Australia | Canada | China | Japan | The Netherlands | United States

E M E R G O 🥑 E U R O P E

24 March 2009

Mr. Jeff Wang LumiQuick Diagnostics, Inc. 2946 Scott Blvd. Santa Clara, CA 95054

Dear Mr.Jeff Wang:

I am writing to inform you that today, we have notified by registered mail the Competent Authority in the following countries:

Austria	Bulgaria	Cyprus	Czech Republic	Denmark	Estonia
Finland	France	Germany	Greece	Hungary	lceland
Ireland	Italy	Latvia	Liechtenstein	Lithuania	Luxembourg
Malta	The Netherlan	lds	Norway	Poland	Portugal
Romania	Slovakia	Slovenia	Spain	Sweden	Switzerland
United Kingdo	m				

With this notification, LumiQuick Diagnostics, Inc. has met the requirements of the In-vitro Diagnostics Directive, 98/79/EC for the following devices:

- Adeno/Rota Virus
- Cardiac Marker
- Dengue IgG/IgM Combo (registered only in Italy and The Netherlands)
- Drugs of Abuse
- Fecal Occult Blood (registered only in Italy and The Netherlands)
- H. Pylori Ab/Ag
- HCG
- Legionella (registered only in Italy and The Netherlands)
- LH (registered only in Italy and The Netherlands)
- Strep A (registered only in Italy and The Netherlands)

As of today and without any further notice from the respective Competent Authorities, LumiQuick Diagnostics, Inc. can consider the respective devices and Authorized Representative as officially registered.

If you have any questions, please do not hesitate to contact me.

Yours sincerely,

Rene van de Zande President & CEO Emergo Europe



EmergoEurope.com



Declaration of Conformity

PRODUCT IDENTIFICATION	1	
Product name		Model/number
Infectious diseases HIV I&II Test Strip HIV I&II Test Card HCV Antibody Test Card HBsAg Test Card		71001 71002 71030 71004
MANUFACTURER		
Name of company	Address	Representative
LumiQuick Diagnostics, Inc.	2946 Scott Blvd. Santa Clara, CA 95054 USA	Jeff C. Wang
AUTHORIZED REPRESENTATIVE		
Name of company	Address	Telephone/email
Emergo Europe	Molenstraat 15 2513 BH The Hague, Netherlands	+31.70.345.8570 - phone +31.70.346.7299 - fax service@emergogroup.com
CONFORMITY ASSESSMENT		
Device classification	Route to compliance	Standards applied
Class: Self-Certify		ISO 13485:2003

LumiQuick Diagnostics, Inc. declares that the above mentioned products meet the provision of the Council Directive 98/79/EC for In Vitro Diagnostic Medical Devices and Directive 98/79/EC as transposed in the national laws of the Member States.

COMPANY REPRESENTATIVE: Jeff C. Wang

TITLE: Quality Systems Manager

SIGNATURE:

2017.02.23 1:59:53 -08'00'

DATE: 23/02/2017





Certificate of Registration

QUALITY MANAGEMENT SYSTEM - ISO 13485:2016

This is to certify that:

LumiQuick Diagnostics, Inc. 2946 Scott Blvd Santa Clara California 95054 USA

Holds Certificate No:

FM 574919

and operates a Quality Management System which complies with the requirements of ISO 13485:2016 for the following scope:

The design, development, manufacture and distribution of in vitro diagnostics test kits and reagents used in the diagnosis and management of disease status, including Infectious Diseases tests, Drugs of Abuse tests, Cardiac Monitor tests, Cancer Marker tests, Fertility Hormone tests, ELISA tests & Urine Chemistry tests.

jan CS

For and on behalf of BSI:

Gary E Slack, Senior Vice President - Medical Devices

Original Registration Date: 2011-10-20 Latest Revision Date: 2020-08-31

bsi.



Effective Date: 2020-10-20 Expiry Date: 2023-10-19

Page: 1 of 1

...making excellence a habit."

This certificate remains the property of BSI and shall be returned immediately upon request. An electronic certificate can be authenticated <u>online</u>. Printed copies can be validated at www.bsigroup.com/ClientDirectory To be read in conjunction with the scope above or the attached appendix.

Americas Headquarters: BSI Group America Inc., 12950 Worldgate Drive, Suite 800, Herndon, VA 20170-6007 USA A Member of the BSI Group of Companies.



