



KONFORMITÄTSERKLÄRUNG

DECLARATION OF CONFORMITY

Doc#100/07-2021

Wir / We

TECO Medical Instruments Production and Trading GmbH

Name des Herstellers / Manufacturer's name
Dieselstrasse 1, 84088 Neufahrn, Germany
Anschrift / Address

erklären in alleiniger Verantwortung, dass die unten gelisteten IVD Zubehör Produkte:
declare under our own responsibility, that the IVD accessories products, listed below:

Doppelküvette / <i>Double cuvette</i>	Ref. 19 000 02
Einzelküvette / <i>Single cuvette</i>	Ref. 20 000 02, 24 100 00
4-fach Küvette / <i>Cuvette 4 pos/ea</i>	Ref. 80 521 10
6-fach Küvette / <i>Cuvette 6 pos/ea</i>	Ref. 80 560 00
6-fach Küvette (micro) / <i>Cuvette 6 pos/ea (micro)</i>	Ref. 80 570 00

allen anwendbaren Anforderungen folgender Richtlinien entsprechen: *meet all applicable requirements of:*

1. Richtlinie 98/79/EG über In-vitro Diagnostika und ihrem Zubehör, klassifiziert gemäß Artikel 9 als: "alle anderen Produkte"- im Sinne von Zubehör zu In vitro Diagnostika gemäß Artikel 1.

1. Directive 98/79/EC on In-vitro diagnostic medical devices and their accessories, classified according to article 9 as: "all other products" – and in term of accessories for in vitro diagnostics according to article 1.

2. Richtlinie 2011/65/EU (RoHS III)

2. Directive 2011/65/EU (RoHS III)

Das QM-System des Herstellers ist zertifiziert nach:

The QM-system of the manufacturer is certified for:

EN ISO 13485:2016

EN ISO 13485:2016

Konformitätsbewertungsverfahren gemäß:

Conformity assessment procedure according to:

Gemäß Anhang III der Richtlinie 98/79/EG

According to Annex III of Directive 98/79/EC

Ort und Datum der Unterzeichnung:
Place and date of issue:

Neufahrn, 27.07.2021
Neufahrn, July 27, 2021

Matthias Dieckmann
General Manager





KONFORMITÄTSERKLÄRUNG

DECLARATION OF CONFORMITY

Doc#022/06-2014

Wir / We

TECO Medical Instruments Production and Trading GmbH

Name des Herstellers / Manufacturer's name

Dieselstrasse 1, D-84088 Neufahrn NB

Anschrift / Address

erklären in alleiniger Verantwortung, dass unsere im beigefügten Anhang (2 Seiten) spezifizierten Produkte wie folgt gemäß der Richtlinie für In-vitro-Diagnostika Medizinprodukte 98/79/EC klassifiziert sind:

declare under our own responsibility, that our products specified in the enclosed addendum (2 pages) classified as follows according to the directive on in vitro diagnostic medical devices 98/79/EC:

Übrige Produkte – Reagenzien für In-vitro-Diagnostika Other Products – Reagents for in vitro diagnostic

Allen anwendbaren Anforderungen der folgenden Richtlinien entsprechen: *Meet all applicable requirements of:*

Richtlinie 98/79/EG über In-vitro-Diagnostika
klassifiziert gemäß Artikel 9 als "alle anderen Produkte"

*Directive 98/79/EC on in-vitro-diagnostic medical devices
classified according to article 9 as „all other products“*

Das QM-System des Herstellers ist zertifiziert nach:

EN ISO 13485:2016

The QM-system of the manufacturer is certified for:

EN ISO 13485:2016

Die vorstehende Konformitätserklärung ist gültig für alle Chargen dieser Produkte, die nach dem Datum der Unterzeichnung in Verkehr gebracht wurden.

The above mentioned declaration of conformity is valid for all lots of this product, which are distributed after the date of signature.

