

Contract No:Co2403079

Date:09/03/2024

Letter of Authorization

Manufacturer: Atlas Medical GmbH
Ludwig-Erhard-Ring 3,
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Email: amug@atlas-medical.com

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Middle East Site: Sahab Free Zone Area
P. O. Box 204, Amman 11512, Jordan.
Tel.: +962 6 4026468
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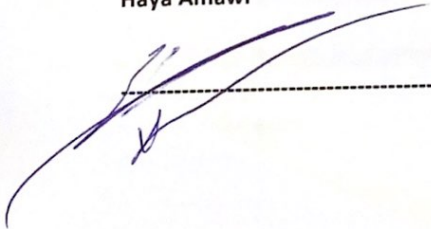
Agent: San Medico
Republic of Moldova, city Chisina
+37368228890

Atlas Medical, hereby appoint the above mentioned agent to import, register and distribute Atlas Medical Products in Maldova

Appointment Conditions:

1. This appointment is valid for 3 year from the above mentioned date.
2. Either Party can cancel this appointment by giving the other party a 60 day notice.

On behalf of the Manufacturer
General Manager
Haya Amawi



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

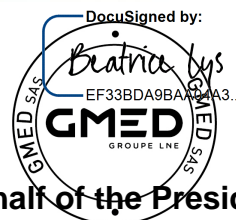


CERTIFICATION DE SYSTEMES DE MANAGEMENT
Accréditation n°4-0608
Liste des sites accrédités
et portée disponible sur
www.cofrac.fr

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**



Declaration Ref No: DC21-0187

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-medical.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:

Product Code	Product Name	Device Class	GMDN
8.00.11.0.0050	Atlas SLE Latex Kit, 50 Tests (2ml Latex, 2x0.5 ml Controls, glass Slide)	General-IVD	54853
8.00.11.0.0002	Atlas SLE Latex Reagent, 2 ml/Vial, Individually Packed, 1 Vial /Box.	General-IVD	54853

Is produced under Atlas quality system (ISO13485: 2016) supported by GMED certificate:

Certificate N°: 36655 rev 2

Expiry Date: October 8th.2026

and complies with the essential requirements of
In Vitro Diagnostic Medical Devices Directive 98/79/EC Annex I
And

EN ISO 18113-1, -2 :2022, EN ISO 15223:2021

**EN ISO 14971:2019, EN ISO 23640 :2015 , ISO 2859 :2017,
EN 13612:2002, EN 13641:2002 , EN 13975:2003, ISO 13485:2016,
IEC 62366-1:2015+A1:2020.**

And

Intended for In-Vitro Professional use only.

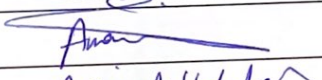
This Declaration includes the batches produced beyond this day according to the product Lot Log.

Manufacturer

Atlas Medical GmbH

Ludwig-Erhard-Ring 3


15827 Blankenefelde-Mahlow Germany.

Atlas Medical	First issue date	Date of review	Management approval	MRXDO10F.10 08.02.2011
	September.2021	27.02.2024		

Amr Al-Habab
RA Manager

ATLAS SLE SLIDE TEST

IVD For *in vitro* diagnostic and professional use only

2°C  8°C
Store at 2°-8°C

INTENDED USE

Atlas SLE Slide Test is a slide agglutination assay for the qualitative and semi quantitative detection of anti-deoxyribonucleoprotein (anti-DNP) in human serum. No initial dilution of patient samples is required for this test. These materials are intended to be acquired, possessed and used only by health professionals.

INTRODUCTION

The detection of antinuclear antibodies, by such laboratory methods as immunofluorescence, LE cell test, and agglutination of coated particles, can aid in the diagnosis of such autoimmune diseases as systemic lupus erythematosus (SLE). The antibodies most associated with SLE are those directed against DNP. These antibodies are believed to cause the formation of the LE cell *in vitro*, occurring in 75-80% of patients diagnosed as having SLE. Given that 20-25% of SLE patients do not exhibit the formation of LE cells, other methods can be used to detect antinuclear antibodies.