LETTER OF AUTHORIZATION

We, LumiQuick Diagnostics, Inc., having a registered office at 2946 Scott Blvd, Santa Clara, CA 95054, USA assign SRL SANMEDICO, having a registered office at A. Corobceanu street 7A, apt. 9, Chişinău MD-2012, Moldova, as our 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.

This letter is valid through December 31, 2023 and will automatically renewed upon the agreement of both companies. Should you have questions, please contact us.

Best regards,

Charles Yu

President

Date: January 19, 2022



Quick PROFILE[™] HBV-5 PANEL TEST

(HBsAg, HBsAb, HBeAg, HBeAb, HBcAb-IgG)

FOR THE QUALITATIVE ASSESSMENT OF THE MARKERS OF HEPATITIS B VIRUS INFECTION IN HUMAN SERUM, PLASMA OR WHOLE BLOOD

For In Vitro Diagnostic Use Only



INTENDED USE

Quick Profile[™] HBV-5 Panel Test (HBsAg, HBsAb, HBeAg, HBeAb, HBcAb-IgG), is a rapid immunochromatography assay for the qualitative detection of the markers of Hepatitis B virus including Hepatitis B virus surface antigen (HBsAg), Hepatitis B virus surface antibody (anti-HBs/HBsAb), Hepatatis B virus envelope antigen (HBeAg), Hepatatis B virus envelope antibody (HBeAb/anti-HBe) and Hepatatis B virus core antibody IgG (HBcAb-IgG) in human serum, plasma or whole blood specimens. It is intended for use in medical institution as an aid for diagnosis and management of patients related to infection with hepatitis B as well for screening of blood donors or blood products.

SUMMARY

Hepatitis B virus (HBV) is an enveloped; double- stranded DNA virus belonging to the Hepadnaviridae family and is recognized as the major cause of blood transmitted hepatitis together with hepatitis C virus (HCV). Infection with HBV induces acute or chronic liver diseases and in some cases that can lead to cirrhosis and carcinoma of the liver. Hepatitis B surface antigen or HBsAg, which was previously described as Australia antigen is the most important protein of the envelope of Hepatitis B Virus. The surface antigen contains the determinant "a", common to all known viral subtypes, immunologically distinguished in two distinct subgroups (ay and ad). HBV has 10 major serotypes and four HBsAg subtypes have been recognized (*adw, ady, ayw,* and *ayr*). HBsAg can be detected 2 to 4 weeks before the ALT levels become abnormal and 3 to 5 weeks before symptoms develop.

TEST PRINCIPLE

HBsAg test is a double antibody sandwich immunoassay. Colloidal gold conjugated anti-HBsAg antibody complexes are dry-immobilized in the test device. When the sample is added, it migrates by capillary diffusion through the strip rehydrating the gold conjugate complexes. If present, HBsAg will react with the gold conjugate complexes forming particles. These particles will continue to migrate along the strip until the Test Zone (T) where they are captured by anti-HBsAg antibodies immobilized there and a visible red line appears. If there is no HBsAg in sample, no red line will appear in the Test Zone (T). The gold conjugate complexes will continue to migrate along the strip until the Test alone until they are captured in the Control Zone (C) by immobilized goat anti-mouse IgG antibody aggregating a red line, which indicates the validity of the test.

HBsAb test is a double antigen sandwich immunoassay. Colloidal gold conjugated HBsAg complexes are dry-inmobilized in the test device. When the sample is added, it migrates by capillary diffusion through the strip rehydrating the gold conjugate complexes. If present, HBsAb will react with the gold conjugate complexes forming particles. These particles will continue to migrate along the strip until the Test Zone (T) where they are captured by HBsAg immobilized there and a visible red line appears. If there is no HBsAb in sample, no red line will appear in the

Test Zone (T). The gold conjugate complexes will continue to migrate alone until they are captured in the Control Zone (C) by immobilized goat anti-HBsAg antibody aggregating a red line, which indicates the validity of the test.

HBeAg test is a double antibody sandwich immunoassay. Colloidal gold conjugated anti-HBeAg antibody complexes are dry-immobilized in the test device. When the sample is added, it migrates by capillary diffusion through the strip rehydrating the gold conjugate complexes. If present, HBeAg will react with the gold conjugate complexes forming particles. These particles will continue to migrate along the strip until the Test Zone (T) where they are captured by anti-HBeAg antibodies immobilized there and a visible red line appears. If there is no HBeAg in sample, no red line will appear in the Test Zone (T). The gold conjugate complexes will continue to migrate alone until they are captured in the Control Zone (C) by immobilized goat anti-mouse IgG antibody aggregating a red line, which indicates the validity of the test.

