with anti-B and Negative control				
CE marked device	Lot A	Lot B	Lot C	Compliance
212	212	212	212	100%

Slide Technique				
Group B				
Positive with anti-B monoclonal reagent and anti-AB monoclonal reagent Negative with anti-A and Negative control				

CE marked device	Lot A	Lot B	Lot C	Compliance
61	61	61	61	100%
Tube Technique				
Group B				
Positive with anti-B monoclonal reagent and anti-AB monoclonal reagent Negative with anti-A and Negative control				
CE marked device	Lot A	Lot B	Lot C	Compliance
61	61	61	61	100%

Slide Technique				
Group O				
Negative with anti-A monoclonal reagent, Anti-B monoclonal reagent and anti-AB monoclonal reagent Negative with Negative control				
CE marked device	Lot A	Lot B	Lot C	Compliance
241	241	241	241	100%
Tube Technique				
Group O				
Negative with anti-A monoclonal reagent, Anti-B monoclonal reagent and anti-AB monoclonal reagent Negative with Negative control				
CE marked device	Lot A	Lot B	Lot C	Compliance
243	243	243	243	100%

Slide Technique				
Group AB				
Positive with anti-A monoclonal reagent, Anti-B monoclonal reagent and anti-AB monoclonal reagent Negative with Negative control				
CE marked device	Lot A	Lot B	Lot C	Compliance
33	33	33	33	100%
Tube Technique				
Group AB				
Positive with anti-A monoclonal reagent, Anti-B monoclonal reagent and anti-AB monoclonal reagent Negative with Negative control				
CE marked device	Lot A	Lot B	Lot C	Compliance
24	24	24	24	100%

No inversion in diagnosis has been shown: from a qualitative point of view we have observed 100% compliance in direct group testing in slide and tube techniques for determination of A, B, AB and O groups for the three lots of Atlas Medical.

QUALITY CONTROL

The reactivity of all blood grouping reagents should be confirmed by testing known positive and negative red blood cells on each day of use. To confirm the specificity and sensitivity, Blood grouping reagents should be tested with antigen-positive and antigen-negative red blood cells.

REFERENCES

1. BCSH Blood Transfusion Task Force. Guidelines for microplate techniques in liquid-phase blood grouping and antibody screening. Clin. Lab. Haem 1990; 12, 437-460.
2. Issitt P. D. Applied Blood Group Serology, 3rd ed. Miami: Montgomery Scientific, 1985.
3. Kholer G., Milstein C. Continuous culture of fused cells secreting antibody of predefined specificity, 256, 495-497, 1975
4. Messeter L. et. al. Mouse monoclonal antibodies with anti-A, anti-B and anti-A,B specificities, some superior to human polyclonal ABO reagents, Vox Sang 46, 185-194, 1984
5. Race R.R. and Sanger R. Blood groups in man, 6th ed., Oxford: Blackwell Scientific, 1975.
6. Voak D. ET. al., Monoclonal anti-A and anti-B development as cost effective reagents. Med. Lab. Sci 39, 109-122. 1982.

7. Standards for Blood Banks and Transfusion Service. 11th Ed., Washington D.C., AABB 1984:25.

8. Widmann F.K.ed Technical Manual, 9th Ed., Washington D.C.: AABB 1985:9.



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PP1861A01
Rev.L (19.02.2022)



LIST OF VARIANTS:

Product Code	Product Name
8.02.00.0.0010	Anti-A Monoclonal Reagent (Titer: 1 /512), 10ml/vial, 1 vial/ Carton Box
8.02.00.1.0100	Anti-A Monoclonal Reagent (Titer: 1 /512), 10ml/vial, 10 vials / Plastic Pack
8.02.00.1.0180	Anti-A Monoclonal Reagent (Titer: 1 /512), 10ml/vial, 18 vials / Carton Box
8.02.01.0.0010	Anti-B Monoclonal Reagent (Titer: 1 /512), 10ml/vial, / Carton Box
8.02.01.1.0100	Anti-B Monoclonal Reagent (Titer: 1 /512), 10ml/vial, 10 vials / Plastic Pack
8.02.01.1.0180	Anti-B Monoclonal Reagent (Titer: 1 /512), 10ml/vial, 18 vials / Carton Box
8.02.02.0.0010	Anti-AB Monoclonal Reagent (Titer: 1 /512), 10ml/vial, 1 vial/ Carton Box
8.02.02.1.0100	Anti-AB Monoclonal Reagent (Titer: 1 /512), 10ml/vial, 10 vials/Plastic Pack
8.02.02.1.0180	Anti-AB Monoclonal Reagent (Titer: 1 /512), 10ml/vial, 18 vials/Plastic Pack
8.02.03.0.0010	Anti-D IgG/IgM Blend Reagent (Titer: 1 /128), 10ml/vial, 1 vial/ Carton Box
8.02.03.1.0100	Anti-D IgG/IgM Blend Reagent (Titer: 1 /128), 10ml/vial, 10 vials / Plastic Pack
8.02.03.1.0180	Anti-D IgG/IgM Blend Reagent (Titer: 1 /128), 10ml/vial, 18 vials / Carton Box
8.02.04.0.0010	Anti-A Monoclonal Reagent (Titer: 1 /256), 10ml/vial, 1 Vial/ Carton Box
8.02.04.0.0100	Anti-A Monoclonal Reagent (Titer: 1 /256), 10ml/vial, 10 vials / Plastic Pack
8.02.05.0.0010	Anti-B Monoclonal Reagent (Titer: 1 /256), 10ml/vial, 1vial/ Carton Box
8.02.05.0.0100	Anti-B Monoclonal Reagent (Titer: 1 /256), 10ml/vial, 10 vials /Plastic Pack
8.02.05.6.0030	ABO Set (Anti-A (1/256), Anti-B (1 /256), Anti-D (1/64)), 3x10ml / plastic Pack
8.02.05.7.0020	ABO Set: Anti-A (1/256), Anti-B (1 /256), 2x10ml /Plastic Pack
8.02.06.0.0010	Anti-AB Monoclonal Reagent (Titer: 1 /256), 10ml/vial, 1vial/ Carton Box
8.02.06.1.0100	Anti-AB Monoclonal Reagent (Titer: 1 /256), 10ml/vial, 10 vials /Plastic Pack
8.02.06.1.0180	Anti-AB Monoclonal Reagent (Titer: 1 /256), 10ml/vial, 18 vials / Carton Box
8.02.07.0.0010	Anti-D IgG/IgM Blend Reagent (Titer: 1 /64), 10ml/vial, 1Vial/ Carton Box
8.02.07.1.0100	Anti-D IgG/IgM Blend Reagent (Titer: 1 /64), 10ml/vial, 10 vials / Plastic Pack
8.02.47.0.0030	ABO Set (Anti-A (1 /512), Anti-B (1 /512), Anti-D (1 /128)), 3x10ml/Plastic Pack
8.02.47.1.0030	ABO Set (Anti-A (1 /256), Anti-B (1 /256), Anti-D (1 /64)), 3x10ml /Carton Box.
8.02.47.3.0030	ABO Set (Anti-A (1 /256), Anti-B (1 /256), Anti-D (1 /64)), 3x10ml /Plastic Pack
8.02.47.5.0030	ABO Set (Anti-A (1 /256), Anti-B (1 /256), Anti-D (1 /128)), 3x10ml/Plastic Pack
8.02.49.0.0040	ABO Set (Anti-A (1 /256), Anti-B (1 /256), Anti-AB (1 /256), Anti-D (1 /64)), 4x10ml/Plastic Pack
8.02.49.2.0040	ABO Set (Anti-A (1 /256), Anti-B (1 /256), Anti-AB (1 /256), Anti-D (1 /128)), 4 x 10ml, 4 vials/Plastic Pack
8.02.53.0.0040	ABO Set (Anti-A (1 /512), Anti-B (1 /512), Anti-AB (1 /512) Anti-D (1 /128)), 4x10ml/Plastic Pack
8.02.53.1.0040	ABO Set (Anti-A (1 /512), Anti-B (1 /512), Anti-AB (1 /512) Anti-D (1 /128)), 4x10ml, 4vials/Plastic Pack
8.02.70.0.0010	Anti-A monoclonal reagent , Titer (1/1024), 10 ml/vial, 1Vial/ Carton Box
8.02.71.0.0010	Anti-B Monoclonal reagent (Titer: 1 /1024) , 10 ml/vial ,1Vial/ Carton Box
8.02.72.0.0010	Anti-AB Monoclonal reagent (Titer: 1 /1024) , 10 ml/vial , 1Vial/ Carton Box
8.02.85.0.0010	Anti-D IgG/IgM Blend reagent (Titer 1 /256), 10ml/vial, 1Vial/ Carton Box

	Catalogue Number		Temperature limit
	In Vitro diagnostic medical device		Caution
	Contains sufficient for <n> tests and Relative size		Consult instructions for use (IFU)
	Batch code		Manufacturer
	Fragile, handle with care		Use-by date
	Manufacturer fax number		Do not use if package is damaged
	Manufacturer telephone number		Date of Manufacture
	Keep away from sunlight		Keep dry

GRAM STAIN PACK

IVD For *in-vitro* diagnostic and professional use only



Store at Room Temperature

INTENDED USE

Gram Stain used for differentiate between gram positive and gram-negative bacteria.

INTRODUCTION

Gram staining is used to differentiate bacterial species into two large groups (Gram-positive and Gram-negative) based on the physical properties of their cell walls.

PRINCIPLE

Gram-positive bacteria have a thick mesh-like cell wall made of peptidoglycan (50-90% of cell wall), which stains Blue while gram-negative bacteria have a thinner layer (10% of cell wall), which stains pink. Gram-negative bacteria also have an additional outer membrane which contains lipids, and is separated from the cell wall by the periplasmic space. There are four basic steps of the Gram stain, which include applying a primary stain (crystal violet) to a heat-fixed smear of a bacterial culture, followed by the addition of a trapping agent (Gram's iodine), rapid decolorization with alcohol or acetone, and *counterstaining* with safranin or basic fuchsin.

Crystal violet (CV) dissociates in aqueous solutions into CV⁺ and chloride (Cl⁻) ions. These ions penetrate through the cell wall and cell membrane of both gram-positive and gram-negative cells. The CV⁺ ion interacts with negatively charged components of bacterial cells and stains the cells Blue.

Iodine (I⁻ or I₃⁻) interacts with CV⁺ and forms large complexes of crystal violet and iodine (CV-I) within the inner and outer layers of the cell. Iodine is often referred to as a mordant, but is a trapping agent that prevents the removal of the CV-I complex and therefore color from the cell.

When a decolorizer such as alcohol or acetone is added, it interacts with the lipids of the cell membrane. A gram-negative cell will lose its outer membrane and the lipopolysaccharide layer is left exposed. The

CV-I complexes are washed from the gram-negative cell along with the outer membrane. In contrast, a gram-positive cell becomes dehydrated from an ethanol treatment. The large CV-I complexes become trapped within the gram-positive cell due to the multilayered nature of its peptidoglycan. The decolorization step is critical and must be timed correctly; the crystal violet stain will be removed from both gram-positive and negative cells if the decolorizing agent is left on too long (a matter of seconds).

After decolorization, the gram-positive cell remains Blue. and the gram-negative cell loses its Blue. color. Counterstain, which is usually positively charged safranin or basic fuchsin, is applied last to give decolorized gram-negative bacteria a pink or red color.

MATERIALS

MATERIALS PROVIDED

- Crystal Violet.
- Gram Iodine.
- Gram Decolouriser.
- Counterstain – Safranin O.

Note: This package insert is also used for individually packed reagent.

Storage and stability

- Store at room temperature.
- Stain Solution is stable up to the printed expiry date.
- Keep the bottles tightly closed to prevent air oxidation.

Precautions

- The reagent may cause eye, skin and respiratory tract irritation; so protective clothing should be worn when handling this reagent.
- The reagent is intended for in vitro diagnostic use only.
- Do not use this reagent if the label is not available or damaged.
- Test materials and samples should be discarded properly in biohazards container.
- This reagent is considered toxic, so do not drink or eat beside it.
- Wash hands and test table top with water and soap once the testing is done.

PROCEDURE


















1. immerse the heat fixed smears with Crystal Violet and allow to stain for up to 1 minute.
2. Wash with tap water.
3. Flood the smear with Gram Iodine for 2 minutes.
4. Wash with tap water.
5. Decolorize the smear for few second only.
6. Wash thoroughly with tap water.
7. Counterstain with Safranin O for up to 2 minutes.
8. Wash and allow to dry.
9. Examine under microscope using oil immersion objective

RESULTS

- Gram positive organisms (Blue).
- Gram negative organisms (Red).

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Website: www.atlas-medical.com

PPI2112A01
Rev B (08.10.2020)

	Catalogue Number		Temperature limit
	<i>In Vitro</i> diagnostic medical device		Caution
	Contains sufficient for <n> tests and Relative size		Consult instructions for use (IFU)
	Batch code		Manufacturer
	Fragile, handle with care		Use-by date
	Manufacturer fax number		Do not use if package is damaged
	Manufacturer telephone number		Date of Manufacture
	Keep away from sunlight		Keep dry
	Flammable		



ATLAS SLE LATEX TEST

A latex agglutination slide test for the qualitative and semi-quantitative detection of DNP antibodies associated with Systemic Lupus Erythematosus (SLE) in human serum

IVD For In-Vitro diagnostic and professional use only

 Store at 2°-8°C

INTENDED USE

The SLE TEST is intended to be used as an aid in the diagnosis of Systemic Lupus Erythematosus (SLE) through the detection and quantitation of serum antinucleoprotein factors associated with SLE..