Konformitätsbewertungsverfahren:

Conformity assessment procedure:

Gemäß Anhang III der Richtlinie 98/79/EG

According to Annex III of Directive 98/79/EC

Ort und Datum der Unterzeichnung:
Place and date of issue:

Neufahrn, 26.03.2019
Neufahrn, March 26, 2019


Christian Hötzel
General Manager



KONFORMITÄTSERKLÄRUNG – DECLARATION OF CONFORMITY

Übrige Produkte – Reagenzien für In-vitro-Diagnostika
Other products – Reagents for in vitro diagnostic

PT		
A0230-010	TEClot PT-S	5x2ml
A0230-040	TEClot PT-S	10x4ml
A0230-100	TEClot PT-S	10x10ml
A0260-020	TEClot PT-B Kit-20	Kit
A0260-050	TEClot PT-B Kit-50	Kit
PTT		
A0300-025	TEClot APTT-S, Kt-25	Kit
A0300-050	TEClot APTT-S, Kit-50	Kit
A0320-050	TEClot APTT-S	10x5ml
A0320-100	TEClot APTT-S	10x10ml
A0350-050	CaCl ₂ , 0,025M	10x5ml
A0350-100	CaCl ₂ , 0,025M	10x10ml
Fibrinogen		
A0501-010	TEClot FIB Kit-10	5x2ml
A0501-025	TEClot FIB Kit-25	5x5ml
A0511-020	TEClot FIB	10x2ml
A0511-050	TEClot FIB	10x5ml
A0590-125	IBS Buffer	1x125ml
TT		
A0401-020	TEClot TT	10x2ml
Protein S		
A0600-002	TEClot PS Kit	Kit
Lupus Anticoagulant		
A0700-020	TEClot LA Screen	10x2ml
A0800-010	TEClot LA Confirm	10x1ml
Factor V Leiden		
A0900-004	TEClot PCA Ratio Kit	Kit
Chromogenic Tests		
C1000-010	TEChrom AT (anti-Xa) Kit-10	Kit
C1010-020	TEChrom AT (anti-Xa) liquid	Kit
C1100-012	TEChrom PC Kit	Kit
Semiquantitative D-Dimer		
D2050-000	D-Dimer Agglutination Kit	Kit

KONFORMITÄTSERKLÄRUNG – DECLARATION OF CONFORMITY

Übrige Produkte – Reagenzien für In-vitro-Diagnostika
Other products – Reagents for in vitro diagnostic

Quantitative D-Dimer		
D2000-002	Dimex D-Dimer Kit-50	Kit
D2000-005	Dimex D-Dimer Kit-100	Kit
D2010-012	Red D-Dimer Kit	Kit
D2020-005	Blue D-Dimer LC Kit-65	Kit
D2020-010	Blue D-Dimer LC Kit-130	Kit
Control Plasma		
P6001-010	Tecontrol N	10x1ml
P6101-010	Tecontrol A	10x1ml
P6201-010	Tecontrol A+	10x1ml
P7100-005	TEControl LA positive	5x1ml
Reference Plasma		
P8001-010	TECal N	10x1ml
P8200-005	TECal DD	5x1ml
Deficient Plasma		
P5001-010	Deficient Plasma II	10x1ml
P5101-010	Deficient Plasma V	10x1ml
P5201-010	Deficient Plasma VII	10x1ml
P5301-010	Deficient Plasma VIII	10x1ml
P5401-010	Deficient Plasma IX	10x1ml
P5501-010	Deficient Plasma X	10x1ml
P5601-010	Deficient Plasma XI	10x1ml
P5701-010	Deficient Plasma XII	10x1ml



KONFORMITÄTSERKLÄRUNG DECLARATION OF CONFORMITY

Doc#200/08-2022

Hersteller / Manufacturer:

**TECO Medical Instruments
Production + Trading GmbH**

Adresse / Address:

Dieselstrasse 1, 84088 Neufahrn, Germany

Marktakteur / Actor ID SRN:

DE-MF-000022642 <https://ec.europa.eu>

Wir erklären hier für die im Anhang A (Seite 2 – 23 IVD Produkte) spezifizierten Produkte dass sie gemäß der Richtlinie für In-vitro-Diagnostika Medizinprodukte 98/79/EC klassifiziert sind als allgemeine IVD.

Diese Konformitätserklärung wird unter der alleinigen Verantwortung des Herstellers i.V.m. Artikel 110 Abs.3 und Abs.4 der Verordnung (EU) 2017/746 und des § 8 Abs.1 des Medizinprodukte-Durchführungsgesetzes, in der jeweils geltenden Fassung, ausgestellt.