HBeAb test is a competitive immunoassay. Colloidal gold conjugated anti-HBeAg antibody complexes are dry-immobilized in the test device. When the specimen is added, it migrates with the gold conjugate complexes by capillary diffusion through the strip. If present, HBeAb will compete with gold conjugate complexes for the limited amount HBeAg immobilized in the Test Zone (T). It will prevent the gold conjugate complexes from reacting with HBeAg and no red line appears in the Test Zone (T). If there is no HBeAb in the specimens, gold conjugate complexes will react with HBeAg and a visible red line appears. To serve as a procedural control, a red line will always appears in the Control Zone (C) which indicates the validity of the test.

HBcAb-IgG test utilizes the principle of Immuno-chromatography. Mouse anti-human IgG antibodies are immobilized on the nitrocellulose membrane test lines zone. As the test sample flows through the membrane within the test device, the colored–HBcAg specific recombinant antigen-colloidal gold conjugate complexes with specific IgG antibodies of HBcAg, if present in the sample. This complex moves further on the membrane to the test region where it is captured by the anti-human IgG antibodies coated on the membrane leading to formation of a colored band, which indicates a positive test results. Absence of this colored band in the test window indicates a negative test result. A built-in control line will always appear in the test window when the test has performed properly, regardless of the presence or absence of anti-HBcAg IgG antibodies in the specimen.

MATERIAL PROVIDED

- 1. Quick Profile™ HBV Panel Test (HBsAg, HBsAb, HBeAg, HBeAb, HBcAb-IgG)
- 2. Instructions for use
- 3. Disposable transfer pipet

MATERIALS REQUIRED BUT NOT SUPPLIED

- 1. Whole blood or plasma: Vacutainer tube, or other appropriate tube, containing heparin or EDTA as an anticoagulant
- 2. Serum: Vacutainer tube, or other appropriate tube, without anticoagulant
- 3. Timer or clock

STORAGE

Store the test device at 4 to 30°C. Do Not Freeze.

PRECAUTIONS

- 1. For in vitro diagnostic use only.
- 2. Do not use product beyond the expiration date.
- 3. Handle all specimens as potentially infectious.

SPECIMEN COLLECTION AND PREPARATION

- 1. The serum, plasma or whole blood specimen should be collected under standard laboratory conditions.
- 2. Heat inactivation of specimens, which may cause hemolysis and protein denaturation, should be avoided.
- 3. Patient samples performed best when tested immediately after collection. If specimans are to be stored, the red blood cells should be removed to avoid hemolysis. If the sample cannot be tested within 24 hours, serum or plasma should be frozen until the test can be performed. Whole blood samples should be refrigerated at 2–8°C in stead of being frozen. Allow sample to reach room temperature before proceeding.
- 4. Sodium azide can be added as a preservative up to 0.1% without affecting the test results.

PROCEDURE

- 1. Bring all materials and specimens to room temperature.
- 2. Remove the test device from the sealed foil pouch.
- 3. Place the test device on a flat horizontal surface and label the test device with specimen identity.
- 4 Using the transfer pipet to draw up the sample, dispense 2 drops (80-100 µl) of sample in a vertical position into the each sample well individually.
- 5. Read the result at 20 minutes after adding the sample.

Note: Results read after 30 minutes may not be accurate.

INTERPRETATION OF RESULTS

	HBsAg, HBsAb, HBeAg, HBcAb-IgG				
					Positive
de 1			C	Two colored bands appear within 20 minutes. One colored band appears in the Control Zone (C) and another colored band appears in the Test Zone (T). The test result is positive and valid. No matter how faint the colored band appears in the Test Zone (T), the test result should be considered as positive result.	
ŏ					Negative
Σ	Posi	Neg	Inva	Inva	One colored bands appears in the Control Zone (C) within 20 minutes. No colored band appears in the Test Zone (T). The test result is negative and valid.
	tive	ativ	lid	lid	Invalid
	CD	/e			No colored band appears in the Control Zone (C) within 20
					minutes. The test result is invalid. Repeat the test with a new test device.
	HBeA	b			
				Positive	
5				One colored bands appears in the Control Zone (C) within 20 minutes. No colored band appears in the Test Zone (T). The test result is positive and valid. If a very faint colored band appears in the Test Zone (T), the test result should be considered as positive result.	
p			Т	Negative	
10		Two colored bands appear within 20 minutes. One colored			
2	Pos	Neg	Inva	Inva	band appears in the Control Zone (C) and another colored band appears in the Test Zone (T). The test result is negative and valid.
	itiv	ativ	lid	lid	Invalid
	CD	è			No colored band appears in the Control Zone (C) within 20