INTRODUCTION AND PRINCIPLE

The detection of antinuclear antibodies by laboratory methods include immunofluorescence, LE cell test and agglutination of coated particles. The antibodies that are believed to be most characteristic of SLE are those that are directed against deoxyribonucleoprotein (DNP). These antibodies are believed to cause the formation of the LE cell in vitro, with this unusual event occurring in 75-80% of those patients diagnosed as having SLE. It is not necessary to have a positive LE cell test for the diagnosis of SLE as this test had been found negative in certain individuals having symptoms suggestive for SLE. In these individuals, antinuclear antibodies may be demonstrated by methods other than the LE cell test.

The principle of the SLE TEST is based on the agglutination reaction between latex particles coated with DNP being brought into contact with a serum, which contains antinuclear antibodies. Agglutination indicates a positive reaction. The reaction time for this occurrence is within one minute.

MATERIALS

MATERIALS PROVIDED

- SLE Latex Reagent: polystyrene latex particles coated with DNP extracted from fetal calf thymus. Sodium azide (0.1%) is used as preservative. Shake well prior to use.
- SLE Positive Control: Human serum that has been diluted and stabilized with buffers and contains sodium azide (0.1%) as a preservative.
- SLE Negative Control: Human serum that has been diluted and stabilized with buffers and contains sodium azide (0.1%) as a preservative.
- Disposable stirring sticks.
- Glass slide.

MATERIALS NEEDED BUT NOT PROVIDED

- Timer.
- Micropipette.
- Physiological saline (0.9%NaCl).
- Test tubes 12x75mm.
- Serological pipettes (1ml delivery).
- Lab rotator (optional).

PRECAUTIONS

- For In Vitro Diagnostic Use Only.
- Even though the control sera supplied in the SLE TEST Kit have been tested by an FDA approved method for the presence of Hepatitis B Surface Antigen (HBsAg) and HTLV-III antibodies and found to be non-reactive, all human serum products and patient specimens should be considered potentially hazardous and handled in the same manner as an infectious agent.
- The preservative sodium azide may react with metal plumbing to form explosive metal oxides.
- In disposal, flush with a large volume of water to prevent metal azide build up.

STORAGE & STABILITY

- When not in use, store reagent and controls at 2-8°C.
- DO NOT FREEZE.
- Prior to use, allow reagents and controls to warm up to room temperature.

- Expiration date is specified on the kit label and on each vial. Biological indication of product instability is positive and negative controls.

SPECIMEN COLLECTION

- The test should be performed on serum.
- The test sera and controls should not be heat inactivated.
- Fresh specimens (less than 24 hours) should be used in performing the test.
- If testing is delayed, specimens should be refrigerated (or frozen where applicable).
- Bacterial contamination may cause false positive agglutination.

PROCEDURES

A. Method I (Qualitative)

1. Bring all reagents and serum samples to room temperature.
2. Positive and Negative Controls should be tested with each series of test sera. Using micropipette, place 0.040ml of test serum on one circle of the test slide. Use separate pipette tip for each test serum.
3. Important: The SLE Latex Reagent must be shaken vigorously for 30 seconds prior to using on each day's testing. This is to insure that there is no aggregation of the latex particles which may occur upon standing. Do not use a vortex mixer.
4. Deliver one drop of SLE Latex to each circle that contains specimen on the slide. Spread the resulting mixture by using the plastic stick provided. Do not use the same plastic stick to mix each test serum or control as this will cause cross-contamination.
5. Gently tilt and rotate slide by hand for one minute (rotator can be used).
6. Observe for macroscopic clumping using the indirect oblique light source. The reaction of the test serum is compared to the SLE positive and negative control sera.
7. Observe for agglutination no longer than one minute.

* Sera that are positive in the screening test should be retested in the titration test (semi-quantitative test) to provide verification for borderline interpretations.

B. Method II (Semi-Quantitative)

1. For each test serum to be titrated, label 6 test tubes (12x75 mm).
2. To each tube add 0.2 ml physiological saline.
3. To Tube No.1 add 0.2 ml of undiluted test serum.
4. Serially make two-fold dilutions by mixing contents of tube No.1 with a pipette and transferring 0.2 ml to tube No.2. Repeat serial transfers for each tube. For the 6 tubes, the dilutions range from 1:2 to 1:64. If required, additional serum dilutions can be added.
5. Repeat Steps 3 to 7 as given in Method I (Qualitative).

RESULTS:

1. Positive Result:

Presence of agglutination within 1 minute.

2. Negative Result:

Smooth milky suspension within 1 minute.

LIMITATION

Those patients with scleroderma, rheumatoid arthritis, dermatomyositis, and a variety of connective tissue diseases may show reactivity when their serum is tested with the SLE TEST latex. In recent studies, it has been reported that many widely used drugs such as hydralazine, isoniazid, procainamide and a number of anticonvulsant drugs can induce a systemic lupus erythmatosis (SLE) syndrome.

BIBLIOGRAPHY

1. Christian C.L., R. Mendez-Bryan, and D.L. Larson, 1958. Proc. Soc. Exptl. Biol. Med. 98, 820-823.
2. Friou, G.J., S.C. Finch, and K.D. Detre, 1958. J. Immunol. 80, 324-329.
3. Hargraves, M.M., H. Richmond, and R. Morton, 1948. Proc. Mayo Clin. 23, 25-28.
4. Holman, H.R., and H.G. Kunkel, 1957. Science 126,163.

5. Miescher, P.A., and R. Strassel, 1957. Vox. Sang, 2, 283-287.
6. Miescher, P.A., N. Rothfield, and A. Miescher, 1966. Lupus Erythematosus, E.L. Dubois, Ed., Blakiston Co., N.Y.
7. Rothfield, N.F., J.J. Phythyon, C. McEwen, and P. Miescher, 1961. Arthritis Rheum. 4, 223-229.



ATLAS Medical

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PPI040A01

Rev C (24.10.2015)

REF	Catalogue Number		Store at
IVD	For In-Vitro Diagnostic use		Caution
	Number of tests in the pack		Read product insert before use
LOT	Lot (batch) number		Manufacturer
	Fragile, handle with care		Expiry date
	Manufacturer fax number		Do not use if package is damaged
	Manufacturer telephone number		

E.A.R.-CERTIFICATE

(ART 10.3 of the Directive 98/79/EC on In Vitro Diagnostic)

REF. NO. : RP 2901-2021

ORDER NO. : DK 2491-2021

DATE: 11/01/2022

MANUFACTURER:

EKVITESTLAB LLC
Velyka Vasytkivska street, 114
03150, Kyiv, Ukraine

FACILITIES:

EKVITESTLAB LLC
Peremohy Avenue, 60/2
03057, Kyiv, Ukraine


**PRODUCT
CATEGORIES:**

Please See Annex A - List of Devices (13 Devices, 2 Pages)

MODELS:

Please See Annex A - List of Devices (13 Devices, 2 Pages)

The European Authorized Representative Center Obelis s.a. declares that the aforementioned manufacturer has fulfilled the essential requirement of appointing a European Authorized Representative in accordance with article 10.3 of the Directive 98/79/EC and to the terms and conditions set out in the agreement entered into force on 1st May 2021.*



G. ELKAYAM
C.E.O.

Obelis s.a. - O.E.A.R.C.

Registered Address :
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Mr. G. Elkayam CEO

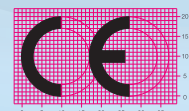
Obelis sa



Obelis European Authorized Representative Center is a member of the European Association of Authorized Representatives (E.A.A.R.), ISO 9001 : 2015 and ISO 13485 : 2016 certified in accordance to the profession of a European Authorized Representative.

* This is not a CE mark and is only provided as a template for informational purposes.

*This certificate is not a confirmation of product notification nor an approval to place products on the market.
**This certificate will become void automatically upon termination of the EAR agreement.



ANNEX to IVDD EAR Certificate

Order No.: DK 2491-2021

Reference No.: RP 2901-2021

Manufacturer: Ekvitestlab LLC

Country: Ukraine

#	EMDN	Generic device name (including BASIC UDI)	Commercial Name of device	Intended use	Class
1	52133	EQUI Ascaris lumbricoides IgG	EI-601	ELISA kit for the qualitative detection of IgG antibodies to Ascaris lumbricoides	Class I (Others)
2	63005	EQUI Opisthorchis felineus IgG	EI-602	ELISA kit for the qualitative detection of IgG antibodies to Opisthorchis felineus	Class I (Others)
3	52418	EQUI Toxocara canis IgG	EI-603	ELISA kit for the qualitative detection of IgG antibodies to Toxocara canis	Class I (Others)
4	52464	EQUI anti-Trichinella spiralis	EI-605	ELISA kit for the qualitative detection of antibodies to Trichinella spiralis	Class I (Others)
5	52464	EQUI anti-Trichinella spiralis	EI-605	ELISA kit for the qualitative detection of antibodies to Trichinella spiralis	Class I (Others)
6	62915	EQUI anti-Lamblia	EI-606	ELISA kit for the qualitative detection of antibodies to Giardia lamblia (intestinalis)	Class I (Others)
7	48281	EQUI HAV IgM	EI-031	ELISA kit for the qualitative detection of IgM antibodies to hepatitis A virus	Class I (Others)
8	51021	EQUI anti- Helicobacter	EI-501	ELISA kit for the qualitative detection of total antibodies to Helicobacter pylori	Class I (Others)
9	51008	EQUI Helicobacter IgG	EI-502	ELISA kit for the qualitative and semiquantitative detection of IgG antibodies to CagA protein of Helicobacter pylori	Class I (Others)
10	51012	EQUI Helicobacter	EI-504	ELISA kit for the qualitative detection of IgM	Class I (Others)

		IgM		antibodies to CagA protein of <i>Helicobacter pylori</i>	
11	64800	EQUI SARS-CoV-2 IgM swift	EI-165	ELISA kit for the qualitative detection of IgM antibodies to nucleoprotein and spike antigens of SARS-CoV-2 virus	Class I (Others)
12	64830	EQUI SARS-CoV-2 IgA swift	EI-166	ELISA kit for the qualitative detection of IgA antibodies to nucleoprotein and spike antigens of SARS-CoV-2 virus	Class I (Others)
13	64824	EQUI SARS-CoV-2 IgG swift	EI-167	ELISA kit for the qualitative detection of IgG antibodies to nucleoprotein and spike antigens of SARS-CoV-2 virus	Class I (Others)

Date: 11 January 2022

CEO Of Obelis

Gideon Elkayam

d (Jan 14, 2022 12:31 GMT+3)

G. ELKAYAM
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Declaration of Conformity

According to annex III of the Council Directive 98/79/EC on in vitro diagnostic medical device
We,

EKVITESTLAB LLC

Velyka Vasylkivska St. 114, Kyiv, Ukraine, 03150, tel. 0(800)31-89-87; +38 (044)334-89-87

e-mail: info@equitest.com.ua, web-site: www.equitest.com.ua

Declare under our sole responsibility that the following in vitro diagnostic medical devices
other than those covered by annex II and devices for performance evaluation

EQUI *Ascaris lumbricoides* IgG - ELISA kit for the qualitative detection of IgG antibodies to *Ascaris lumbricoides*, REF EI-601

Meet the provisions of the Council Directive 98/79/EC concerning medical devices which
apply to them.

Undersigned declares to fulfill the obligations imposed by Annex III section 2 to 5:

- availability of the technical documentation set in Annex III (section 3), allowing the assessment of conformity of the product with the requirements of the Directive.
- the manufacturer shall take necessary measures to ensure that the manufacturing process follows the principles of quality assurance as appropriate for the products manufactured (Annex III section 4).
- the manufacturer shall institute and keep up to date a systematic procedure to review experience gained from devices in the post-production phase and to implement appropriate means to apply any necessary corrective actions (Annex III section 5).

Conformity assessment was performed according to Article 9 (7) and Annex III, section 3.

Our current Quality System is formatted to international standards:

- **ISO 13485:2016 «Medical devices — Quality management systems — Requirements for regulatory purposes»**

Corporate Contact Information

EKVITESTLAB LLC

Velyka Vasylkivska St. 114, Kyiv, Ukraine, 03150

tel. 0(800)31-89-87; +38 (044)334-89-87

e-mail: info@equitest.com.ua

RESPONSIBLE PERSON'S name: Anna Yurchuk

Position: Director

SIGNATURE :



Date : October 25, 2021

Stamp



European Authorized Representative:

Registered Address:

Obelis s.a.

Bd. Général Wahis 53

B-1030 Brussels, Belgium

Phone: 32.2.732.59.54

Fax: 32.2.732.60.03

E-mail: mail@obelis.net

Representative: Mr. Gideon ELKAYAM (CEO)



Declaration of Conformity

According to annex III of the Council Directive 98/79/EC on in vitro diagnostic medical device
We,

EKVITESTLAB LLC

Velyka Vasylkivska St. 114, Kyiv, Ukraine, 03150, tel. 0(800)31-89-87; +38 (044)334-89-87
e-mail: info@equitest.com.ua, web-site: www.equitest.com.ua

Declare under our sole responsibility that the following in vitro diagnostic medical devices
other than those covered by annex II and devices for performance evaluation

EQUI Toxocara canis IgG - ELISA kit for the qualitative detection of IgG antibodies to Toxocara canis, REF EI-603

Meet the provisions of the Council Directive 98/79/EC concerning medical devices which
apply to them.