PRINCIPLE

Atlas SLE Slide Test provides a means of detecting anti-DNP in human serum. SLE Slide reagent is a stabilized buffered suspension of polystyrene latex particles that have been coated with DNP. When the latex reagent is mixed with the serum containing antibodies to DNP, agglutination occurs. Using dilutions of a reactive patient sample, the anti-DNP titer can be determined.

MATERIALS

MATERIALS PROVIDED

- SLE Latex Reagent: Suspended inert latex particles coated with DNP, with 0.1% sodium azide as preservative.
- SLE Positive Human serum or defibrinated plasma (liquid), with 0.1% sodium azide as preservative.

- SLE Negative Control: Non-reactive buffer containing BSA and 0.1% sodium azide.
- Stirring sticks.
- Glass slide.
- Package insert.

MATERIALS NEEDED BUT NOT PROVIDED

- Timing device.
- 13 x 75 mm test tubes
- Volumetric pipet to deliver 0.25 ml
- Saline (0.9% NaCl solution)
- Mechanical rotator (optional)

PACKAGING CONTENTS

REF 8.00.11.0.0025 (1x1 mL Latex, 1x0.5 mL Positive Control, 1x0.5 mL Negative Control)

REF 8.00.11.0.0050 (1x2 mL Latex, 1x0.5 mL Positive Control, 1x0.5 mL Negative Control)

REF 8.00.11.0.0100 (1x4 mL Latex, 1x1 mL Positive Control, 1x1 mL Negative Control)

PRECAUTIONS

- For *in vitro* diagnostic use.
- Latex reagent and controls contain sodium azide. Azides in contact with lead and copper plumbing may react to form highly explosive metal azides. When disposing of reagents containing azide, flush down the drain with large quantities of water to prevent azide build-up.
- The controls contain human serum or plasma which has been tested at the donor level for HBsAg and for HIV-1, HIV-2 and HCV antibodies and found to be nonreactive. As no known test offers complete assurance that infectious agents are absent, the controls should be considered potentially infectious and universal precautions should be used.
- Do not pipet by mouth.
- Do not smoke, eat, drink or apply cosmetics in areas where plasma/serum samples are handled.
- Any cuts, abrasions or other skin lesions should be suitably protected.
- In order to obtain reliable and consistent results, the instructions in the package insert must be strictly followed.
- Do not use past the expiration date indicated on the kit.
- Do not interchange components of one kit with those of another kit.

- Turbidity or precipitation in controls is indicative of deterioration and the component should not be used.
- Bacterial contamination of reagents or specimens may cause false positive results.

STORAGE & STABILITY

- Store all reagents at 2-8°C in an upright position when not in use.
- Do not freeze reagents.

SPECIMEN COLLECTION and STORAGE

- Use only serum that is free from contamination. Test samples should not be heat-inactivated.
- It is preferable to test samples on the day of their collection. If samples cannot be tested immediately, maintain them in their original tubes at 2-8°C and test within 48 hours.
- Serum samples stored longer than 48 hours should be stored at -20°C or below until testing. Avoid repeated freezing and thawing of specimens.
- If necessary before testing, centrifuge the specimens at a force sufficient to sediment cellular components.
- Samples to be sent out for testing should be placed on ice packs and packaged like any other biohazardous material that could potentially transmit infection.

REAGENT PREPARATION

- Allow all reagents and samples to warm to room temperature (20-30°C) before use. Do not heat reagents in a water bath.
- All reagents are ready for use as supplied. Gently mix the reagents before use; avoid foaming.
- Gently mix the latex reagent before each use to ensure homogeneity.

PROCEDURES

A. Method I (Qualitative)

1. Dispense (35 µL) of each serum sample onto a separate circle on the test slide. Add one drop of Positive and negative controls from the dropper vials supplied onto a separate circle on the test slide.
2. Dispense one drop of latex reagent (35 µL) to each serum specimen and to each control.
3. Using the flat end of the stirring sticks, mix each specimen and control serum with the latex reagent, in a circular manner, over the entire area in the circles of the card.

- Gently tilt and rotate the card for one (1) minute and observe for agglutination. All test results should be compared to both positive and negative controls.

INTERPRETATION OF RESULTS (QUALITATIVE)

Agglutination indicates a reactive SLE sample. Sera that elicit a reactive result should be retested and tittered using the "Semi quantitative Assay Protocol".