PERFORMANCE CHARACTERISTICS:

In a clinical evaluation of the performance of Quick Profile™ HBV Panel Test, using 1249 ELISA confirmed samples, the positive agreement, negative agreement and the overall accuracy of each HBV analyte are summarized as the table.

ltem	Positive Agreement (%)	Negative Agreement (%)	Accuracy (%)
HBsAg	99.6 (467/469)	99.6 (777/780)	99.6 (1244/1249)
Anti-HBs	97.6 (522/535)	98.2 (701/714)	97.9 (1223/1249)
Anti-HBc	97.1 (642/661)	97.8 (575/588)	97.4 (1217/1249)
HBeAg	99.4 (159/160)	99.6 (1085/1089)	99.6 (1244/1249)
Anti-HBe	96.9 (372/384)	98.8 (855/865)	98.2 (1227/1249)

LIMITATIONS

- 1. Negative results do not rule out the possibility of hepatitis B virus exposure or infection. Infection through recent exposure to HBV may not be detectable.
- 2. A test giving an invalid result should be repeated.
- 3. HBV panel test is a qualitative assay. The line intensity cannot be assumed to correlate with quantitative levels.

BIBLIOGRAPHY

- Sehulster, L. et al. Immunological and biophysical alteration of Hepatitis B virus antigens by sodium hypochlorite disinfection, Appl. And Envir. Microbiol., 42:762-767, 1981.
- U. S. Department of Health and Human Services. Biosafety in microbilogical and biomedical laboratories. HHS Publication(NIH) 88-8395. Washington: U.S. Government Printing Office, May 1988.

∠ 30°C





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Movies available at YouTube

You Tube : www.youtube.com/lumiquick



Quick PROFILE™ HCV ANTIBODY TEST

FOR THE QUALITATIVE ASSESSMENT OF HCV ANTIBODY IN HUMAN SERUM, PLASMA OR WHOLE BLOOD

REF	71027	HCV Test Strip
REF	71030	HCV Test Card

For In Vitro Diagnostic Use Only

INTENDED USE

QuickProfile [™] HCV Ab Test is a chromatographic immunoassay for qualitative detection of the antibodies against hepatitis C virus (HCV Ab) in human serum, plasma or whole blood samples. It is intended for professional use as an aid for diagnosis and management of patients related to infection with hepatitis C as well for primary screening of blood from volunteer donors.

SUMMARY

Hepatitis C virus (HCV) is an envelope, single stranded positive sense RNA (9.5 kb) virus belonging to the family of Flaviviridae. Six major genotypes and series of subtypes of HCV have been identified. Isolated in 1989, HCV is now recognized as the major cause for transfusion associated non-A, non-B hepatitis. The disease is characterized with acute and chronic form. More than 50% of the infected individuals develop severe, life threatening chronic hepatitis with liver cirrhosis and hepatocellular carcinomas. Since the introduction in 1990 of anti-HCV screening of blood donations, the incidence of this infection in transfusion recipients has been significantly reduced. Clinical studies show that significant amount of HCV infected individuals develop antibodies to NS5 non-structural protein of the virus. For this, the third generation tests include antigens from the NS5 region of the viral genome in addition to NS3 (c200), NS4 (c200) and the Core (c22). Third generation tests have improved sensitivity and shorten the time between infection with HCV and the appearance of detectable antibodies (window period) to 60 days.

TEST PRINCIPLE

QuickProfile [™] HCV Ab Test employs a chromatographic lateral flow device in a strip or cassette format. Recombinant HCV antigens are immobilized at the Test Zone (T) and goat anti mouse IgG antibodies are immobilized at the Control Zone (C) on the nitrocellulose membrane. When the sample is added, it migrates by capillary diffusion and rehydrating the colloidal gold conjugated recombinant HCV antigens (Au-Ag) dried onto the fiberglass strip. If present in sample, HCV antibodies will bind the gold conjugated antigens forming complexes. These complexes will continue to migrate along the strip until the Test Zone (T) zone where they are captured by the HCV antigens to form a visible red line. The colloidal gold-mouse IgG is used as the indictor for control line. A red line formed by gold-mouse IgG and goat anti-mouse IgG at the Control Zone (C) indicates the validity of the test.