Undersigned declares to fulfill the obligations imposed by Annex III section 2 to 5:

- availability of the technical documentation set in Annex III (section 3), allowing the assessment of conformity of the product with the requirements of the Directive.
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Declare under our sole responsibility that the following in vitro diagnostic medical devices
other than those covered by annex II and devices for performance evaluation

EQUI anti-Lambliia - ELISA kit for the qualitative detection of antibodies to *Giardia lamblia (intestinalis)*, REF EI-606

Meet the provisions of the Council Directive 98/79/EC concerning medical devices which
apply to them.

Undersigned declares to fulfill the obligations imposed by Annex III section 2 to 5:

- availability of the technical documentation set in Annex III (section 3), allowing the assessment of conformity of the product with the requirements of the Directive.
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Position: Director

SIGNATURE :



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Representative: Mr. Gideon ELKAYAM (CEO)

CERTIFICATE

MANAGEMENT SYSTEM CERTIFICATION BODY
«CONFORMITY ASSESSMENT BODY «PROMSTANDART», LLC
certifies that the enterprise

EKVITESTLAB
Limited Liability Company

registration code 38745936

legal address:

Ukraine, 03150, Kyiv, 114 Velyka Vasylkivska street,

manufacturer's address:

Ukraine, 04212, Kyiv, 60/2 Peremohy Avenue



has established and applies quality management system for
development, production, storage and sale
of ELISA kits for in vitro diagnostic

Audit, № report 2020/015-20.2.1
confirmed that the requirements

ISO 13485:2016

**«Medical devices — Quality management systems —
Requirements for regulatory purposes»**

are performed.

The control of conformity of the certified quality management system to the requirements of the specified standard is carried out by means of supervisory audit, the periodicity and procedures of which are regulated by the program.

Certificate registration number № UA.QMS.00014-21
Registered 06 April 2021
Valid until 05 April 2024



80156
DSTU EN ISO/IEC 17021-1

Director of Certification Body
«CAB «PROMSTANDART», LLC



Sergiy Dubrovskiy

210107

The validity of certificate can be verified by telephone: (056) 742-82-39
or on website of «CAB «PROMSTANDART», LLC: prom-standart.com.ua

ПРОМСТАНДАРТ PROMSTANDART PROMSTANDART PROMSTANDART PROMSTANDART PROMSTANDART PROMSTANDART PROMSTANDART



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STATEMENT

We, EKVITESTLAB LLC, having a registered office at Velyka Vasylkivska street 114, Kyiv, 03150, Ukraine assign SRL SANMEDICO having a registered office at A. Corobceanu street 7A, apt. 9, Chişinău MD-2012, Moldova, as authorized representative in correspondence with the conditions of directive 98/79/EEC.

We declare that the company mentioned above is authorized to register, notify, renew or modify the registration of medical devices on the territory of the Republic of Moldova.

Date: 03 January 2023

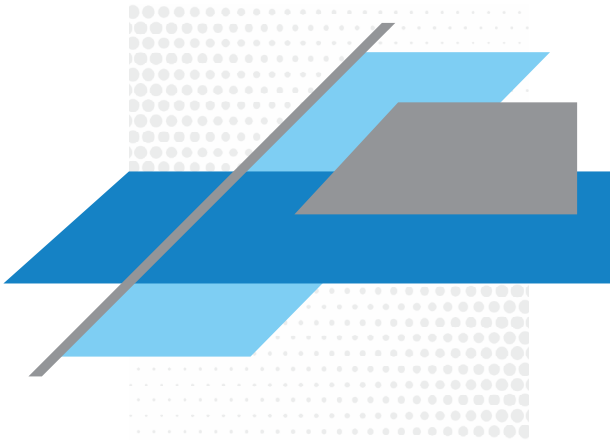
Signature: _____
Director, Anna Yurchuk



anti-Lamblia

ELISA kit for the qualitative detection of antibodies
to *Giardia lamblia* (*intestinalis*)

Instructions for use



IVD

REF
EI-606

Σ 96
tests

CE

EQUI anti-Lamblia

ELISA kit for the qualitative detection of antibodies to
до *Giardia lamblia (intestinalis)*

1. INTENDED USE

The «EQUI anti-Lamblia» is ELISA kit intended to qualitatively detect antibodies to *Giardia lamblia (intestinalis)* in human serum or plasma by enzyme-linked immunosorbent assay (ELISA) to diagnose giardiasis. The testing procedure is designed for both manual arrangement with automatic pipettes and standard equipment, and for automated «open» immunoassay analysers.

Target group: children, pet owners, citizens of rural areas, summer house owners.

Usage: ELISA kit is used in clinical diagnostic laboratories and other institutions engaged in *in vitro* diagnostics.

2. CLINICAL SIGNIFICANCE

Giardiasis is considered one of the most common parasitic diseases of the small intestine in the world. This infection is a major cause of acute and chronic diarrhea, especially in children. The etiological agent of giardiasis is *Giardia lamblia*, which is also called *Giardia intestinalis* or *Giardia duodenalis*.

Giardia lamblia are unicellular flagellate protozoa that parasitize in the intestines of humans and some other mammals. During the life cycle of these parasites, two stages alternate: cysts, resistant to external conditions, and a vegetative form - trophozoites. Infection occurs when cysts enter the human gastrointestinal tract. After experiencing the effects of gastric acid, cysts in the duodenum turn into trophozoites, which parasitize in the upper parts of the small intestine. They absorb nutrients from the intestinal lumen, block parietal digestion and disrupt the motility of the intestine.

Humans get infected via fecal-oral routes through cyst-contaminated food, water, unwashed hands, and so on. *Giardia* can also be transmitted to humans from infected cats, dogs, and livestock. Giardiasis is especially common in regions with poor sanitation. In addition, human-to-human transmission is common in preschools.

In many cases, the invasion of *Giardia* occurs without clinical manifestations. In other cases, the first symptoms of giardiasis appear in 1-3 weeks after infection. They are most often manifested by spasms, bloating, nausea and diarrhea, which leads to dehydration and weight loss. The acute form of the disease can last up to two weeks and end in recovery without additional treatment or become chronic. Chronic giardiasis develops when the duration of the invasion is longer than 2 month and the exacerbation of clinical manifestations (diarrhea) is cyclical. *Giardia lamblia* parasitism can lead to malabsorption syndrome, which disrupts the absorption of carbohydrates and fats, as well as the metabolism of vitamins B12, A and C.

Immune response to invasion and non-immune factors are important to control the development of the disease and the severity of clinical manifestations. Both

humoral and cellular immunity play the part in the eradication of the pathogen, the role of which is still subjected to scientific research. In addition, partial resistance to re-infection is formed due to protective mechanisms of the body.

Typically, to diagnose giardiasis, the duodenal contents and feces are examined for trophozoites and cysts of giardiasis. In case of the chronic course of the disease, cysts get excreted periodically, and, considering this, the additional tests should be performed regularly for several weeks. Another method of diagnosing giardiasis is to detect *Giardia lamblia* antigens in the feces. However, serodiagnosis with the detection of specific antibodies to *Giardia* antigens is an important step in assessing the immune response of patients. Detection of specific IgM antibodies suggests an acute stage of giardiasis. However, the detection of specific IgG and IgA antibodies should be interpreted with caution: in some regions they persist for a long time after infection, while in others their level decreases after eradication of the pathogen.

3. ANALYSIS PRINCIPLE

The procedure of testing for *Giardia lamblia* specific antibodies in «EQUI anti-Lamblia» ELISA kit is based on «indirect» solid-phase ELISA with a two-stage incubation. Recombinant *Giardia lamblia* antigens are entrapped in the wells. During the first step of incubation of the test samples in the wells of the ELISA plate, *Giardia lamblia*-specific antibodies, if present in the samples, bind to the solid phase antigens. The wells are washed to remove unbound antibodies and have only specific antigen-antibody complexes left. Then, a conjugate of anti-species (anti-IgG and anti-IgA) monoclonal antibodies with horseradish peroxidase is added, which binds to solid-phase immune complexes. Unbound components are removed by washing. Antigen-antibody complexes are detected by adding a solution of chromogen 3,3',5,5'-tetramethylbenzidine (TMB) with hydrogen peroxide. After 30-minute incubation, the reaction is stopped by adding the stop solution. The optical density (OD) in the wells is determined using a spectrophotometer at 450/620-695 nm. The intensity of the yellow colour is proportional to the level of antibodies in the sample.

4. MATERIALS AND EQUIPMENT

4.1. Contents of the ELISA kit

STRIPS	1 x 96 wells	Microplate Each plate well is coated with <i>Giardia lamblia</i> purified antigens. The wells are detachable. After the first opening, store unused strips in the package at 2-8 °C for a maximum of 6 months
CONTROL +	1 x 0,35 ml	Positive control Conjugated specific monoclonal antibody solution with preservative (pink). Store at 2-8 °C
CONTROL -	1 x 1,2 ml	Negative control Negative human serum with a preservative (yellow). Store at 2-8 °C

DIL SAMPLE	1 x 11 ml	Serum dilution solution Buffer solution with a milk extract, a detergent and a preservative (purple). Store at 2-8 °C
SOLN CONJ	1 x 13 ml	Conjugate solution (ready to use) Buffer solution of monoclonal antibodies to human IgG and IgA, conjugated with horseradish peroxidase, with stabilizers and preservative (green). Store at 2-8 °C
SOLN TMB	1 x 13 ml	TMB solution (ready to use) TMB solution, H ₂ O ₂ , a stabilizer, a preservative (colourless). Store at 2-8 °C
TWEEN WASH 20x	1 x 50 ml	Washing solution TWEEN (20x concentrated) 20-fold phosphate buffer concentrate with Tween-20 (colourless). Dilute TWEEN detergent (20x) at 1:20 with distilled or deionized water (e. g., 5 mL of concentrate + 95 mL of water for 8 wells) before use. Store the diluted solution at 2-8 °C for a maximum of 7 days
SOLN STOP	1 x 13 ml	Stop Solution (ready to use) 0.5 mol H ₂ SO ₄ solution (colourless). Store at 2-8 °C

The ELISA kit also includes adhesive films (2 items), sample application plan (1 item), checklist, and instruction for use.

4.2. Optional reagents, materials and equipment

Automatic single and multichannel pipettes 10–1000 µL, tips, volumetric laboratory glassware (10–1,000 mL), deionized or distilled water, thermostat at 37 °C, automatic or semi-automatic plate washer, spectrophotometer (reader) for microplates at 450/620–695 nm, appropriate containers for potentially contaminated waste, timer, filter paper, disposable powder-free gloves, disinfectants.

5. PRECAUTIONS AND SAFETY

5.1. Precautions

Be sure to read the instructions for use carefully before the test. The validity of the test results depends on strict following of the test procedure.

- do not use the ELISA kit components after the expiry date;
- do not use for analysis or mix components of different batches, components of kits for different nosologies, or reagents from other manufacturers with the «EQUI anti-Lambliia» ELISA kit;
- do not freeze the ELISA kit or its contents;
- after using a reagent, close each vial with its cap;
- when washing, control filling and complete aspiration of solution from the wells;
- use a new pipette tip each time you add samples or reagents;
- prevent direct sunlight from reaching the reagents from the ELISA kit;
- **SOLN|TMB** solution must be colourless before use. Do not use the solution if its colour is blue or yellow. Avoid contact of **SOLN|TMB** with metals or metal ions. Use only clean glassware thoroughly rinsed with distilled water;

- do not use reagents with colour not in line with para. 4.1;
- under no circumstances should the same glassware be used for SOLN|CONJ and SOLN|TMB;
- do not evaluate the test results visually (without a reader);
- any optional equipment that is in direct contact with biological material or kit components should be considered contaminated and requires cleaning and decontamination;
- the ELISA kit includes materials for 96 tests. Dispose of the used components as well as any remaining unused components.

5.2. Safety requirements

- all reagents in the ELISA kit are for laboratory professional use for *in vitro* diagnosis only and may only be used by qualified personnel;
- conduct the tests in disposable powder-free gloves and goggles only;
- do not eat, drink, smoke, or apply make-up in the test room;
- do not mouth-pipette the solutions;
- controls from the «EQUI anti-Lambliа» ELISA kit have been tested and found to be for anti-HIV1/2, anti-HCV and anti-*Treponema pallidum* antibodies and HBsAg negative; however, controls and test samples should be handled as potentially hazardous infectious materials;
- some of the kit components contain low concentrations of harmful substances and can damage skin or mucosa. In case of contact of SOLN|TMB, SOLN|STOP and SOLN|CONJ with mucous membranes or skin, immediately wash the affected area with plenty of water;
- in case of spillage of acid-free solutions, e. g. sera, treat the surface with a disinfectant solution and then wipe dry with filter paper. Otherwise first neutralize acid with sodium bicarbonate solution and then wipe the surface dry as described above.

5.3. Waste inactivation and disposal

- the liquid waste must be inactivated, for example, with hydrogen peroxide solution at the final concentration of 6% for 3 hours at room temperature, or with sodium hypochlorite at the final concentration of 5% for 30 minutes, or with other approved disinfectants;
- the solid waste must be inactivated by autoclaving at a temperature not less than 132°C;
- do not autoclave the solutions that contain sodium azide or sodium hypochlorite;
- disposal of inactivated waste must be conducted due to national laws and regulations.