B. Method II (Semi-Quantitative)

- Prepare serial dilutions of patient serum, in saline, in test tubes as follows:

Tube	Dilution	Composition
1	1:2	0.25 ml of serum + 0.25 ml saline.
2	1:4	0.25 ml from tube 1 + 0.25 ml saline.
3	1:8	0.25 ml from tube 2 + 0.25 ml saline.
4	1:16	0.25 ml from tube 3 + 0.25 ml saline.
5	1:32	0.25 ml from tube 4 + 0.25 ml saline.
6	1:64	0.25 ml from tube 5 + 0.25 ml saline.

Note: Testing on additional dilutions should be performed as needed.

- Using each dilution as a separate test specimen, apply the samples to the slide as described in Step 1 of the "Qualitative method" and proceed with Steps 2 through 4 of the "Qualitative method". Include undiluted sample if not tested previously on that day with the same lot of latex reagent.

INTERPRETATION OF RESULTS (SEMI-QUANTITATIVE)

The highest dilution in which visible agglutination occurs is considered the endpoint titer.

QUALITY CONTROL

Quality Control requirements must be performed in accordance with applicable local, state and/or federal regulations or accreditation requirements and your laboratory's standard Quality Control Procedures. Controls with graded reactivity should be included. If control samples do not yield the expected response, the assay should be considered invalid and the assay repeated. If the repeat assay does not elicit the expected results for the control samples, discontinue use of the kit and contact your local distributor.

EXPECTED VALUES

Serum samples from 155 individuals were tested using the **SLE Slide Test**. Of the 155 individuals, 29 had active SLE, 23 had clinically inactive SLE, 8 had connective tissue diseases and the remaining 95 were either clinically normal or had some nonrelated disease (including anemia, infectious mononucleosis and rheumatic heart disease) and were used

as controls. Results from testing with the **SLE Slide Test** were compared with the results from testing of the samples using a standard LE cell preparation assay and a fluorescent ANA assay.

Of the 29 active SLE patients, 82% were positive using the SLE Slide Test, 86% were positive by the LE cell prep, and 82% positive by the ANA test. For the 23 clinically inactive SLE patients, 19% were positive by both the SLE Slide Test and the LE cell prep; and 71% were positive by the ANA test. None of the 8 patients having connective tissue disease tested positive with the SLE Latex Test, whereas 17% and 50% tested positive by the LE cell prep and the ANA procedures, respectively. Of the controls, 1% tested positive by both the SLE Latex Test and the LE cell prep, while 6% tested positive by the ANA assay.

LIMITATION

- Serum from patients with scleroderma, rheumatoid arthritis, dermatomyositis, and a variety of connective tissue diseases may elicit agglutination in the SLE slide test.
- Because extremely high levels of antibodies might affect the degree of agglutination, positive samples should be reassayed using the semi quantitative procedure.
- Contaminated, lipemic, or grossly hemolyzed sera should not be used because of the possibility of nonspecific results.
- Plasma samples should not be used because of the possibility of nonspecific results.
- Samples yielding indeterminate results may be resolved by repeating the test utilizing a two (2) minute slide rotation period. Reaction times longer than two minutes might cause false positive results due to a drying effect.
- Drugs such as hydralazine, isoniazid, procainamide and a number of anticonvulsant drugs can induce an SLE syndrome.
- In accord with all diagnostic methods, a final diagnosis should not be made on the result of a single test, but should be based on a correlation of test results with other clinical findings.

REFERENCES



















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- Holman HR, Kunkel HG. 1957. *Science*, **126**:163.
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- Rothfield NF, Phythyon JJ, McEwan C., Miescher P. 1961. *Arth Rheum*, **4**:223-229.

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Website: www.atlas-medical.com

PP12339A01

Rev B (22.06.2023)

	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
	Positive control		Negative control



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.

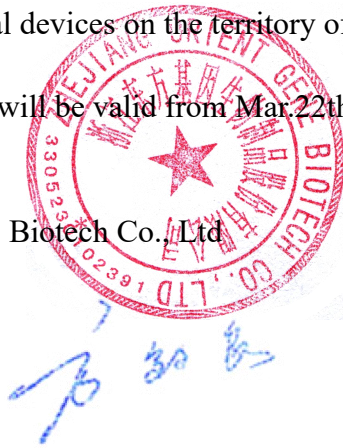
We declare that the company mentioned above is authorized to register, notify, renew or modify the registration of medical devices on the territory of the Republic of Moldova.