MATERIAL PROVIDED

- 1. QuickProfile™ HCV Ab Test
- 2. Sample buffer
- 3. Instructions for use

MATERIALS REQUIRED BUT NOT PROVIDED

Clock or timer Specimen collection container Centrifuge Biohazard waste container

STORAGE

The sealed pouches in the test kit may be stored between 4-30°C for the duration of the shelf life as indicated on the pouch. The test must be used immediately after being removed from the sealed pouch.

DCR 15-07871027+710305089 E1R101/06/2016

PRECAUTIONS

- 1. This kit is for in vitro diagnostic use only.
- 2. This kit is for PROFESSIONAL use only.
- 3. Read the instructions carefully before performing the test.
- 4. This product does not contain any human source materials.
- 5. Do not use kit contents after the expiration date.
- 6. Handle all specimens as potentially infectious.
- 7. Follow standard Lab procedure and biosafety guidelines for handling and disposal of potentially infective material. When the assay procedure is completed, dispose of specimens after autoclaving them at 121° C for at least 20 min. Alternatively, they can be treated with 0.5% Sodium Hypochlorite for 1-2 hours before disposal.
- 8. Do not pipette reagent by mouth and do not no smoke, eat or drink while performing assays.
- 9. Wear gloves during the whole procedure.

SPECIMEN COLLECTION AND PREPARATION

Fresh serum, plasma or whole blood samples can be used for this assay. Blood collected by venipuncture should be allowed to clot naturally and completely – the serum/plasma must be separated from the clot as early as possible as to avoid hemolysis of the red blood cell. Care should be taken to ensure that the serum samples are clear and not contaminated by microorganisms. Any visible particulate matter in the sample should be removed by centrifugation at 3000 RPM for at least 20 minutes at room temperature, or by filtration with 0.22u filters. Plasma samples collected into EDTA, sodium citrate or heparin may be tested, but highly lipaemic, icteric, or hemolized samples should not be used as they could give erroneous results in the assay. Do not inactivate samples by heat. This can cause deterioration of the target proteins in the sample.

ASSAY PROCEDURE

For HCV Test Strip (Catalog Number: 71027)

- 1. Allow the test strip and sample to reach room temperature if necessary.
- 2. Open the pouch, Take out the test strip and transfer pipet.
- 3. Using the transfer pipet to draw up the sample, dispense one drop (approx 40µl) specimen to the sample pad as shown in the illustration, and wait for a few seconds until the sample is completely absorbed by sample pad.
- 4. Add one drop (approx 40µl) sample buffer to the sample pad as shown in the illustration.
- 5. Read the results at 20 minutes.



For HCV Test Card (Catalog Number: 71030)

- 1. Allow the test card and sample to reach room temperature if necessary.
- 2. Open the pouch, Take out the test card and transfer pipet...
- Using the transfer pipet to draw up the sample, dispense one drop (approximately 40μl) of specimen to the sample well marked as "S" and wait for a few seconds until the sample is completely absorbed by sample pad.
- 4. Add one drop (approx. 40 µl) sample buffer into the sample well marked as "S".
- 5. Read the results at 20 minutes.



Some positive samples may show positive results before 20 minutes. Results after 30 minutes may not be accurate.

INTERPRETATION OF RESULTS



QUALITY CONTROL

- 1. The control band is an internal reagent for procedural control. It will appear if the test has been performed correctly and the reagents are reactive.
- 2. Good Laboratory Practice recommends the daily use of control materials to validate the reliability of the device. Control materials are not provided with this test kit but may be commercially available.

LIMITATIONS

- 1. The test is for in vitro diagnostic use only.
- 2. Negative results do not rule out the possibility of hepatitis C exposure or infection. Infection through recent exposure to HCV may not be detectable.
- 3. The positive result obtained with QuickProfile[™] HCV Ab Test alone cannot be the final diagnosis of hepatitis C infection. As in the case of all diagnostic tests, a definitive clinical diagnosis should not be based on the result of a single test but should rather be made after all the clinical findings have been evaluated.
- 4. This test is intended ONLY for testing of individual serum, plasma or whole blood samples. DO NOT use it for testing of other body fluids or pooled blood samples.
- 5. The test is for qualitative detection of anti-HCV antibody in human serum, plasma or blood sample and does not indicate the quantity of the antibodies.