6. STORAGE AND STABILITY

ELISA kit is stable up to the expiry date stated on the label when stored at 2-8°C. The kit should be transported at 2-8°C. Single transportation at a

temperature up to 23°C for two days is possible.

7. SAMPLE COLLECTION, TRANSPORTATION AND STORAGE GUIDELINES

Collect blood from the vein into the sterile test tube. Test tube must be marked with patient ID and date of sample collecting. Blood before serum separation can be stored at 2-8 °C for 24 hours, avoiding freezing.

Serum or plasma can be stored at 2-8 °C for maximum 3 days. Frozen serum can be stored for longer periods of time at -20 °C or -70 °C. Thaw frozen samples and keep them at room temperature for 30 minutes before use. After thawing, the stir samples to achieve homogeneity. Avoid repeated freezing-thawing cycles for test samples. If serum (or plasma) is turbid, remove insoluble inclusions by centrifugation at 3000 rpm for 10-15 minutes. Do not use serum samples with hyperlipidemia, hemolysis, and bacterial growth.

Transport serum samples in insulated containers. To do that, put closed labelled tubes in a plastic bag, tightly seal it and place in the centre of an insulated container. Put the frozen cold packs on the bottom, along the side walls of the insulated container and on top of the serum samples.

8. REAGENT PREPARATION

NOTE! It is very important to keep all ELISA kit components for at least 30 min at room temperature 18-25 °C before the assay!

8.1. Microplate preparation

To prevent water condensation in the wells, keep the **STRIPS** for 30 minutes at a room temperature before opening. Open the vacuum pack, detach the appropriate number of wells, and carefully pack the remaining wells with a desiccant and store tightly zip-locked at 2-8 °C. Storing the packed plate this way ensures its stability for 6 months.

8.2. Washing solution preparation

To prepare detergent, dilute **TWEEN|WASH|20x** at 1:20 (1+19) with distilled or deionized water and stir. E. g., 5 mL of concentrate + 95 mL of water, which is enough for 8 wells. If there are crystals present in the detergent concentrate, heat the vial at 37 °C until the crystals dissolve completely (15–20 minutes). Store the diluted solution at 2-8 °C for a maximum of 7 days.

9. ASSAY PROCEDURE

9.1. Prepare the necessary number of wells (four wells for controls and a necessary number of wells for test samples) and insert them into the ELISA plate frame.

Be sure to add control wells in every test run.

9.2. Fill in the sample application plan.

9.3. Prepare the detergent as per para. 8.2.

9.4. Add 80 µL of **DIL|SAMPLE** into each plate well.

9.5. Add 20 µL of controls and test samples into the wells:

CONTROL|+ – into well A1,

CONTROL|- – into wells B1, C1 and D1,

and test samples into the remaining wells.

At the time of adding, the solution changes its colour from brown to blue. Pipette the mix in the wells carefully to avoid foaming.

- 9.6. Cover the strips up with adhesive film and incubate for **30 minutes at 37 °C**.
- 9.7. Remove and discard the adhesive film and wash all wells 5 times with automatic washer or 8-channel pipette as follows:
- aspirate the content of all wells into a liquid waste container;
 - add a minimum of 300 µl of diluted washing solution to each well, soak each well for 30 seconds;
 - aspirate the content of all wells again. The residual volume after every aspiration should be less than 5 µl;
 - repeat the washing step 4 more times;
 - after the final aspiration, eliminate extra moisture by tapping the plate against a piece of filter paper.
- 9.8. Add 100 µL of [SOLN|CONJ] into each well. Cover the strips with a new piece of adhesive film and incubate for **30 minutes at 37 °C**.
- 9.9. Following incubation, remove the film carefully and wash the wells five times as described in para. 9.7.
- 9.10. Add 100 µL of [SOLN|TMB] into the wells; do not touch the bottom and the walls of the plate wells.
- 9.11. Incubate the strips for **30 minutes** in a dark place at a room temperature of 18-25 °C. Do not use adhesive film at this stage.
- 9.12. Add 100 µL of [SOLN|STOP] into each strip well to stop the enzymatic reaction; adhere to the same sequence of actions as when adding [SOLN|TMB]. At the time of adding, the solution colour changes from blue to yellow, and clear solution slightly changes its shade.
- 9.13. Measure the optical density (OD) of the wells at 450/620-695 nm wavelength using an ELISA microplate reader within 5 minutes after stopping the reaction. Pay attention to the cleanness of the plate bottom and the absence of bubbles in the wells before reading.

Measurement at the single wavelength of 450 nm is possible, in that case, it is needed to leave one well for blank (only [SOLN|TMB] and [SOLN|STOP] must be added in blank well).

10. CALCULATION AND INTERPRETATION OF RESULTS

10.1. Calculation of results

Calculate the average OD for the negative control (\bar{Nc}), Cut off (CO) and a sample positivity index (IP_{sample}).

$$\bar{Nc} = (Nc1 + Nc2 + Nc3)/3; \quad CO = \bar{Nc} + 0,25$$

$$IP_{\text{sample}} = OD_{\text{sample}}/CO, \text{ where } OD_{\text{sample}} \text{ is the OD sample.}$$

10.2. Quality control (assay validation)

The test results are considered valid if they meet the following requirements:

CONTROL + OD \geq 1,0

CONTROL - OD \leq 0,150

CONTROL - $\bar{N}c \times 0,5 \leq N_{cn} \leq \bar{N}c \times 2,0$

where N_{cn} is the OD for each N_c run

If any of the OD values for the negative control is beyond the above interval, it should be discarded, and N_c is calculated based on the remaining OD values for the negative control. If several OD values for the negative control fail to meet the above requirements, the test is considered invalid and requires a new run.

10.3. Interpretation of results

$IP_{\text{sample}} > 1,1$	POSITIVE
$0,9 \leq IP_{\text{sample}} \leq 1,1$	BORDERLINE*
$IP_{\text{sample}} < 0,9$	NEGATIVE

* Uncertain samples are recommended to be re-examined in two wells of the ELISA kit. If the results are again uncertain, a new sample should be selected and analyzed in 2-4 weeks. In case of repeated indeterminate results, such samples shall be considered negative.

11. PERFORMANCE CHARACTERISTICS

11.1. Analytical performance characteristic

Precision of measurement

Intra assay repeatability

The coefficient of variation (CV) for two sera with different levels of specific antibodies was evaluated in 32 replicates on one series of ELISA kits.

Sample No.	OD _{av}	IP _{av}	CV, %
14L	0,679	2,47	6,5
16L	0,490	1,79	6,6

Inter assay reproducibility

The coefficient of variation (CV) for three sera with different levels of specific antibodies was evaluated for 3 days in 3 sets of analysis, 8 replicates in each analysis.

Sample No.	OD _{av}	IP _{av}	CV, %
14L	0,670	2,39	5,55
16L	0,463	1,65	7,06

Analytical specificity

The test results are not affected by bilirubin at up to 0.21 mg/mL (361.8 μ mol/L), haemoglobin at up to 10 mg/mL and triglycerides at up to 10 mg/mL (11.3 mmol/l) present in the sample.

11.2. Diagnostic characteristics

Studies of the characteristics of the method in comparison with a similar commercial ELISA kit were performed on a sample of characterized sera, the target group of children and a group of donors. The relative sensitivity of «EQUI anti-Lambli» ELISA kits was determined from a group of 23 serum samples that were tested for antibodies to *Giardia lamblia* and characterized as positive in a commercial ELISA kit. All sera were also determined to be positive in «EQUI anti-Lambli» kits, so the relative sensitivity equals 100%. For 148 serum samples of children that were tested and characterized in commercial analogues, the relative specificity of «EQUI anti-Lambli» ELISA kits was 92.86%, the percentage of coincidence - 93.24%. According to a similar principle, for 238 serum samples of donor blood, the relative specificity was 97% and the percentage of coincidence was 96.64%.

12. LIMITATIONS OF ASSAY

The final diagnosis cannot be made solely on the basis of serological test results, since clinical manifestations of the disease and laboratory data (such as the detection of cysts in faecal samples or trophozoites in duodenal contents; the results of detection of *Giardia lamblia* antigen in faeces) should be taken into account as well.

Additionally, cross-reactions with antibodies to antigens of other parasites cannot be completely ruled out.

Giardia lamblia-specific antibodies may not be detected in case of children with persistent and prolonged giardiasis.

It should be noted that IgG antibodies to *Giardia lamblia* can be detected via ELISA for a long time, even after successful treatment.

13. DIFFICULTIES THAT CAN OCCUR DURING THE ASSAY PROCEDURE

Possible reasons	Solution
High background in all wells	
Contaminated washer	Clean the washer head and rinse according to the instructions for use
Poor quality or contaminated water	Use purified water with specific resistance $\geq 10 \text{ M}\Omega \cdot \text{cm}$
Use of poorly washed glassware	Use chemically clean utensils
Use of chlorinated disinfectants	Do not use chlorine disinfectants
Use of contaminated tips	Use new tips
Increased incubation times or change in the temperature conditions	Adhere to the incubation regime according to the instructions for use
High background in a row of wells	

Repeat application of TMB solution	TMB solution should be applied once
Contamination of the automatic pipette nozzle with conjugate solution	Clean the pipette and dial carefully liquid
Contamination of one of the washer's channel	Clean the flush channel, rinse washer
<i>Received OD of the positive control is below the border value</i>	
One of the reagents (conjugate solution or TMB solution) was not prepared in a correct way or was not added	Re-conduct ELISA, pay attention to the correctness of the introduction of these reagents
Reduced incubation times at any stage	Incubate according to instructions for use
<i>The colour density of the wells fails to meet the obtained optical density value</i>	
This may suggest that the optical beam has been displaced	Check the correct operation of the reader

14. TECHNICAL ASSISTANCE AND CUSTOMER SERVICE

In case of technical problems, you can obtain assistance by contacting the manufacturer.

REFERENCES


1. Adam R. D. Biology of *Giardia lamblia* // *Clinical Microbiology Reviews*. - 2001. - Vol. 14(3). - P. 447–475.
2. CDC - *Giardia* // <https://www.cdc.gov/parasites/giardia/index.html>.
3. Choy S. H., Al-Mekhlafi H. M. et al. Prevalence and Associated Risk Factors of *Giardia* Infection among Indigenous Communities in Rural Malaysia // *Scientific Reports*. - 2014. - Vol. 4, Article number: 6909.
4. DuPont H. L. *Giardia*: both a harmless commensal and a devastating pathogen // *Journal of Clinical Investigation*. - 2013. - Vol. 123(6). - P. 2352–2354.
5. Faubert G. Immune Response to *Giardia duodenalis* // *Clinical Microbiology Reviews*. - 2000. - Vol. 13(1). - P. 35–54.
6. Lopez-Romero G., Quintero J. et al. Host defences against *Giardia lamblia* // *Parasite Immunology*. - 2015. -Vol. 37(8). - P. 394-406.
7. Saghaug C. S., Sørnes S. et al. Human Memory CD4+ T Cell Immune Responses against *Giardia lamblia* // *Clinical and Vaccine Immunology*. - 2016. - Vol. 23, No. 1. - P. 11-18.
8. Solaymani-Mohammadi S. and Singer S. M. *Giardia duodenalis*: The Double-edged Sword of Immune Responses in Giardiasis // *Experimental Parasitology*. - 2010. - Vol. 126 (3). - P. 292–297.
9. Regulation (EU) 2017/746 of the European Parliament and of the Council of 5 April 2017 on in vitro diagnostic medical devices and repealing Directive 98/79/EC and Commission Decision 2010/227/EU.
10. Закон України «Про відходи» // Відомості Верховної Ради України. - 1998. - №36-37.
11. Наказ МОЗ України №325 від 08.06.2015 «Про затвердження Державних санітарно-протиепідемічних правил і норм щодо поведження з медичними відходами».
12. Постанова КМУ від 02 жовтня 2013р. №754 «Про затвердження технічного регламенту щодо медичних виробів для діагностики in vitro».
13. Hanna Tolonen, Kari Kuulasmaa, Tiina Laatikainen, Hermann Wolf and the European Health Risk Monitoring Project. Recommendation for indicators, international collaboration, protocol and manual of operations for chronic disease risk factor surveys Part 4.Storage and transfer of serum/plasma samples// Finnish National Public Health Institute 2002// https://thl.fi/publications/ehrm/product2/part_iii4.htm
14. Surveillance Guidelines for Measles, Rubella and Congenital Rubella Syndrome in the WHO European Region. Annex 3.Collection, storage and shipment of specimens for laboratory diagnosis and interpretation of results// Geneva: World Health Organization; 2012 Dec.