This Statement letter will be valid from Mar.22th,2024 to Mar.21th, 2025.

Zhejiang Orient Gene Biotech Co.,Ltd

General Manager:

Date:2024/3/22



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



Certificate

No. Q5 092305 0001 Rev. 02

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. 02](http://www.tuvsud.com/ps-cert?q=cert:Q5_092305_0001_Rev.02)

Report No.: SH2398804

Valid from: 2024-03-17

Valid until: 2027-03-16

Date, 2024-03-01



Christoph Dicks
Head of Certification/Notified Body



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

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, cortocosteroids, 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.

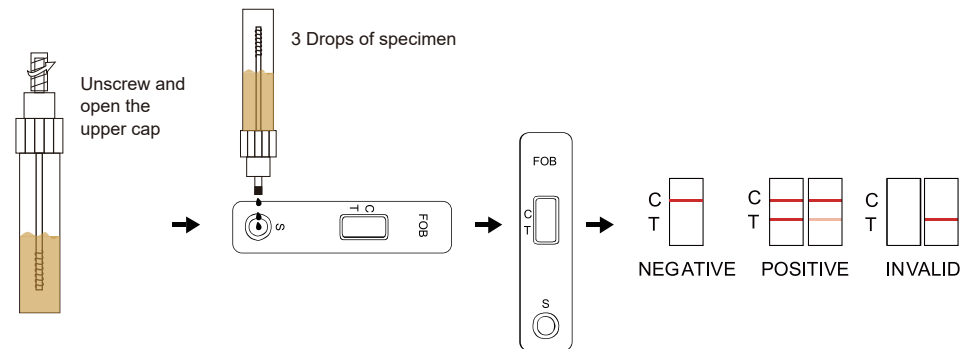
1. Collect a random sample of feces in a clean, dry receptacle.
2. Unscrew the top of the collection tube and remove the applicator stick.
3. Randomly pierce the fecal specimen in at least five (5) different sites.
4. Remove excess sample off the shaft and outer grooves. Be sure sample remains on inside 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 in diagnosis 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: 99.6%

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: 99.9%










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 standard 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. Blebae J. and Napherson 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#

 Zhejiang Orient Gene Biotech Co.,Ltd
Address: 3787#, East Yangguang Avenue, Dipu Street,
Anji 313300, Huzhou, Zhejiang, China
Tel: +86-572-5226111 Fax: +86-572-5226222
Website: www.orientgene.com

 Shanghai International Holding Corp. GmbH (Europe)
Add: Eiffestrasse 80, 20537 Hamburg, Germany

 GEFOB-602b



ТОВ «ХЕМА» код ЄДРПОУ 36038442
Адреса 03179, м. Київ, вул. Академіка Єфремова, 23
Для кореспонденції: 03179, а/с 49
З питань замовлення продукції: 050-422-62-16, 067-422-62-16
Тел.: +38 (095) 60-99-555 Факс: +38 (044) 422-62-16
e-mail: info@xema.com.ua
www.xema.in.ua

STATEMENT

We, XEMA LLC, as a manufacturer of in vitro diagnostic medical devices, having a registered office at Akademika Yefremova St. 23, Kyiv, 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 legislative requirements of the Republic of Moldova.

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 shall come into force on the date of its signing. The duration of this Statement is 3 years from the date of signing.

Date: 06.09.2023

Signature:

*Director Xema LLC
Oleksandra Zavaliei*



СЕРТИФІКАТ

про відповідність системи управління якістю

Зареєстрований у Реєстрі

«29» червня 2022 р.

№ UA.SM.214-21

Дійсний до «03» серпня 2024 р.

Перше видання: «04» серпня 2021 р.

ЦИМ СЕРТИФІКАТОМ ВІДПОВІДНОСТІ ПОСВІДЧУЄТЬСЯ,
ЩО СИСТЕМА УПРАВЛІННЯ ЯКОСТІ СТОСОВНО

проекування та розроблення, виробництва та дистрибуції
медичних виробів для діагностики *in vitro*

впроваджена:

ТОВ «ХЕМА»

за адресою: вул. Академіка Єфремова, 23, м. Київ, 03179, Україна

відповідає вимогам ISO 13485:2016;

ДСТУ EN ISO 13485:2018 (EN ISO 13485:2016, IDT; ISO 13485:2016, IDT).