PERFORMANCE CHARACTERISTICS:

1. Accuracy

In clinical evaluation of the QuickProfile[™] HCV Ab Test, 727 confirmed negative and 327 positive samples were tested. A sensitivity of 99.08% (324/327) and a specificity of 99.17% (721/727) were obtained.Overall, agreement with the Predicate Test is 99.15%.

	Predicate HCV Ab Test		
QuickProfile™		Positive	Negative
HCV Ab Test	Positive	324	6
	Negative	3	721
	Agreement	99.08%	99.17%

2. Interference

No cross reactivity was observed with specimens from patients infected with HAV, HBV, HIV, HTLV, CMV, and TP.

REFERENCES

- 1. Post transfusion hepatitis. In: Moore SB, ed. Transfusion-Transmitted Viral Diseases. Alington, VA. Am. Assoc. Blood Banks, pp. 53-38.
- Alter HJ., Purcell RH, Holland PV, et al. (1978) Transmissible agent in non-A, non-B hepatitis. Lancet I: 459-463.
- 3. Choo Q-L,Weiner AJ, Overby LR, Kuo G, Houghton M. (1990) Hepatitis C Virus: the major causative agent of viral non-A, non-B hepatitis. Br Med Bull 46: 423-441.
- 4. Engvall E, Perlmann P. (1971) Enzyme linked immunosorbent assay (ELISA): qualitative assay of IgG. Immunochemistry 8:871-874.







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QuICK PROFILE HBSAg TEST

FOR THE QUALITATIVE ASSESSMENT OF HBsAg IN HUMAN SERUM, PLASMA OR WHOLE BLOOD

REF	71003	HBsAg Test Strip
REF	71004	HBsAg Test Card
For	In Vitro D	iagnostic Use Only

INTENDED USE

QuickProfile[™] HBsAg Test is an immunochromatography assay for the qualitative detection of Hepatitis B virus surface antigen (HBsAg) in human serum, plasma or whole blood specimen.

TEST PRINCIPLE

QuickProfile[™] HBsAg Test is a double antibody sandwich immunoassay. Colloidal gold conjugated anti-HBsAg antibody complexes are dry-immobilized in the test device. When the sample is added, it migrates by capillary diffusion through the strip re-hydrating the gold conjugate complexes. If present, HBsAg will react with the gold conjugate complexes forming particles. These particles will continue to migrate along the strip until the Test Zone (T) where they are captured by anti-HBsAg antibodies immobilized there and a visible red line appears. If there is no HBsAg in sample, no red line will appear in the Test Zone (T). The gold conjugate complexes will continue to migrate along until they are captured in the Control Zone (C) by immobilized goat anti-mouse IgG antibody aggregating a red line, which indicates the validity of the test.

MATERIALS PROVIDED

1. QuickProfile[™] HBsAg Test

- 2. Instructions for use
- 3. Disposable transfer pipet

MATERIALS REQUIRED BUT NOT SUPPLIED

1. Whole blood or plasma: Vacutainer tube, or other appropriate tube, containing heparin or EDTA as an anticoagulant

- 2. Serum: Vacutainer tube, or other appropriate tube, without anticoagulant
- 3. Timer or clock

STORAGE

The sealed pouches in the test kit may be stored between 4-30°C for the duration of the shelf life as indicated on the pouch. The test must be used immediately after being removed from the sealed pouch.

PRECAUTIONS

- 1. This kit is for in vitro diagnostic use only.
- 2. This kit is for PROFESSIONAL use only.
- 3. Read the instructions carefully before performing the test.
- 4. This product does not contain any human source materials.
- 5. Do not use kit contents after the expiration date.
- 6. Handle all specimens as potentially infectious.
- 7. Follow standard Lab procedure and biosafety guidelines for handling and disposal of potentially infective material. When the assay procedure is completed, dispose of specimens after autoclaving them at 121° C for at least 20 min. Alternatively, they can be treated with 0.5% Sodium Hypochlorite for 1-2 hours before disposal.
- 8. Do not pipette by mouth. Do not smoke, eat, or drink in areas where reagents or specimens are handled.