	Manufacturer
	Authorized Representative in the European Community
	In vitro diagnostic medical device
	Catalogue number
	Date of manufacture
	Use by date
	Batch code
	Temperature limit
	Contains sufficient for <n> tests
	Caution
	Non-Sterile
	Consult instructions for use
	Keep away from sunlight
	Keep dry
	Compliance with EU safety requirements

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For questions and suggestions regarding the ELISA kit contact:

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ASSAY PROCEDURE SCHEME

Keep all reagents for 30 min at temperature 18-25°C before use

Dispense 80 µl [DIL|SAMPLE] into the wells
(purple)

Add to 20 µl of controls and samples into the wells:
A1 – [CONTROL|+], B1, C1, D1 – [CONTROL|-],
other wells – examined samples
(change of colour from purple to blue)

Cover strips with an adhesive film, incubate for **30 min at 37°C**

Rinse the wells 5 times with prepared 1:20 (1+19) washing solution TWEEN
(300 µl per well)

Add 100 µl of [SOLN|CONJ] into all wells
(green)

Cover strips with an adhesive film, incubate for **30 min at 37°C**

Rinse the wells 5 times with prepared 1:20 (1+19) washing solution TWEEN
(300 µl per well)

Add 100 µl of [SOLN|TMB] into all wells

Incubate for **30 min** in the dark at **18-25°C**

Add 100 µl of [SOLN|STOP] into all wells
(change of colour from blue to yellow)

Measure the optical density (OD) with an ELISA microplate reader at
450/620-695 nm

CALCULATION OF RESULTS

$$\bar{Nc} = (Nc1 + Nc2 + Nc3)/3;$$

$$CO = \bar{Nc} + 0,25;$$

$$IP_{\text{sample}} = OD_{\text{sample}}/CO$$

\bar{Nc} - the average value of OD 3-x [CONTROL|-]

CO - Cut off

IP_{sample} - sample positivity index

INTERPRETATION OF RESULTS

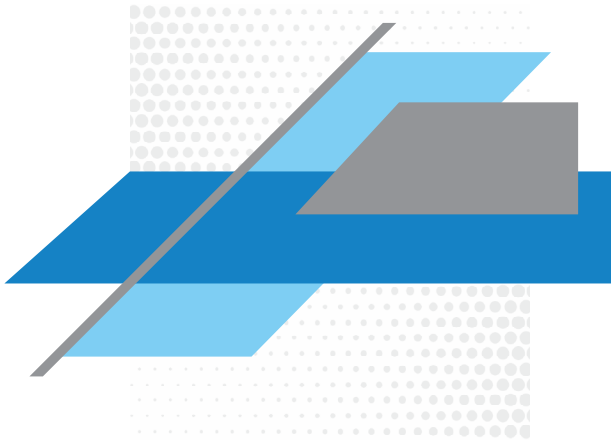
$IP_{\text{sample}} > 1,1$	POSITIVE
$0,9 \leq IP_{\text{sample}} \leq 1,1$	BORDERLINE
$IP_{\text{sample}} < 0,9$	NEGATIVE



Ascaris lumbricoides IgG

ELISA kit for the qualitative detection of IgG
antibodies to *Ascaris lumbricoides*

Instructions for use



IVD

REF
EI-601

Σ 96
tests

CE

EQUI *Ascaris lumbricoides* IgG

ELISA kit for the qualitative detection of
IgG antibodies to *Ascaris lumbricoides*

1. INTENDED USE

The «EQUI *Ascaris lumbricoides* IgG» is ELISA kit intended to qualitatively detect anti-*Ascaris lumbricoides* IgG in human serum or plasma by enzyme-linked immunosorbent assay (ELISA) in order to diagnose lumbricosis. The testing procedure is designed for both manual arrangement with automatic pipettes and standard equipment, and for automated «open» immunoassay analysers.

Target group: children, rural people, summer visitors.

Usage: ELISA kit is used in clinical diagnostic laboratories and other institutions engaged in *in vitro* diagnostics.

2. CLINICAL SIGNIFICANCE

Ascaris lumbricoides is a human parasite resulting in lumbricosis — one of the most common helminthiases in the world. By some estimates, over a milliard of people infested with acaricides are on earth.

Human ascaris belongs to *Nematoda* roundworms infesting the small intestine of a man who is its exclusive host. *Ascaris lumbricoides* eggs are excreted in the environment with faeces of the infested man. In a warm, wet soil, ascaris larvae develops in the eggs, therefore eggs become invasive only after a maturation period (2 to 3 weeks at 25–30 °C, lower temperatures require longer term). After infestation, larvae leave eggs in the human intestine, penetrates blood circulation and migrate to the liver and lungs with blood flow. The larvae move to the pharynx from the lungs, and here they are re-ingested and further enter the small intestine. In 2 to 3 months, adult ascaris able to propagate develops from larvae in the small intestine.

The helminths are transferred by faecal-oral route upon injection of mature eggs of *Ascaris lumbricoides* with soil-contaminated vegetables, fruits, water, as well as through dirty hands after contact with soil. Lumbricosis is conditionally divided into the early stage (migration of larvae) and late stage (parasitism of adults in the intestine). Invasion is asymptomatic in most cases. Primary feeling of being unwell occurs as early as several days after infestation and is accompanied by weakness, abdominal pain, nausea. Migration of larvae to the lungs may manifest as rales and cough. In some cases, intense invasion may result in pneumonia and liver damage. However, the most common symptom of early lumbricosis are allergic reactions due to hypersensitivity to metabolic products of larvae.

Late stage manifests as decreases appetite, abdominal pain, vomiting, diarrhoea, constipation. Massive ascaris invasion may result in the intestinal obstruction with a lump of helminths or rupture of the walls with peritonitis. When ascarides penetrate other organs, complications may develop such as

hepatitis, cholangitis, pancreatitis and even asphyxia. Cases of neurological disorders sometimes develop in lumbricosis, namely: headache, irritability, sleep impairment, inattention, etc. If no timely treatment is started for intense invasion, it may lead to death, especially in younger children.

Strong immune response to *Ascaris lumbricoides* invasion develops as early as at the early stage. It includes cellular and humoral immunity. Antigens of ascaris larvae stimulate secretion of all-class specific immunoglobulins, however, the level of specific and total IgE antibodies is the highest. The intensity of the immune response (including increased IgG titres) correlates with the massiveness of the invasion.

For diagnosis of lumbricosis, parasitologic stool test for presence of ascaris larvae and eggs is the most common. X-ray imaging of the lungs is additionally applied at the early stage of invasion. Complete blood count (eosinophilia develops in lumbricosis) and detection of serum anti-*Ascaris lumbricoides* antibodies also is included in the set of exams. The presence of specific anti-ascaris antibodies may suggest asymptomatic invasion, and allows initiation of treatment before complications develop in conjunction with other diagnostic instruments.

3. ANALYSIS PRINCIPLE

The procedure of testing for anti-*Ascaris lumbricoides* IgG in «EQUI *Ascaris lumbricoides* IgG» ELISA kit is based on «indirect» solid-phase ELISA with a two-stage incubation. Antigens of *Ascaris lumbricoides* larvae are entrapped in the wells. During the first step of incubation of ELISA plate wells with test samples, specific anti-*Ascaris lumbricoides* antibodies (if present in the samples) bind to the solid-phase antigens. The wells are washed to remove unbound antibodies and have only specific antigen-antibody complexes left. Then, a conjugate of anti-species IgG monoclonal antibodies with horseradish peroxidase is added, which binds to solid-phase immune complexes. Unbound components are removed by washing. Antigen-antibody complexes are detected by adding a solution of chromogen 3,3',5,5'-tetramethylbenzidine (TMB) with hydrogen peroxide. After 30-minute incubation, the reaction is stopped by adding the stop solution. The optical density (OD) in the wells is determined using a spectrophotometer at 450/620-695 nm. The intensity of the yellow colour is proportional to the level of antibodies in the sample.

4. MATERIALS AND EQUIPMENT

4.1. Contents of the ELISA kit

STRIPS

1 x 96
wells

Microplate

Each plate well is coated with *Ascaris lumbricoides* antigen. The wells are detachable. After the first opening, store unused strips in the package at 2-8 °C for a maximum of 6 months

CONTROL +	1 x 0,25 ml	Positive control Conjugated specific monoclonal antibody solution with preservative (pink). Store at 2-8 °C
CONTROL -	1 x 0,6 ml	Negative control Negative human serum with a preservative (yellow). Store at 2-8 °C
DIL SAMPLE	1 x 13 ml	Serum dilution solution Buffer solution with a milk extract, a detergent and a preservative (brown). Store at 2-8 °C
SOLN CONJ	1 x 13 ml	Conjugate solution (ready to use) Buffer solution of monoclonal antibodies to human IgG, conjugated with horseradish peroxidase, with stabilizers and preservative (green). Store at 2-8 °C
SOLN TMB	1 x 13 ml	TMB solution (ready to use) TMB solution, H ₂ O ₂ , a stabilizer, a preservative (colourless). Store at 2-8 °C
TWEEN WASH 20x	1 x 50 ml	Washing solution TWEEN (20x concentrated) 20-fold phosphate buffer concentrate with Tween-20 (colourless). Dilute TWEEN detergent (20x) at 1:20 with distilled or deionized water (e. g., 5 mL of concentrate + 95 mL of water for 8 wells) before use. Store the diluted solution at 2-8 °C for a maximum of 7 days
SOLN STOP	1 x 13 ml	Stop Solution (ready to use) 0.5 mol H ₂ SO ₄ solution (colourless). Store at 2-8 °C

The ELISA kit also includes adhesive films (2 items), sample application plan (1 item), checklist, and instruction for use.

4.2. Optional reagents, materials and equipment

Automatic single and multichannel pipettes 10–1000 µL, tips, volumetric laboratory glassware (10–1,000 mL), deionized or distilled water, thermostat at 37 °C, automatic or semi-automatic plate washer, spectrophotometer (reader) for microplates at 450/620-695 nm, appropriate containers for potentially contaminated waste, timer, filter paper, disposable powder-free gloves, disinfectants.

5. PRECAUTIONS AND SAFETY

5.1. Precautions

Be sure to read the instructions for use carefully before the test. The validity of the test results depends on strict following of the test procedure.

- do not use the ELISA kit components after the expiry date;
- do not use for analysis or mix components of different batches, components of kits for different nosologies, or reagents from other manufacturers with the «EQUI Ascaris lumbricoides IgG» ELISA kit;
- do not freeze the ELISA kit or its contents;
- after using a reagent, close each vial with its cap;

- when washing, control filling and complete aspiration of solution from the wells;
- use a new pipette tip each time you add samples or reagents;
- prevent direct sunlight from reaching the reagents from the ELISA kit;
- [SOLN|TMB] solution must be colourless before use. Do not use the solution if its colour is blue or yellow. Avoid contact of [SOLN|TMB] with metals or metal ions. Use only clean glassware thoroughly rinsed with distilled water;
- do not use reagents with colour not in line with para. 4.1;
- under no circumstances should the same glassware be used for [SOLN|CONJ] and [SOLN|TMB];
- do not evaluate the test results visually (without a reader);
- any optional equipment that is in direct contact with biological material or kit components should be considered contaminated and requires cleaning and decontamination;
- the ELISA kit includes materials for 96 tests. Dispose of the used components as well as any remaining unused components.

5.2. Safety requirements

- all reagents in the ELISA kit are for laboratory professional use for *in vitro* diagnosis only and may only be used by qualified personnel;
- conduct the tests in disposable powder-free gloves and goggles only;
- do not eat, drink, smoke, or apply make-up in the test room;
- do not mouth-pipette the solutions;
- controls from the «EQUI *Ascaris lumbricoides* IgG» ELISA kit have been tested and found to be for anti-HIV1/2, anti-HCV and anti-*Treponema pallidum* antibodies and HBsAg negative; however, controls and test samples should be handled as potentially hazardous infectious materials;
- some of the kit components contain low concentrations of harmful substances and can damage skin or mucosa. In case of contact of [SOLN|TMB], [SOLN|STOP] and [SOLN|CONJ] with mucous membranes or skin, immediately wash the affected area with plenty of water;
- in case of spillage of acid-free solutions, e. g. sera, treat the surface with a disinfectant solution and then wipe dry with filter paper. Otherwise first neutralize acid with sodium bicarbonate solution and then wipe the surface dry as described above.

5.3. Waste inactivation and disposal

- the liquid waste must be inactivated, for example, with hydrogen peroxide solution at the final concentration of 6% for 3 hours at room temperature, or with sodium hypochlorite at the final concentration of 5% for 30 minutes, or with other approved disinfectants;
- the solid waste must be inactivated by autoclaving at a temperature not less than 132°C;

- do not autoclave the solutions that contain sodium azide or sodium hypochlorite;
- disposal of inactivated waste must be conducted due to national laws and regulations.

6. STORAGE AND STABILITY

ELISA kit is stable up to the expiry date stated on the label when stored at 2-8°C. The kit should be transported at 2-8°C. Single transportation at a temperature up to 23°C for two days is possible.

7. SAMPLE COLLECTION, TRANSPORTATION AND STORAGE GUIDELINES

Collect blood from the vein into the sterile test tube. Test tube must be marked with patient ID and date of sample collecting. Blood before serum separation can be stored at 2-8 °C for 24 hours, avoiding freezing.

Serum or plasma can be stored at 2-8 °C for maximum 3 days. Frozen serum can be stored for longer periods of time at -20 °C or -70 °C. Thaw frozen samples and keep them at room temperature for 30 minutes before use. After thawing, the stir samples to achieve homogeneity. Avoid repeated freezing-thawing cycles for test samples. If serum (or plasma) is turbid, remove insoluble inclusions by centrifugation at 3000 rpm for 10-15 minutes. Do not use serum samples with hyperlipidemia, hemolysis, and bacterial growth.

Transport serum samples in insulated containers. To do that, put closed labelled tubes in a plastic bag, tightly seal it and place in the centre of an insulated container. Put the frozen cold packs on the bottom, along the side walls of the insulated container and on top of the serum samples.

8. REAGENT PREPARATION

NOTE! It is very important to keep all ELISA kit components for at least 30 min at room temperature 18-25 °C before the assay!