Im Falle eigenmächtiger Veränderungen am Produkt oder der nicht bestimmungsgemäßen Verwendung verliert diese Erklärung ihre Gültigkeit.

We declare herewith for the products specified in Annex A (page 2 - 23 IVD products) that they are classified as general IVD according to the In Vitro Diagnostic Medical Devices Directive 98/79/EC.

This declaration of conformity is issued under the sole responsibility of the manufacturer in according to article 110 para.3 and para.4 of Regulation (EU) 217/746 and section 8 para.1 of the Medical Device Law Implementing Act.

In case of unauthorised modifications to the products or un-intended use, this declaration loses its validity.

Sie entsprechen den anwendbaren Anforderungen der Richtlinie:

They meet applicable requirements of:

Richtlinie 98/79/EG über In-vitro-Diagnostika
klassifiziert gemäß Artikel 9 als "alle anderen Produkte"

Directive 98/79/EC on in-vitro-diagnostic medical devices
classified according to article 9 as „all other products“

Die Qualitätssicherung entspricht den Anforderungen der
Richtlinie 98/79/EG über In-vitro-Diagnostika
für diese Art von Produkten.

The Quality Assurance is in accordance with the requirements
of Directive 98/79/EC on in-vitro-diagnostic medical devices
for those kind of products.

Der implementierte QM-Prozess entspricht der EN ISO 13485:2021

The implemented QM Process complies with EN ISO 13485:2021

Die vorstehende Konformitätserklärung ist gültig für alle Chargen
dieser Produkte, die nach dem Datum der Unterzeichnung in Verkehr
gebracht wurden.

The above mentioned declaration of conformity is valid for all lots
of this product, which are distributed after the date of signature.

Das Konformitätsbewertungsverfahren entspricht Anhang III
der Richtlinie 98/79/EG über In-vitro-Diagnostika
für diese Art von Produkten.

The conformity assessment procedure complies with Annex III
of Directive 98/79/EC on in-vitro-diagnostic medical devices
for those kind of products.

Ort und Datum der Unterzeichnung:
Place and date of issue:

Neufahrn, 2022-08-31


Christian Hötzi
Verantwortliche Person / PRRC

Doc#200/08-2022

KONFORMITÄTSERKLÄRUNG – DECLARATION OF CONFORMITY

Directive 98/79/EC Annex A

Übrige Produkte – Reagenzien für In-vitro-Diagnostika

Other products – Reagents for in vitro diagnostic – general IVD

Pos.	Article No	Tradename	Unit	Generic Device Term	EMDN / GMDN Code EUDAMED DI
1	A0230-040	TEClot PT-S (Quick)	10x4ml PT-S	Prothrombin time (quick test)	W0103020101 / 30539 B-PTS-A0230-040X7
2	A0230-100	TEClot PT-S (Quick)	10x10ml PT-S	Prothrombin time (quick test)	W0103020101 / 30539 B-PTS-A0230-100WY
3	A0260-050	TEClot PT-B (Owren)	5x10ml PT-B	Prothrombin time (quick test)	W0103020199 / 55986 B-PTB-A0260-050G2
4	A0320-050	TEClot APTT-S	10x5ml APTT-S	Activated partial thromboplastin time	W0103020102 / 55982 B-APTS-A0320-050AM
5	A0401-020	TEClot TT	10x2ml TT	Thrombin time / reptilase / batroxbin time	W0103020103 / 55988 B-TT-A0401-0207P
6	A0511-020	TEClot FIB	10x2ml FIB	Fibrinogen assays (factor i)	W0103020201 / 55997 B-FIB-A0511-020N2
7	A0511-050	TEClot FIB	10x5ml FIB	Fibrinogen assays (factor i)	W0103020201 / 55997 B-FIB-A0511-050NB
8	C1010-020	TEChrom AT	6x6ml reagent FXa 3x3 ml substrate	Antithrombin	W0103020602 / 56156 B-AT-C1010-020HL
9	D2010-012	Red D-Dimer	3x4ml latex 3x7ml reaction buffer	D-Dimer	W0103020503 / 47349 B-DD-D2010-0126W
10	D2020-005	Blue D-Dimer LC	1x5ml latex LC 1x7ml reaction buffer	D-Dimer	W0103020503 / 47349 B-DD-D2020-0057E
11	P8001-010	TECal N	10x1ml	Calibration plasma for haemostasis	W0103020701 / 45786 B-CAL-P8001-005X8
12	P8200-005	TECal DD	5x1ml	Calibration plasma for haemostasis	W0103020701 / 47348 B-CAL-P8200-005XX
13	P6001-010	TEControl N	10x1ml	Control plasma for haemostasis	W0103020702 / 30590 B-CTRL-P6001-010H7
14	P6101-010	TEControl A	10x1ml	Control plasma for haemostasis	W0103020702 / 30590 B-CTRL-P6101-010HQ
15	P6201-010	TEControl A Plus	10x1ml	Control plasma for haemostasis	W0103020702 / 30590 B-CTRL-P6201-010J9
16	P5001-010	TEClot Factor II	10x1ml	Coagulation factor ii (prothrombin)	W0103020202 / 30542 B-FAC-II-P5001-010ML
17	P5101-010	TEClot Factor V	10x1ml	Coagulation factor v	W0103020204 / 30544 B-FAC-V-P5101-010AN
18	P5201-010	TEClot Factor VII	10x1ml	Coagulation factor vii	W0103020205 / 30545 B-FAC-VII-P5201-0107B
19	P5301-010	TEClot Factor VIII	10x1ml	Coagulation factor viii	W0103020207 / 30547 B-FAC-VIII-P5301-01097
20	P5401-010	TEClot Factor IX	10x1ml	Coagulation factor ix	W0103020208 / 30548 B-FAC-IX-P5401-0106C
21	P5501-010	TEClot Factor X	10x1ml	Coagulation factor x	W0103020209 / 30549 B-FAC-X-P5501-010EQ
22	P5601-010	TEClot Factor XI	10x1ml	Coagulation factor xi	W0103020210 / 30551 B-FAC-XI-P5601-010A8
23	P5701-010	TEClot Factor XII	10x1ml	Coagulation factor xii	W0103020211 / 30552 B-FAC-XII-P5701-010CJ

(Recital 23 of Directive 98/79/EC on In Vitro Diagnostics Medical Devices) - Annex A - general IVD

TECO

MEDICAL INSTRUMENTS
PRODUCTION+TRADING GMBH

Dieselstraße 1

D-84088 Neufahrn N.B.

fon: +49-8773/707 80-0

fax: +49-8773/707 80-29

TO WHOM IT MAY CONCERN

To any governmental departments,
registration and/or trade offices in MOLDOVA

Distribution Authorisation Letter

This letter confirms that

Sanmedico
Mun. Chisinau
Str. Petricani 88/1 of. 10
Republica MOLDOVA

is the **legal, exclusive and sole** representative of **TECO Medical Instruments Production + Trading GmbH, Dieselstr. 1, 84088 Neufahrn NB, Germany**, for the territory of **MOLDOVA** only for all TECO products listed below. **Sanmedico** may participate in public and private tenders, providing sales to all TECO customers in the territory. We as manufacturer certify that our warranty is duly passed to the purchaser through **Sanmedico** for the price, delivery schedules and the specifications of the published literature, catalogues and fully covering the commodities offered.

Sanmedico will provide the following information to TECO GmbH when so required in relation to its market surveillance activities:

Reporting of incidents to TECO must take place within 3 working days

Serial number of the device, exact location of the device and the user.

Validity:

January 1st, 2023 to December 31st, 2024

Termination:

Confirmation ends automatically on Dec. 31st of 2024
and must be then renewed.