SPECIMEN COLLECTION AND PREPARATION

- 1. The serum, plasma or whole blood specimen should be collected under standard laboratory conditions.
- 2. Heat inactivation of specimens, which may cause hemolysis and protein denaturation, should be avoided.
- 3. Patient samples performed best when tested immediately after collection. If specimens are to be stored, the red blood cells should be removed to avoid hemolysis. If the sample cannot be tested within 24 hours, serum or plasma should be frozen until the test can be performed. Allow sample to reach room temperature before proceeding.
- 4. Sodium azide can be added as a preservative up to 0.1% without effecting the test results.

PROCEDURE

For HBsAg Test Strip (Catalog Number: 71003)

- 1. Bring all materials and specimens to room temperature.
- 2. Remove the test strip from the sealed foil pouch.
- 3. Label the test strip with specimen identity by writing the ID on the top label of the strip.
- 4. Place the test strip on a flat horizontal surface.
- 5. Use the transfer pipet to draw up the sample.
- 6. Hold the transfer pipet in a vertical position over the sample pad and dispense 2 drops (80-100 µl) of sample onto the sample pad.
- 7. Read the result at 20 minutes after adding the sample.

For HBsAg Test Card (Catalog Number: 71004)

- 1. Bring all materials and specimens to room temperature.
- 2. Remove the test card from the sealed foil pouch.
- 3. Label the test card with specimen identity on the "ID _____" area of the cassette.
- 4. Place the test card on a flat horizontal surface.
- 5. Use the transfer pipet to draw up the sample.
- 6. Hold the transfer pipet in a vertical position over the sample well and dispense 2 drops (80-100 μ l) of sample into the sample well.
- 7. Read the result at 20 minutes after adding the sample.

Note: Some positive samples may show positive results before 20 minutes. Results after 30 minutes may not be accurate.

INTERPRETATION OF RESULTS



1. The control band is an internal reagent for procedural control. It will appear if the test has been performed correctly and the reagents are reactive.

Good Laboratory Practice recommends the daily use of control materials to validate the reliability of the device. Control materials
are not provided with this test kit but may be commercially available.

LIMITATIONS

- 1. The test is for in vitro diagnostic use only.
- Negative results do not rule out the possibility of hepatitis B exposure or infection. Infection through recent exposure to HBV
 may not be detectable.
- The presumptive positive result obtained with QuickProfile™ HBsAg Test alone cannot be the final diagnosis of hepatitis B
 infection. As in case of all diagnostic tests, a definitive clinical diagnosis should not be based on the result of a single test but
 should rather be made after all the clinical findings have been evaluated.
- This test is intended ONLY for testing of an individual serum, plasma or whole blood sample. DO NOT use it for testing of other body fluids or pooled blood samples.
- The test is for qualitative detection of HBsAg in human serum, plasma or blood sample and does not indicate the quantity of the antibodies.

PERFORMANCE CHARACTERISTICS:

Sensitivity:

QuickProfile[™] HBsAg Test can detect HBsAg with a concentration of 1.0 ng/ml.

Accuracy:

Twelve hundred and forty-nine (1249) ELISA confirmed samples, including four hundred and sixty-nine (469) positive samples and seven hundred and eighty (780) negative samples were used for the clinical evaluation of QuickProfile[™] HBsAg Test. The results are summarized in the following table. The sensitivity, specificity and accuracy are all 99.6%.

	ELISA HBsAg Test		
QuickProfile™		Positive	Negative
HBsAg	Positive	467	3
Test	Negative	2	777
	Agreement	99.6%	99.6%

BIBLIOGRAPHY

- Sehulster, L. et al. Immunological and biophysical alteration of Hepatitis B virus antigens by sodium hypochlorite disinfection, Appl. And Envir. Microbiol., 42:762-767, 1981.
- U.S. Department of Health and Human Services. Biosafety in microbilogical and biomedical laboratories. HHS Publication(NIH) 88-8395. Washington:U.S. Government Printing Office, May 1988.





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Positive:

Two colored bands appear within 20 minutes. One colored band appears in the Control Zone (C) and another colored band appears in the Test Zone (T). The test result is positive and valid. No matter how faint the colored band appears in the Test Zone (T), the test result should be considered as positive result.

Negative:

One colored band appears in the Control Zone (C) within 20 minutes. No colored band appears in the Test Zone (T). The test result is negative and valid.

Invalid result:

No colored band appears in the Control Zone (C) within 20 minutes. The test result is invalid. Repeat the test with a new test device.