8.1. Microplate preparation

To prevent water condensation in the wells, keep the **STRIPS** for 30 minutes at a room temperature before opening. Open the vacuum pack, detach the appropriate number of wells, and carefully pack the remaining wells with a desiccant and store tightly zip-locked at 2-8 °C. Storing the packed plate this way ensures its stability for 6 months.

8.2. Washing solution preparation

To prepare detergent, dilute **TWEEN|WASH|20x** at 1:20 (1+19) with distilled or deionized water and stir. E. g., 5 mL of concentrate + 95 mL of water, which is enough for 8 wells. If there are crystals present in the detergent concentrate, heat the vial at 37 °C until the crystals dissolve completely (15–20 minutes). Store the diluted solution at 2-8 °C for a maximum of 7 days.

9. ASSAY PROCEDURE

- 9.1. Prepare the necessary number of wells (four wells for controls and a necessary number of wells for test samples) and insert them into the ELISA plate frame. Be sure to add control wells in every test run.
- 9.2. Fill in the sample application plan.
- 9.3. Prepare the detergent as per para. 8.2.
- 9.4. Add 90 µL of [DIL|SAMPLE] into each plate well.
- 9.5. Add 10 µL of controls and test samples into the wells:
[CONTROL|+] – into well A1,
[CONTROL|-] – into wells B1, C1 and D1,
and test samples into the remaining wells.
At the time of adding, the solution changes its colour from brown to blue. Pipette the mix in the wells carefully to avoid foaming.
- 9.6. Cover the strips up with adhesive film and incubate for **30 minutes at 37 °C**.
- 9.7. Remove and discard the adhesive film and wash all wells 5 times with automatic washer or 8-channel pipette as follows:
 - aspirate the content of all wells into a liquid waste container;
 - add a minimum of 300 µl of diluted washing solution to each well, soak each well for 30 seconds;
 - aspirate the content of all wells again. The residual volume after every aspiration should be less than 5 µl;
 - repeat the washing step 4 more times;
 - after the final aspiration, eliminate extra moisture by tapping the plate against a piece of filter paper.
- 9.8. Add 100 µL of [SOLN|CONJ] into each well. Cover the strips with a new piece of adhesive film and incubate for **30 minutes at 37 °C**.
- 9.9. Following incubation, remove the film carefully and wash the wells five times as described in para. 9.7.
- 9.10. Add 100 µL of [SOLN|TMB] into the wells; do not touch the bottom and the walls of the plate wells.
- 9.11. Incubate the strips for **30 minutes** in a dark place at a room temperature of 18-25 °C. Do not use adhesive film at this stage.
- 9.12. Add 100 µL of [SOLN|STOP] into each strip well to stop the enzymatic reaction; adhere to the same sequence of actions as when adding [SOLN|TMB]. At the time of adding, the solution colour changes from blue to yellow, and clear solution slightly changes its shade.
- 9.13. Measure the optical density (OD) of the wells at 450/620-695 nm wavelength using an ELISA microplate reader within 5 minutes after stopping the reaction. Pay attention to the cleanness of the plate bottom and the absence of bubbles in the wells before reading.

Measurement at the single wavelength of 450 nm is possible, in that case, it is needed to leave one well for blank (only [SOLN|TMB] and [SOLN|STOP] must be added

in blank well).

10. CALCULATION AND INTERPRETATION OF RESULTS

10.1. Calculation of results

Calculate the average OD for the negative control (\bar{Nc}), Cut off (CO) and a sample positivity index (IP_{sample}).

$$\bar{Nc} = (Nc1 + Nc2 + Nc3)/3; \quad CO = \bar{Nc} + 0,3$$

$$IP_{\text{sample}} = OD_{\text{sample}}/CO, \text{ where } OD_{\text{sample}} \text{ is the OD sample.}$$

10.2. Quality control (assay validation)

The test results are considered valid if they meet the following requirements:

$$\boxed{\text{CONTROL}+} \quad OD \geq 1,0$$

$$\boxed{\text{CONTROL}-} \quad OD \leq 0,150$$

$$\boxed{\text{CONTROL}-} \quad \bar{Nc} \times 0,5 \leq Ncn \leq \bar{Nc} \times 2,0 \quad \text{where } Ncn \text{ is the OD for each } Nc \text{ run}$$

If any of the OD values for the negative control is beyond the above interval, it should be discarded, and \bar{Nc} is calculated based on the remaining OD values for the negative control. If several OD values for the negative control fail to meet the above requirements, the test is considered invalid and requires a new run.

10.3. Interpretation of results

$$\begin{array}{ll} IP_{\text{sample}} > 1,1 & \text{POSITIVE} \\ 0,9 \leq IP_{\text{sample}} \leq 1,1 & \text{BORDERLINE*} \\ IP_{\text{sample}} < 0,9 & \text{NEGATIVE} \end{array}$$

* Uncertain samples are recommended to be re-examined in two wells of the ELISA kit. If the results are again uncertain, a new sample should be selected and analyzed in 2-4 weeks. In case of repeated indeterminate results, such samples shall be considered negative.

11. PERFORMANCE CHARACTERISTICS

11.1. Analytical performance characteristics

Precision of measurement

Intra assay repeatability

The coefficient of variation (CV) for three sera with different levels of specific antibodies was evaluated in 24 replicates on one series of ELISA kits.

Sample No.	OD _{av}	IP _{av}	CV, %
547	0,504	1,43	2,9
671	0,753	2,13	3,6
413	1,165	3,30	3,1

Inter assay reproducibility

The coefficient of variation (CV) for three sera with different levels of specific antibodies was evaluated for 4 days in 4 sets of analysis, 8 replicates in each analysis.

Sample No.	OD _{av}	IP _{av}	CV, %
547	0,534	1,55	5,0
671	0,750	2,17	4,6
413	1,159	3,36	3,6

Analytical specificity

The test results are not affected by bilirubin at up to 0.21 mg/mL (361.8 µmol/L), haemoglobin at up to 10 mg/mL and triglycerides at up to 10 mg/mL (11.3 mmol/l) present in the sample.

11.2. Diagnostic characteristics

To evaluate clinical sensitivity and specificity of «EQUI *Ascaris lumbricoides* IgG» ELISA kits, 55 serum samples from patients with clinical symptoms typical for lumbricosis and 60 serum samples from patients without clinical manifestations (seronegative in terms of *Ascaris lumbricoides*) were used. Clinical sensitivity of «EQUI *Ascaris lumbricoides* IgG» ELISA kits was 94.55 % and clinical specificity — 93.3 %.

Method characteristics in comparison with equal commercial ELISA kit was studied in target paediatric population (160 samples) and population of donors (346 samples). For paediatric population serum, relative specificity of «EQUI *Ascaris lumbricoides* IgG» ELISA kits was established at the level of 97.92 % and percent agreement was 95.51 %. For donor population serum, relative specificity of was 89.74 %, relative specificity — 96.30 % and percent agreement was 95.47 %.

12. LIMITATIONS OF ASSAY

Positive result in «EQUI *Ascaris lumbricoides* IgG» ELISA kit supports presence of anti-*Ascaris lumbricoides* specific IgG antibodies. Presence of this class antibodies in newborns is not an evidence of *Ascaris lumbricoides* invasion.

Inconclusive results may suggest a history of *Ascaris lumbricoides* invasion.

Negative result of «EQUI *Ascaris lumbricoides* IgG» ELISA kit supports the absence of anti-*Ascaris lumbricoides* IgG specific antibodies in the test sample or concentration of specific antibodies is below the sensitivity limit of the assay.

The results of serological test only are not the basis for final diagnosis. When establishing the diagnosis, the results of complex laboratory and instrumental tests, as well as clinical manifestations should be considered. Cross-reactions with antibodies to antigens of other helminths cannot be fully ruled out.

13. DIFFICULTIES THAT CAN OCCUR DURING THE ASSAY PROCEDURE

Possible reasons	Solution
<i>High background in all wells</i>	
Contaminated washer	Clean the washer head and rinse according to the instructions for use
Poor quality or contaminated water	Use purified water with specific resistance $\geq 10 \text{ M}\Omega \cdot \text{cm}$
Use of poorly washed glassware	Use chemically clean utensils
Use of chlorinated disinfectants	Do not use chlorine disinfectants
Use of contaminated tips	Use new tips
Increased incubation times or change in the temperature conditions	Adhere to the incubation regime according to the instructions for use
<i>High background in a row of wells</i>	
Repeat application of TMB solution	TMB solution should be applied once
Contamination of the automatic pipette nozzle with conjugate solution	Clean the pipette and dial carefully liquid
Contamination of one of the washer's channel	Clean the flush channel, rinse washer
<i>Received OD of the positive control is below the border value</i>	
One of the reagents (conjugate solution or TMB solution) was not prepared in a correct way or was not added	Re-conduct ELISA, pay attention to the correctness of the introduction of these reagents
Reduced incubation times at any stage	Incubate according to instructions for use
<i>The colour density of the wells fails to meet the obtained optical density value</i>	
This may suggest that the optical beam has been displaced	Check the correct operation of the reader

14. TECHNICAL ASSISTANCE AND CUSTOMER SERVICE

In case of technical problems, you can obtain assistance by contacting the manufacturer.

REFERENCES

1. CDC - Ascariasis // <https://www.cdc.gov/parasites/ascariasis/index.html>.
2. Cooper P. J., Chico M. E. et al. Human Infection with *Ascaris lumbricoides* Is Associated with a Polarized Cytokine Response // *The Journal of Infectious Diseases*. - 2003. - Vol. 182 (4). - P. 1207–1213.
3. Gupta S., Kumar S. et al. *Ascaris lumbricoides*: an unusual aetiology of gastric perforation // *Journal of Surgical Case Reports*. - 2012. - Vol. 2012. - rjs008.
4. Li Q., Zhao D. et al. Life-threatening complications of ascariasis in trauma patients: a review of the literature // *World Journal of Emergency Medicine*. - 2014. - Vol. 5 (3). - P. 165–170.
5. McSharry C., Xia Y. et al. Natural Immunity to *Ascaris lumbricoides* Associated with Immunoglobulin E Antibody to ABA-1 Allergen and Inflammation Indicators in Children // *Infection and Immunity*. - 1999. - Vol. 67(2). - P. 484–489.
6. Palmer L. J., Celedón J. C. et al. *Ascaris lumbricoides* Infection Is Associated with Increased Risk of Childhood Asthma and Atopy in Rural China // *American Journal of Respiratory and Critical Care Medicine*. - 2002. - Vol. 165, No. 11. - P. 1489–1493.
7. Shalaby N. Effect of *Ascaris lumbricoides* infection on T helper cell type 2 in rural Egyptian children // *Therapeutics and Clinical Risk Management*. - 2016. - Vol. 12. - P. 379–385.
8. WHO. Water related diseases: ascariasis. 2013 // http://www.who.int/water_sanitation_health/diseases/ascariasis/en/.
9. Regulation (EU) 2017/746 of the European Parliament and of the Council of 5 April 2017 on in vitro diagnostic medical devices and repealing Directive 98/79/EC and Commission Decision 2010/227/EU.
10. Закон України «Про відходи» // Відомості Верховної Ради України. - 1998. - №36-37.
11. Наказ МОЗ України №325 від 08.06.2015 «Про затвердження Державних санітарно-протиепідемічних правил і норм щодо поводження з медичними відходами».
12. Постанова КМУ від 02 жовтня 2013р. №754 «Про затвердження технічного регламенту щодо медичних виробів для діагностики in vitro».
13. Hanna Tolonen, Kari Kuulasmaa, Tiina Laatikainen, Hermann Wolf and the European Health Risk Monitoring Project. Recommendation for indicators, international collaboration, protocol and manual of operations for chronic disease risk factor surveys Part 4.Storage and transfer of serum/plasma samples// Finnish National Public Health Institute 2002// https://thl.fi/publications/ehrm/product2/part_iii4.htm
14. Surveillance Guidelines for Measles, Rubella and Congenital Rubella Syndrome in the WHO European Region. Annex 3.Collection, storage and shipment of specimens for laboratory diagnosis and interpretation of results// Geneva: World Health Organization; 2012 Dec.