Products:

- | | |
|--|---|
| • Coatron M1 | Semi-automated 1-channel Coagulometer (out of production) |
| • Coatron M2 | Semi-automated 2-channel Coagulometer (out of production) |
| • Coatron X Eco | Semi-automated 1-channel Coagulometer |
| • Coatron X Pro | Semi-automated 2-channel Coagulometer |
| • Coatron X Top | Semi-automated 4-channel Coagulometer |
| • Coatron A4 | Fully automated Coagulometer, 4 optic channels |
| • Coatron A6 | Fully automated Coagulometer, 6 optic channels |
| • Coatron A6 plus | Fully automated Coagulometer, 6 optic channels |
| all instruments with complete accessory, consumables and spare parts | |
| • Hemostasis Reagents | Complete product line |

This document is signed in Neufahrn, Germany, on January 18th, 2023

TECO Medical Instruments Production+Trading GmbH

Christian Hoetzl





Quality Management

We are certified

Voluntary participation in regular monitoring according to ISO 9001:2008



TECO

MEDICAL INSTRUMENTS
PRODUCTION+TRADING GMBH

Dieselstraße 1

D-84088 Neufahrn N.B.

fon: +49-8773/707 80-0

fax: +49-8773/707 80-29

CERTIFICATE

for: **Mr. Vitalie Goreacii**

Company: **Sanmedico SRL**
Str. Petricani 88/1, oficiul 10
Chisinau - Rep. Moldova MD-2059
MOLDOVA

have participated with success at the intensive training session:

Application and technical training for following instruments:

- **Coatron X series**
 - **Installation**
 - **Application**
 - **General use, also in combination with TECAM Software**
 - **Technical and After Sales Service**

Supervisors: **Mr. Chr. Hoetzi and Mrs. Wendy Guo**

Place of Training: **TECO – Germany**

Date: **November 18th, 2019**



Christian Hoetzi
General Manager

Certificate of Approval

This is to certify that the Management System of:

TECO Medical Instruments, Production + Trading GmbH

Dieselstr. 1, 84088 Neufahrn, Germany

has been approved by LRQA to the following standards:

ISO 13485:2016

Approval number(s): ISO 13485 – 00038268

The scope of this approval is applicable to:

Design, development, manufacturing, storage and sales of coagulation instruments and in-vitro-diagnostic reagents used in the hemostaseology and coagulation.



Paul Graaf

Area Operations Manager, Europe

Issued by: LRQA Limited



0001

LRQA Group Limited, its affiliates and subsidiaries and their respective officers, employees or agents are, individually and collectively, referred to in this clause as 'LRQA'. LRQA assumes no responsibility and shall not be liable to any person for any loss, damage or expense caused by reliance on the information or advice in this document or howsoever provided, unless that person has signed a contract with the relevant LRQA entity for the provision of this information or advice and in that case any responsibility or liability is exclusively on the terms and conditions set out in that contract.

Issued by: LRQA Limited, 1 Trinity Park, Bickenhill Lane, Birmingham B37 7ES, United Kingdom



浙江东方基因生物制品股份有限公司
Zhejiang Orient Gene Biotech Co., LTD



CE-DOC-OG060
Version 1.0

EC Declaration of Conformity

In accordance with Directive 98/79/EC

Legal Manufacturer: *Zhejiang Orient Gene Biotech Co., Ltd*

Legal Manufacturer Address: *3787#, East Yangguang Avenue, Dipu Street,
Anji 313300, Huzhou, Zhejiang, China*

Declares, that the products
Product Name and Model(s)

Fecal Occult Blood Rapid Test Strip (Feces)	GEFOB-601b
Fecal Occult Blood Rapid Test Cassette (Feces)	GEFOB-602b

Classification: *Other*
Conformity assessment route: *Annex III (EC DECLARATION OF CONFORMITY)*

We, the Manufacturer, herewith declare with sole responsibility that our product/s mentioned above meet/s the provisions of the Directive 98/79/EC of the European Parliament and of the Council on In-Vitro Diagnostic Medical Devices.

We hereby explicitly appoint

EC Representative's Name: *Shanghai International Holding Corp. GmbH (Europe)*

EC Representative's Address: *Eiffestrasse 80, 20537 Hamburg, Germany*

to act as our European Authorized Representative as defined in the aforementioned Directive.