Контроль відповідності сертифікованої системи управління якістю вимогам зазначеного стандарту здійснюється шляхом нагляду, періодичність і процедури якого регламентуються процедурами органу з оцінки відповідності.

Сертифікат видано Органом з оцінки відповідності ТОВ «УКРМЕДСЕРТ», акредитованим Національним агентством з акредитації України, атестат від 24.12.2019 № 80047, адреса: вул. Драгоманова, будинок 1-А, оф. 2, м. Київ, 02059, Україна, тел./факс: +38-067-595-02-30, <https://ukrmedcert.org.ua>.

Директор



І.М. Хотенюк



Certificate

Of Marketing Authorization of Medical Product

within Germany, the member states of the European Union
and the other states having a contractual agreement with the European Economic Area

Nr. **AR/IVD/XEMA LLC/01/2023**

Issued on the basis of the Declaration of conformity and registration taking into account Article 11 of Regulation (EU) 2017/746 (IVDR) on In Vitro Diagnostic, and Medical Device Implementing Act (MPDG)

Ausgestellt auf Grund der Konformitätserklärung und Registrierung unter Berücksichtigung der der Verordnung (EU) 2017/746 (IVDR) über In-vitro-Diagnostika und Medizinprodukte-Durchführungsgesetz (MPDG)

Manufacturer / Hersteller

XEMA LLC
UKRAINE, 03179 KYIV
Akademika Yefremova St. 23
qa@xema.com.ua; www.xema.in.ua

SRN: UA-MF-000032959

Product name / Produkt

See annex to the Certificate
Siehe Anhang zum Zertifikat

Product Classification:
Produktklassifizierung

In Vitro Diagnostic Medical Devices
In-vitro-Diagnostikum (IVD) Medizinprodukte

Category:
Kategorie

Common/ Other IVD
Sonstige IVD-Produkte

Conformity assessment procedure:
Konformitätsbewertungsverfahren:

EC DECLARATION OF CONFORMITY
(Annex III, except point 6, Directive 98/79/EC)
in connection with article 110(3) IVDR

EU- KONFORMITÄTserklärung
(Anhang III, außer Nummer 6, Richtlinie 98/79 / EG)
in Verbindung mit Artikel 110 (3) IVDR

State Competent Authority:
Staatliche Zuständige Behörde

BfArM Federal Institute for Drugs and Medical Devices
DMIDS (German Medical Device Information and Database System)

BfArM Das Bundesinstitut für Arzneimittel und Medizinprodukte DMIDS
(Deutsches Medizinprodukte-Informations- und Datenbanksystem)

Date of issue : **2023-03-07**
Das Ausstellungsdatum

Valid to : **2025-05-31**
Gültig bis

Represented in the EC by:

Polmed.de Beata Rozwadowska
Fichtenstr. 12A, 90763 Fürth, Germany
email: info@polmed.de
Tel: +49 911 93163967



Polmed.de

SRN: DE-AR-000006947

Annex to the Certificate No.:

Anhang zum Zertifikat Nr.:

AR/IVD/XEMA LLC/01/2023

The following medical devices can be placed on the market in the Federal Republic of Germany, in the member states of the European Economic Community (EEC) and in the other contract states of the agreement about the European Economic Area.

Die folgenden Medizinprodukte in der Bundesrepublik Deutschland, in den Mitgliedsstaaten der Europäischen Wirtschaftsgemeinschaft (EG) und in den Vertragsstaaten der EG in den Verkehr gebracht werden dürfen.