Manufacturer



Authorized Representative in the European Community



In vitro diagnostic medical device



Catalogue number



Date of manufacture



Use by date



Batch code



Temperature limit



Contains sufficient for <n> tests



Caution



Non-Sterile



Consult instructions for use



Keep away from sunlight



Keep dry



Compliance with EU safety requirements

Edition 8, 10.02.2022

For questions and suggestions regarding the ELISA kit contact:

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ASSAY PROCEDURE SCHEME

Keep all reagents for 30 min at temperature 18-25°C before use

Dispense 90 µl [DIL|SAMPLE] into the wells (brown)

Add to 10 µl of controls and samples into the wells:
A1 – [CONTROL|+], B1, C1, D1 – [CONTROL|-],
other wells – examined samples
(change of colour from brown to blue)

Cover strips with an adhesive film, incubate for **30 min at 37°C**

Rinse the wells 5 times with prepared 1:20 (1+19) washing solution TWEEN (300 µl per well)

Add 100 µl of [SOLN|CONJ] into all wells (green)

Cover strips with an adhesive film, incubate for **30 min at 37°C**

Rinse the wells 5 times with prepared 1:20 (1+19) washing solution TWEEN (300 µl per well)

Add 100 µl of [SOLN|TMB] into all wells

Incubate for **30 min** in the dark at **18-25°C**

Add 100 µl of [SOLN|STOP] into all wells (change of colour from blue to yellow)

Measure the optical density (OD) with an ELISA microplate reader at 450/620-695 nm

CALCULATION OF RESULTS

$$\bar{Nc} = (Nc1 + Nc2 + Nc3)/3;$$

$$CO = \bar{Nc} + 0,3;$$

$$IP_{\text{sample}} = OD_{\text{sample}} / CO$$

\bar{Nc} - the average value of OD 3-x [CONTROL|-]

CO - Cut off

IP_{sample} - sample positivity index

INTERPRETATION OF RESULTS

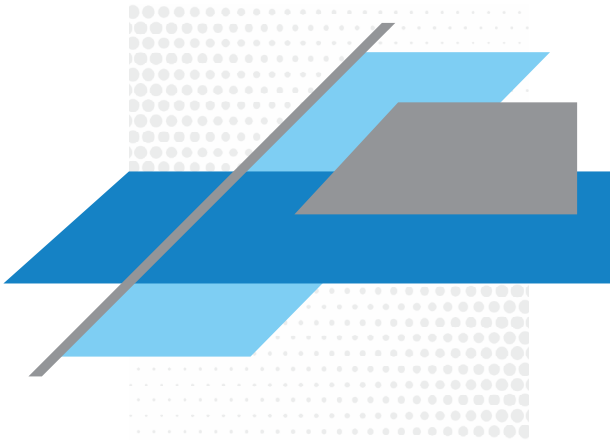
$IP_{\text{sample}} > 1,1$	POSITIVE
$0,9 \leq IP_{\text{sample}} \leq 1,1$	BORDERLINE
$IP_{\text{sample}} < 0,9$	NEGATIVE



Toxocara canis IgG

ELISA kit for the qualitative detection of IgG
antibodies to *Toxocara canis*

Instructions for use



IVD

REF
EI-603

Σ 96
tests

CE

EQUI *Toxocara canis* IgG

ELISA kit for the qualitative detection of
IgG antibodies to *Toxocara canis*

1. INTENDED USE

The «EQUI *Toxocara canis* IgG» is ELISA kit intended to qualitatively detect anti-*Toxocara canis* IgG in human serum or plasma by enzyme-linked immunosorbent assay (ELISA) in order to diagnose toxocariasis. The testing procedure is designed for both manual arrangement with automatic pipettes and standard equipment, and for automated «open» immunoassay analysers.

Target group: children, pet owners, rural people, summer visitors, forest guards, veterinarians.

Usage: ELISA kit is used in clinical diagnostic laboratories and other institutions engaged in *in vitro* diagnostics.

2. CLINICAL SIGNIFICANCE

Toxocariasis is a common disease induced by *Toxocara* helminth which is transmitted from animals to human. Toxocariasis is spread throughout the world, however, it is more common in depressed areas with poor hygienic conditions. In some regions, up to 90 % of puppies and up to 10 % of adult domesticated dogs are infested with toxocara. The risk of infestation is higher for owners of cats and dogs and for children due to playing in the sandpits and on the playgrounds contaminated with animal faeces.

Toxocara are threadworms belonging to *Nematoda*. Human conditions are mostly caused by *Toxocara canis*, which infested canids, rare - *Toxocara cati*, which is more common in felids. Adult toxocara in the body of infested animals reaches 5–15 cm in length; their propagation takes place here. Female helminths lay about 200 thous eggs daily, which are excreted in the environment with faeces. If conditions are favourable, following several weeks of maturation in the soil they become invasive — a larva is developed in the eggs. In the paratenic host (mice, poultry, cows, pigs, etc.). larva develops without propagation. If the conditions are unfavourable, larvae are encapsulated and may maintain viability for a long time (up to 10 years). They may also be the source of invasion.

People are infested through faecal-oral route when ingesting *Toxocara canis* mature eggs with soil-contaminated vegetables, fruits, berries, via dirty hands or when consuming meat of paratenic hosts. In the small intestine, larvae leave their cover and penetrates blood circulation through the intestinal walls. The larvae migrate to other organs and tissues with blood, namely: liver, lungs, muscles, eyes, CNS, etc. In the most of the infested, toxocariasis is asymptomatic. Clinical manifestations of this disease are associated with the site of larvae migration and depend on the intensity of invasion and age of the host. Visceral syndrome larva migrans is typical after infestation of the internal organs with *Toxocara canis* and ocular

toxocariasis, when eye and optic nerve are involved. Symptoms of visceral toxocariasis: fever, fatigue, abdominal pain, anorexia, hepatomegaly, cough and others. Heart and respiratory failure may develop in severe cases. Due to a strong immune response to larvae antigens, immediate and delayed hypersensitivity reactions develop. Granulomatosis in ocular toxocariasis may result in retinal detachment and loss of vision.

Diagnosis of toxocariasis is complicated due to the lack of specific manifestations of the disease, even upon intense invasion. Furthermore, a man is an intermediate host of *Toxocara canis* and does not excrete parasites in the environment, whereas it is difficult to localise larvae in certain organs via non-invasive methods. Eosinophilia may appear in blood tests, however, serological tests are more common to detect toxocariasis (immunofluorescence reaction, ELISA and immunoblotting). Detection of specific anti-*Toxocara canis* IgG to larvae antigens may suggest current or previous invasion. High titer of IgE antibodies is also typical for active invasion. However, the combination of clinical manifestations and laboratory findings are necessary for diagnosis.

3. ANALYSIS PRINCIPLE

The procedure of testing for anti-*Toxocara canis* IgG in «EQUI *Toxocara canis* IgG» ELISA kit is based on «indirect» solid-phase ELISA with a two-stage incubation. Antigens of *Toxocara canis* larvae are entrapped in the wells. During the first step of incubation of ELISA plate wells with test samples, specific anti-*Toxocara canis* antibodies (if present in the samples) bind to the solid-phase antigens. The wells are washed to remove unbound antibodies and have only specific antigen-antibody complexes left. Then, a conjugate of anti-species IgG monoclonal antibodies with horseradish peroxidase is added, which binds to solid-phase immune complexes. Unbound components are removed by washing. Antigen-antibody complexes are detected by adding a solution of chromogen 3,3',5,5'-tetramethylbenzidine (TMB) with hydrogen peroxide. After 30-minute incubation, the reaction is stopped by adding the stop solution. The optical density (OD) in the wells is determined using a spectrophotometer at 450/620-695 nm. The intensity of the yellow colour is proportional to the level of antibodies in the sample.

4. MATERIALS AND EQUIPMENT

4.1. Contents of the ELISA kit

STRIPS

1 x 96 wells

Microplate

Each plate well is coated with *Toxocara canis* larval antigens. The wells are detachable. After the first opening, store unused strips in the package at 2-8 °C for a maximum of 6 months

CONTROL +	1 x 0,25 ml	Positive control Conjugated specific monoclonal antibody solution with preservative (pink). Store at 2-8 °C
CONTROL -	1 x 0,6 ml	Negative control Negative human serum with a preservative (yellow). Store at 2-8 °C
DIL SAMPLE	1 x 13 ml	Serum dilution solution Buffer solution with a milk extract, a detergent and a preservative (brown). Store at 2-8 °C
SOLN CONJ	1 x 13 ml	Conjugate solution (ready to use) Buffer solution of monoclonal antibodies to human IgG, conjugated with horseradish peroxidase, with stabilizers and preservative (green). Store at 2-8 °C
SOLN TMB	1 x 13 ml	TMB solution (ready to use) TMB solution, H ₂ O ₂ , a stabilizer, a preservative (colourless). Store at 2-8 °C
TWEEN WASH 20x	1 x 50 ml	Washing solution TWEEN (20x concentrated) 20-fold phosphate buffer concentrate with Tween-20 (colourless). Dilute TWEEN detergent (20x) at 1:20 with distilled or deionized water (e. g., 5 mL of concentrate + 95 mL of water for 8 wells) before use. Store the diluted solution at 2-8 °C for a maximum of 7 days
SOLN STOP	1 x 13 ml	Stop Solution (ready to use) 0.5 mol H ₂ SO ₄ solution (colourless). Store at 2-8 °C

The ELISA kit also includes adhesive films (2 items), sample application plan (1 item), checklist, and instruction for use.

4.2. Optional reagents, materials and equipment

Automatic single and multichannel pipettes 10–1000 µL, tips, volumetric laboratory glassware (10–1,000 mL), deionized or distilled water, thermostat at 37 °C, automatic or semi-automatic plate washer, spectrophotometer (reader) for microplates at 450/620–695 nm, appropriate containers for potentially contaminated waste, timer, filter paper, disposable powder-free gloves, disinfectants.

5. PRECAUTIONS AND SAFETY

5.1. Precautions

Be sure to read the instructions for use carefully before the test. The validity of the test results depends on strict following of the test procedure.

- do not use the ELISA kit components after the expiry date;
- do not use for analysis or mix components of different batches, components of kits for different nosologies, or reagents from other manufacturers with the «EQUI Toxocara canis IgG» ELISA kit;

- do not freeze the ELISA kit or its contents;
- after using a reagent, close each vial with its cap;
- when washing, control filling and complete aspiration of solution from the wells;
- use a new pipette tip each time you add samples or reagents;
- prevent direct sunlight from reaching the reagents from the ELISA kit;
- [SOLN|TMB] solution must be colourless before use. Do not use the solution if its colour is blue or yellow. Avoid contact of [SOLN|TMB] with metals or metal ions. Use only clean glassware thoroughly rinsed with distilled water;
- do not use reagents with colour not in line with para. 4.1;
- under no circumstances should the same glassware be used for [SOLN|CONJ] and [SOLN|TMB];
- do not evaluate the test results visually (without a reader);
- any optional equipment that is in direct contact with biological material or kit components should be considered contaminated and requires cleaning and decontamination;
- the ELISA kit includes materials for 96 tests. Dispose of the used components as well as any remaining unused components.

5.2. Safety requirements

- all reagents in the ELISA kit are for laboratory professional use for *in vitro* diagnosis only and may only be used by qualified personnel;
- conduct the tests in disposable powder-free gloves and goggles only;
- do not eat, drink, smoke, or apply make-up in the test room;
- do not mouth-pipette the solutions;
- controls from the «EQUI *Toxocara canis* IgG» ELISA kit have been tested and found to be for anti-HIV1/2, anti-HCV and anti-*Treponema pallidum* antibodies and HBsAg negative; however, controls and test samples should be handled as potentially hazardous infectious materials;
- some of the kit components contain low concentrations of harmful substances and can damage skin or mucosa. In case of contact of [SOLN|TMB], [SOLN|STOP] and [SOLN|CONJ] with mucous membranes or skin, immediately wash the affected area with plenty of water;
- in case of spillage of acid-free solutions, e. g. sera, treat the surface with a disinfectant solution and then wipe dry with filter paper. Otherwise first neutralize acid with sodium bicarbonate solution and then wipe the surface dry as described above.

5.3. Waste inactivation and disposal

- the liquid waste must be inactivated, for example, with hydrogen peroxide solution at the final concentration of 6% for 3 hours at room temperature, or with sodium hypochlorite at the final concentration of 5% for 30 minutes, or with other approved disinfectants;

- the solid waste must be inactivated by autoclaving at a temperature not less than 132°C;
- do not autoclave the solutions that contain sodium azide or sodium hypochlorite;
- disposal of inactivated waste must be conducted due to national laws and regulations.

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ELISA kit is stable up to the expiry date stated on the label when stored at 2-8°C. The kit should be transported at 2-8°C. Single transportation at a temperature up to 23°C for two days is possible.

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Collect blood from the vein into the sterile test tube. Test tube must be marked with patient ID and date of sample collecting. Blood before serum separation can be stored at 2-8 °C for 24 hours, avoiding freezing.

Serum or plasma can be stored at 2-8 °C for maximum 3 days. Frozen serum can be stored for longer periods of time at -20 °C or -70 °C. Thaw frozen samples and keep them at room temperature for 30 minutes before use. After thawing, the stir samples to achieve homogeneity. Avoid repeated freezing-thawing cycles for test samples. If serum (or plasma) is turbid, remove insoluble inclusions by centrifugation at 3000 rpm for 10-15 minutes. Do not use serum samples with hyperlipidemia, hemolysis, and bacterial growth.

Transport serum samples in insulated containers. To do that, put closed labelled tubes in a plastic bag, tightly seal it and place in the centre of an insulated container. Put the frozen cold packs on the bottom, along the side walls of the insulated container and on top of the serum samples.

8. REAGENT PREPARATION

NOTE! It is very important to keep all ELISA kit components for at least 30 min at room temperature 18-25 °C before the assay!

8.1. Microplate preparation

To prevent water condensation in the wells, keep the **STRIPS** for 30 minutes at a room temperature before opening. Open the vacuum pack, detach the appropriate number of wells, and carefully pack the remaining wells with a desiccant and store tightly zip-locked at 2-8 °C. Storing the packed plate this way ensures its stability for 6 months.

8.2. Washing solution preparation

To prepare detergent, dilute **TWEEN|WASH|20x** at 1:20 (1+19) with distilled or deionized water and stir. E. g., 5 mL of concentrate + 95 mL of water, which is enough for 8 wells. If there are crystals present in the detergent concentrate, heat the vial at 37 °C until the crystals dissolve completely (15–20 minutes). Store the diluted solution at 2-8 °C for a maximum of 7 days.