I, the undersigned, hereby declare that the medical devices specified above conform with the directive 98/79/EC on in vitro diagnostic medical devices and pertinent essential requirements

Date Signed: November 28, 2017

Name of authorized signatory: *Joyce Pang*
Position held in the company: *Vice-President*



Certificate

No. Q5 092305 0001 Rev. 01

Holder of Certificate: **Zhejiang Orient Gene Biotech Co., Ltd.**
3787#, East Yangguang Avenue, Dipu Street Anji
313300 Huzhou, Zhejiang
PEOPLE'S REPUBLIC OF CHINA

Certification Mark:



Scope of Certificate: **Design and Development, Production and Distribution of In Vitro Diagnostic Reagent and Instrument for the Detection of Drugs of Abuse, Fertility, Infectious Diseases, Oncology, Biochemistry, Cardiac Diseases, Allergic Disease based on Rapid Test, PCR and Liquid Biochip Method.**

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 092305 0001 Rev. 01

Report No.: SH2198802

Valid from: 2022-04-11

Valid until: 2024-03-16

Date, 2022-04-11

Christoph Dicks

Head of Certification/Notified Body

Certificate

No. Q5 092305 0001 Rev. 01

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):

Zhejiang Orient Gene Biotech Co., Ltd.
3787#, East Yangguang Avenue, Dipu Street Anji, 313300
Huzhou, Zhejiang, PEOPLE'S REPUBLIC OF CHINA

See Scope of Certificate



浙江东方基因生物制品股份有限公司
Zhejiang Orient Gene Biotech Co.,LTD

STATEMENT

We, Zhejiang Orient Gene Biotech Co., Ltd , having a registered office at 3787#, East Yangguang Avenue, Dipu Street Anji 313300, Huzhou, Zhejiang, China assign SRL SANMEDICO having a registered office at A. Corobceanu street 7A, apt. 9, Chişinău MD-2012, Moldova, as non-exclusive authorized representative for Orient Gene Brand product 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.

This Statement letter will be valid from Feb.21th,2023 to Feb.20th, 2024.

Zhejiang Orient Gene Biotech Co., Ltd

General Manager:

Date:2023/2/21



[Handwritten signature in blue ink]

地址：浙江省湖州市安吉县递铺镇阳光大道东段 3787 号
Add: 3787#, East Yangguang Avenue, Dipu Street Anji 313300, Huzhou, Zhejiang, China
电话 Tel:+86-572-5226111 传真 Fax: +86-572-5226222 邮编 P.C.:313300

Fecal Occult Blood Rapid Test Cassette (Feces)



INTENDED USE

Fecal Occult Blood Rapid Test Cassette (Feces) is a rapid chromatographic immunoassay for the qualitative detection of human occult blood in feces by professional laboratories or physician's offices. It is useful to detect bleeding caused by a number of gastrointestinal disorders, e.g., diverticulitis, colitis, polyps, and colorectal cancer.

Fecal Occult Blood Rapid Test Cassette (Feces) is recommended for use in 1) routine physical examinations, 2) hospital monitoring for bleeding in patients, and 3) screening for colorectal cancer or gastrointestinal bleeding from any source.

INTRODUCTION

Most of diseases can cause hidden blood in the stool. In the early stages, gastrointestinal problems such as colon cancer, ulcers, polyps, colitis, diverticulitis, and fissures may not show any visible symptoms, only occult blood. Traditional guaiac-based method lacks sensitivity and specificity, and has diet-restriction prior to the testing.

Fecal Occult Blood Rapid Test Cassette (Feces) is a rapid test to qualitatively detect low levels of fecal occult blood in feces. The test uses double antibody-sandwich assay to selectively detect as low as 50 ng/mL of hemoglobin or 6 µg hemoglobin/g feces. In addition, unlike the guaiac assays, the accuracy of the test is not affected by the diet of the patients.

PRINCIPLE

Fecal Occult Blood Rapid Test Cassette (Feces) is a lateral flow chromatographic immunoassay based on the principle of the double antibody-sandwich technique. The membrane is pre-coated with anti-hemoglobin antibodies on the test line region of the device. During testing, the specimen reacts with the colloidal gold coated with anti-hemoglobin antibodies. The mixture migrates upward on the membrane chromatographically by capillary action to react with anti-hemoglobin antibodies on the membrane and generate a colored line. The presence of this colored line in the test region indicates a positive result, while its absence indicates a negative result. To serve as a procedural control, a colored line will always appear in the control line region indicating that proper volume of specimen has been added and membrane wicking has occurred.