9. ASSAY PROCEDURE

- 9.1. Prepare the necessary number of wells (four wells for controls and a necessary number of wells for test samples) and insert them into the ELISA plate frame. Be sure to add control wells in every test run.
- 9.2. Fill in the sample application plan.
- 9.3. Prepare the detergent as per para. 8.2.
- 9.4. Add 90 µL of [DIL|SAMPLE] into each plate well.
- 9.5. Add 10 µL of controls and test samples into the wells:
[CONTROL|+] – into well A1,
[CONTROL|-] – into wells B1, C1 and D1,
and test samples into the remaining wells.
At the time of adding, the solution changes its colour from brown to blue. Pipette the mix in the wells carefully to avoid foaming.
- 9.6. Cover the strips up with adhesive film and incubate for **30 minutes at 37 °C**.
- 9.7. Remove and discard the adhesive film and wash all wells 5 times with automatic washer or 8-channel pipette as follows:
 - aspirate the content of all wells into a liquid waste container;
 - add a minimum of 300 µl of diluted washing solution to each well, soak each well for 30 seconds;
 - aspirate the content of all wells again. The residual volume after every aspiration should be less than 5 µl;
 - repeat the washing step 4 more times;
 - after the final aspiration, eliminate extra moisture by tapping the plate against a piece of filter paper.
- 9.8. Add 100 µL of [SOLN|CONJ] into each well. Cover the strips with a new piece of adhesive film and incubate for **30 minutes at 37 °C**.
- 9.9. Following incubation, remove the film carefully and wash the wells five times as described in para. 9.7.
- 9.10. Add 100 µL of [SOLN|TMB] into the wells; do not touch the bottom and the walls of the plate wells.
- 9.11. Incubate the strips for **30 minutes** in a dark place at a room temperature of 18-25 °C. Do not use adhesive film at this stage.
- 9.12. Add 100 µL of [SOLN|STOP] into each strip well to stop the enzymatic reaction; adhere to the same sequence of actions as when adding [SOLN|TMB]. At the time of adding, the solution colour changes from blue to yellow, and clear solution slightly changes its shade.
- 9.13. Measure the optical density (OD) of the wells at 450/620-695 nm wavelength using an ELISA microplate reader within 5 minutes after stopping the reaction. Pay attention to the cleanness of the plate bottom and the absence of bubbles in the wells before reading.

Measurement at the single wavelength of 450 nm is possible, in that case, it is needed to leave one well for blank (only [SOLN|TMB] and [SOLN|STOP] must be added

in blank well).

10. CALCULATION AND INTERPRETATION OF RESULTS

10.1. Calculation of results

Calculate the average OD for the negative control (\bar{Nc}), Cut off (CO) and a sample positivity index (IP_{sample}).

$$\bar{Nc} = (Nc1 + Nc2 + Nc3)/3; \quad CO = \bar{Nc} + 0,3$$

$$IP_{\text{sample}} = OD_{\text{sample}}/CO, \text{ where: } OD_{\text{sample}} \text{ is the OD sample.}$$

10.2. Quality control (assay validation)

The test results are considered valid if they meet the following requirements:

CONTROL +	$OD \geq 1,0$
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CONTROL -	$OD \leq 0,150$
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CONTROL -	$\bar{Nc} \times 0,5 \leq Ncn \leq \bar{Nc} \times 2,0$	where Ncn is the OD for each Nc run
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If any of the OD values for the negative control is beyond the above interval, it should be discarded, and Nc is calculated based on the remaining OD values for the negative control. If several OD values for the negative control fail to meet the above requirements, the test is considered invalid and requires a new run.

10.3. Interpretation of results

$IP_{\text{sample}} > 1,1$	POSITIVE
$0,9 \leq IP_{\text{sample}} \leq 1,1$	BORDERLINE*
$IP_{\text{sample}} < 0,9$	NEGATIVE

* Uncertain samples are recommended to be re-examined in two wells of the ELISA kit. If the results are again uncertain, a new sample should be selected and analyzed in 2-4 weeks. In case of repeated indeterminate results, such samples shall be considered negative.

11. PERFORMANCE CHARACTERISTICS

11.1. Analytical performance characteristics

Precision of measurement

Intra assay repeatability

The coefficient of variation (CV) for three sera with different levels of specific antibodies was evaluated in 24 replicates on one series of ELISA kits.

Sample No.	OD _{av}	IP _{av}	CV, %
669	0,927	2,81	4,8
544	1,503	4,56	1,4
666	1,694	5,14	4,5

Inter assay reproducibility

The coefficient of variation (CV) for three sera with different levels of specific antibodies was evaluated for 4 days in 4 sets of analysis, 8 replicates in each analysis.

Sample No.	OD _{av}	IP _{av}	CV, %
669	1,016	3,04	4,7
544	1,516	4,54	1,9
666	1,683	5,04	4,1

Analytical specificity

The test results are not affected by bilirubin at up to 0.21 mg/mL (361.8 µmol/L), haemoglobin at up to 10 mg/mL and triglycerides at up to 10 mg/mL (11.3 mmol/l) present in the sample.

11.2. Diagnostic characteristics

To evaluate diagnostic characteristics of «EQUI *Toxocara canis* IgG» ELISA kits, 78 serum samples from patients with clinical symptoms typical for toxocariasis and 60 serum samples from patients without clinical manifestations (seronegative in terms of *Toxocara canis*) were used. Clinical sensitivity of «EQUI *Toxocara canis* IgG» ELISA kits was 98.7 %, clinical specificity — 96.7 %.

Method characteristics in comparison with equal commercial ELISA kit was studied in target paediatric population (160 samples) and population of donors (298 samples). For paediatric population serum, relative specificity of «EQUI *Toxocara canis* IgG» ELISA kits was established at the level of 99.28 % and percent agreement was 97.45 %. For donor population serum, relative specificity of was 89.19 %, relative specificity — 93.55 % and percent agreement was 91.73 %.

12. LIMITATIONS OF ASSAY

Positive result in «EQUI *Toxocara canis* IgG» ELISA kit supports presence of anti-*Toxocara canis* specific IgG antibodies. Presence of this class antibodies in newborns is not an evidence of *Toxocara canis* invasion.

Inconclusive results may suggest a history of *Toxocara canis* invasion.

Negative result of «EQUI *Toxocara canis* IgG» ELISA kit supports the absence of anti-*Toxocara canis* specific IgG antibodies in the test sample or concentration of specific antibodies is below the sensitivity limit of the assay.

The results of serological test only are not the basis for final diagnosis. When establishing the diagnosis, the results of complex laboratory and instrumental tests, as well as clinical manifestations should be considered. Cross-reactions with antibodies to antigens of other helminths cannot be fully ruled out.

13. DIFFICULTIES THAT CAN OCCUR DURING THE ASSAY PROCEDURE

Possible reasons	Solution
<i>High background in all wells</i>	
Contaminated washer	Clean the washer head and rinse according to the instructions for use
Poor quality or contaminated water	Use purified water with specific resistance $\geq 10 \text{ M}\Omega \cdot \text{cm}$
Use of poorly washed glassware	Use chemically clean utensils
Use of chlorinated disinfectants	Do not use chlorine disinfectants
Use of contaminated tips	Use new tips
Increased incubation times or change in the temperature conditions	Adhere to the incubation regime according to the instructions for use
<i>High background in a row of wells</i>	
Repeat application of TMB solution	TMB solution should be applied once
Contamination of the automatic pipette nozzle with conjugate solution	Clean the pipette and dial carefully liquid
Contamination of one of the washer's channel	Clean the flush channel, rinse washer
<i>Received OD of the positive control is below the border value</i>	
One of the reagents (conjugate solution or TMB solution) was not prepared in a correct way or was not added	Re-conduct ELISA, pay attention to the correctness of the introduction of these reagents
Reduced incubation times at any stage	Incubate according to instructions for use
<i>The colour density of the wells fails to meet the obtained optical density value</i>	
This may suggest that the optical beam has been displaced	Check the correct operation of the reader

14. TECHNICAL ASSISTANCE AND CUSTOMER SERVICE

In case of technical problems, you can obtain assistance by contacting the manufacturer.

REFERENCES

1. Cobzaru R. G., Rîpă C. et al. Correlation between asthma and *Toxocara canis* infection // *Rev Med Chir Soc Med Nat Iasi*. - 2012. - Vol. 116(3). - P. 727–730.
2. Despommier D. *Toxocariasis: Clinical Aspects, Epidemiology, Medical Ecology, and Molecular Aspects* // *Clinical Microbiology Reviews*. - 2003. - Vol. 16, No. 2. - P. 265–272.
3. Havasiová-Reiterová K., Tomašovicová O. and Dubinský P. Effect of various doses of infective *Toxocara canis* and *Toxocara cati* eggs on the humoral response and distribution of larvae in mice // *Parasitology Research*. - 1995. - Vol. 81. - P. 13–17.
4. Iddawela D., Ehambaram K., and Bandara P. Prevalence of *Toxocara* antibodies among patients clinically suspected to have ocular toxocariasis: A retrospective descriptive study in Sri Lanka // *BMC Ophthalmology*. - 2017. - Vol. 17. - 6 p.
5. Maizels R. M. *Toxocara canis*: Molecular basis of immune recognition and evasion // *Veterinary Parasitology*. - 2013. - Vol. 193 (4). - P. 365–374.
6. Magnaval J.-F., Glickman L. T. et al. Highlights of human toxocariasis // *Korean Journal of Parasitology*. - 2001. - Vol. 39 (1). - P. 1–11.
7. McGuinness S. L., Leder K. Global Burden of Toxocariasis: A Common Neglected Infection of Poverty // *Current Tropical Medicine Reports*. - 2014. - Vol. 1 (1). - P. 52–61.
8. Núñez C. R., Mendoza Martínez G. D. et al. Prevalence and Risk Factors Associated with *Toxocara canis* Infection in Children // *The Scientific World Journal*. - Volume 2013. - Article ID 572089. - 4 p.
9. Okulewicz A., Perek-Matysiak A. et al. *Toxocara canis*, *Toxocara cati* and *Toxascaris leonina* in wild and domestic carnivores // *Helminthologia*. - 2012. - Vol. 49. - P. 3–10.
10. Regulation (EU) 2017/746 of the European Parliament and of the Council of 5 April 2017 on in vitro diagnostic medical devices and repealing Directive 98/79/EC and Commission Decision 2010/227/EU.
11. Закон України «Про відходи» // *Відомості Верховної Ради України*. - 1998. - №36-37.
12. Наказ МОЗ України №325 від 08.06.2015 «Про затвердження Державних санітарно-протиепідемічних правил і норм щодо поводження з медичними відходами».
13. Постанова КМУ від 02 жовтня 2013р. №754 «Про затвердження технічного регламенту щодо медичних виробів для діагностики in vitro».
14. Hanna Tolonen, Kari Kuulasmaa, Tiina Laatikainen, Hermann Wolf and the European Health Risk Monitoring Project. Recommendation for indicators, international collaboration, protocol and manual of operations for chronic disease risk factor surveys Part 4. Storage and transfer of serum/plasma samples// *Finnish National Public Health Institute 2002*// https://thl.fi/publications/ehrm/product2/part_iii4.htm
15. Surveillance Guidelines for Measles, Rubella and Congenital Rubella Syndrome in the WHO European Region. Annex 3. Collection, storage and shipment of specimens for laboratory diagnosis and interpretation of results// Geneva: World Health Organization; 2012 Dec.



Manufacturer



Authorized Representative in the European Community



In vitro diagnostic medical device



Catalogue number



Date of manufacture



Use by date



Batch code



Temperature limit



Contains sufficient for <n> tests



Caution



Non-Sterile



Consult instructions for use



Keep away from sunlight



Keep dry



Compliance with EU safety requirements

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ASSAY PROCEDURE SCHEME

Keep all reagents for 30 min at temperature 18-25°C before use

Dispense 90 µl [DIL|SAMPLE] into the wells
(brown)

Add to 10 µl of controls and samples into the wells:
A1 – [CONTROL|+], B1, C1, D1 – [CONTROL|-],
other wells – examined samples
(change of colour from brown to blue)

Cover strips with an adhesive film, incubate for **30 min at 37°C**

Rinse the wells 5 times with prepared 1:20 (1+19) washing solution TWEEN
(300 µl per well)

Add 100 µl of [SOLN|CONJ] into all wells
(green)

Cover strips with an adhesive film, incubate for **30 min at 37°C**

Rinse the wells 5 times with prepared 1:20 (1+19) washing solution TWEEN
(300 µl per well)

Add 100 µl of [SOLN|TMB] into all wells

Incubate for **30 min** in the dark at **18-25°C**

Add 100 µl of [SOLN|STOP] into all wells
(change of colour from blue to yellow)

Measure the optical density (OD) with an ELISA microplate reader at
450/620-695 nm

CALCULATION OF RESULTS

$$\bar{N}_c = (N_{c1} + N_{c2} + N_{c3})/3;$$

$$CO = \bar{N}_c + 0,3;$$

$$IP_{\text{sample}} = OD_{\text{sample}}/CO$$

\bar{N}_c - the average value of OD 3-x [CONTROL|-]

CO - Cut off

IP_{sample} - sample positivity index

INTERPRETATION OF RESULTS

$IP_{\text{sample}} > 1,1$	POSITIVE
$0,9 \leq IP_{\text{sample}} \leq 1,1$	BORDERLINE
$IP_{\text{sample}} < 0,9$	NEGATIVE