MATERIALS PROVIDED

20 Test cassettes
20 Specimen collection tubes with buffer
1 Package insert

MATERIALS REQUIRED BUT NOT PROVIDED

1. Specimen collection containers 2. Clock or timer

STORAGE AND STABILITY

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

PRECAUTIONS

1. For professional *in vitro* diagnostic use only.
2. This package insert must be read completely before performing the test. Failure to follow the insert gives inaccurate test results.
3. Do not use it if the tube/pouch is damaged or broken.
4. Test is for single use only. Do not re-use under any circumstances.
5. **Do not use specimen with visible blood for the testing.**
6. Handle all specimens as if they contain infectious agents. Observe established standard procedure for proper disposal of specimens.
7. Specimen extraction buffer contains Sodium Azide (0.1%). Avoid contact with skin or eyes. Do not ingest.
8. Wear protective clothing such as laboratory coats, disposable gloves and eye protection when specimens are assayed.
9. Humidity and temperature can adversely affect results.
10. Do not perform the test in a room with strong air flow, i.e. electric fan or strong air conditioning.

PATIENT PREPARATION

1. A specimen should not be collected from a patient with following conditions that may interfere with the test results:

- Menstrual bleeding
 - Bleeding hemorrhoids
 - Constipating bleeding
 - Urinary bleeding.
2. Dietary restrictions are not necessary.
 3. Alcohol and certain medications such as aspirin, indomethacin, phenylbutazone, reserpine, corticosteroids, and nonsteroidal anti-inflammatory drugs may cause gastrointestinal irritation and subsequent bleeding, thus gives positive reactions. On the advice of the physician, such substances should be discontinued at least 48 hours prior to testing.

SPECIMEN COLLECTION AND PREPARATION

Consider any materials of human origin as infectious and handle them using standard biosafety procedures.

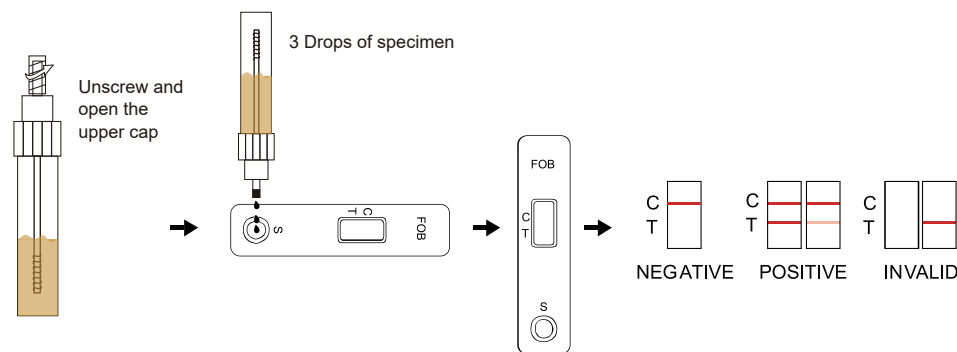
1. Collect a random sample of feces in a clean, dry receptacle.
2. Unscrew the top of the collection tube and remove the applicator stick.
3. Randomly pierce the fecal specimen in at least five (5) different sites.
4. Remove excess sample off the shaft and outer grooves. Be sure sample remains on inside grooves.
5. Replace the stick in the tube and tighten securely.
6. Shake the specimen collection bottle so that there is proper homogenisation of feces in buffer solution.

Note: Specimens prepared in the specimen collection tube may be stored at room temperature (15-30°C) for 3 days maximum, at 2-8°C for 7 days maximum or at -20°C for 3 months maximum if not tested within 1 hour after preparation.

TEST PROCEDURE

Allow the test cassette, specimen, and/or controls to reach room temperature (15-30°C) prior to testing.

1. Remove the test cassette from the foil pouch and use it as soon as possible. Best results will be obtained if the assay is performed within one hour.
2. Place the test cassette on a clean, flat surface.
3. Shake the specimen collection tube several times.
4. Hold the specimen collection tube upright and then unscrew and open the upper cap.
5. Squeeze 3 drops (~90 µL) of the sample solution in the sample well of the cassette and start the timer.
6. Wait for the colored line(s) to appear. Read results in 5 minutes. Do not interpret the result after 5 minutes.



INTERPRETATION OF RESULTS

(Please refer to the illustration above)

Positive: Two lines appear. One colored line should be in the control line region (C) and another apparent colored line should be in the test line region (T).

Negative: One colored line appears in the control line region (C). No line appears in the test line region (T).

Invalid: Control line fails to appear. The test should be repeated using a new cassette. If the problem persists, discontinue using the test kit immediately and contact your local distributor.

NOTE:

1. The intensity of color in the test region (T) may vary depending on the concentration of analytes present in the specimen. Therefore, any shade of color in the test region should be considered positive. Note that this is a qualitative test only, and

Fecal Occult Blood Rapid Test Cassette (Feces)

cannot determine the concentration of analytes in the specimen.

2. Insufficient specimen volume, incorrect operating procedure or expired tests are the most likely reasons for control band failure.

QUALITY CONTROL

An internal procedural control is included in the test. A colored line appearing in the control line region (C) is an internal procedural control. It confirms sufficient specimen volume, adequate membrane wicking and correct procedural technique. Control standards are not supplied with this kit; however it is recommended that positive and negative controls be tested as a good laboratory practice to confirm the test procedure and to verify proper test performance.

LIMITATIONS

1. This test kit is to be used for the qualitative detection of human hemoglobin in fecal samples. A positive result suggests the presence of human hemoglobin in fecal samples. In addition to intestinal bleeding the presence of blood in stools may have other causes such as hemorrhoids, blood in urine etc.
2. Not all colorectal bleedings are due to precancerous or cancerous polyps. The information obtained by this test should be used in conjunction with other clinical findings and testing methods, such as colonoscopy gathered by the physician.
3. Negative results do not exclude bleeding since some polyps and colorectal region cancers can bleed intermittently or not at all. Additionally, blood may not be uniformly distributed in fecal samples. Colorectal polyps at an early stage may not bleed.
4. Urine and excessive dilution of sample with water from toilet bowl may cause erroneous test results. The use of a receptacle is recommended.
5. Feces specimens should not collect during the menstrual period and not three day before or afterwards, at bleeding due to constipation, bleeding haemorrhoids, or at taking rectally administered medication. It could cause false positive results.
6. This test may be less sensitive for detecting upper g.i. Bleeding because blood degrades as it passes through the g.i. Track.
7. The Fecal Occult Blood Rapid Test Cassette (Feces) is to aid indagnosis and is not intended to replace other diagnostic procedures such as G.I. fibroscope, endoscopy, colonoscopy, or X-ray analysis. Test results should not be deemed conclusive with respect to the presence or absence of gastrointestinal bleeding or pathology. A positive result should be followed up with additional diagnostic procedures to determine the exact cause and source for the occult blood in the feces.

PERFORMANCE CHARACTERISTICS

1. Sensitivity:

Fecal Occult Blood Rapid Test Cassette (Feces) can detect the levels of human occult blood as low as 50 ng/mL hemoglobin or 6 µg hemoglobin/g feces.

2. Prozone Effect:

It is observed that this FOB test can detect 2 mg/mL hemoglobin.

3. Specificity:










Fecal Occult Blood Rapid Test Cassette (Feces) is specific to human hemoglobin. Specimen containing the following substances at the standard concentration was tested on both positive and negative controls and showed no effects on test results at standards concentration.

Substances	Concentrations (Diluted with the extraction buffer)
Beef hemoglobin	2 mg/mL
Chicken hemoglobin	0.5 mg/mL
Pig hemoglobin	0.5 mg/mL
Goat hemoglobin	0.5 mg/mL
Horse hemoglobin	20 mg/mL
Rabbit hemoglobin	0.06 mg/mL

REFERENCES

1. Simon J.B. Occult Blood Screening for Colorectal Carcinoma: A Critical Review, Gastroenterology, Vol. 1985;88:820.
2. Blebea J. and Ncpherson RA. False-Positive Guaiac Testing With Iodine, Arch Pathol Lab Med, 1985;109:437-40.

INDEX OF SYMBOLS

	Consult instructions for use		Tests per kit		Authorized Representative
	For <i>in vitro</i> diagnostic use only		Use by		Do not reuse
	Store between 2~30°C		Lot Number		Catalog#



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