#	Nomenclature term Nomenklaturbezeichnung	Catalog No. Katalog-Nr.	Name of device Produktbezeichnung	DMIDS Registration number Registriernummer
1.	ASPERGILLUS	K021	GalMAg EIA	DE/CA64/00115824
2.	HSV IgG	K104	HSV 1/2 IgG EIA	DE/CA64/00115826
3.	HSV IgM	K104M	HSV 1, 2 IgM EIA	DE/CA64/00115833
4.	HSV 2 IgG	K104B	HSV 2 IgG EIA	DE/CA64/00115836
5.	MYCOPLASMA ANTIBODY ASSAYS	K106	Mycoplasma IgG EIA	DE/CA64/00115837
6.	SYPHILIS ANTIBODY ASSAYS TOTAL	K111	anti-Treponema pallidum EIA	DE/CA64/00115839
7.	SYPHILIS ANTIBODY IGG	K111G	Treponema pallidum IgG EIA	DE/CA64/00115840
8.	H. PYLORI ANTIBODY ASSAYS	K119G	Helicobacter pylori IgG EIA	DE/CA64/00115850
9.	OTHER OTHER BACTERIOLOGY IMMUNOASSAY	K126	Ureaplasma IgG EIA	DE/CA64/00115851
10.	THYROID PEROXIDASE (INCL. MICROSOMAL) ANTIBODIES	K131	aTPO EIA	DE/CA64/00115852
11.	THYROGLOBULIN AUTOANTIBODIES	K132	aTG EIA	DE/CA64/00115853
12.	MPO ANCA	K133	aMPO EIA	DE/CA64/00115854
13.	TISSUE TRANSGLUTAMINASE ANTIBODIES	K160 K161	anti-TGlu IgG EIA anti-TGlu IgA EIA	DE/CA64/00115855
14.	GIARDIA LAMBLIA	K171	anti-Giardia lamblia EIA	DE/CA64/00115856
15.	OTHER PARASITOLOGY	K174	Ascaris IgG EIA	DE/CA64/00115857
16.	ECHINOCOCCUS	K175	Echinococcus IgG EIA	DE/CA64/00115858
17.	DISTOMATOSIS	K176	Opisthorchis IgG EIA	DE/CA64/00115859
18.	GLIADIN ANTIBODIES	K180 K181	Gliadin IgG EIA Gliadin IgA EIA	DE/CA64/00115860
19.	IMMUNOGLOBULIN E - TOTAL	K200	Total IgE EIA	DE/CA64/00115861
20.	THYROID STIMULATING HORMONE	K201	TSH EIA	DE/CA64/00115863
21.	LUTEINISING HORMONE	K202	LH EIA	DE/CA64/00115864
22.	FOLLICLE STIMULATING HORMONE	K203	FSH EIA	DE/CA64/00115865
23.	HUMAN GROWTH HORMONE	K204	GH EIA	DE/CA64/00115866
24.	HUMAN CHORIONIC GONADOTROPIN TOTAL	K205	hCG EIA	DE/CA64/00115867
25.	PROLACTIN	K206	Prolactin EIA	DE/CA64/00115868

The above-mentioned medical products are marked with the CE symbol.
Die oben genannten medizinischen Produkte sind mit dem CE-Zeichen gekennzeichnet.

Annex to the Certificate No.:

Anhang zum Zertifikat Nr.:

AR/IVD/XEMA LLC/01/2023

The following medical devices can be placed on the market in the Federal Republic of Germany, in the member states of the European Economic Community (EEC) and in the other contract states of the agreement about the European Economic Area.

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#	Nomenclature term Nomenklaturbezeichnung	Catalog No. Katalog-Nr.	Name of device Produktbezeichnung	DMIDS Registration number Registriernummer
26.	PROGESTERONE	K207	Progesterone EIA	DE/CA64/00115869
27.	ESTRADIOL	K208	Estradiol EIA	DE/CA64/00115870
28.	TESTOSTERONE (WITH DEHYDRO AND FREE TESTOSTERONE)	K209	Testosterone EIA	DE/CA64/00115871
29.	CORTISOL	K210	Cortisol EIA	DE/CA64/00115872
30.	TRIIODOTHYRONINE	K211	T3 EIA	DE/CA64/00115873
31.	THYROXINE	K212	T4 EIA	DE/CA64/00115874
32.	FREE TRIIODOTHYRONINE	K213	ft3 EIA	DE/CA64/00115875
33.	FREE THYROXINE	K214	ft4 EIA	DE/CA64/00115876
34.	DEHYDRO-EPIANDROSTERONE SULPHATE (INCL. DHEA)	K215	DHEAS EIA	DE/CA64/00115877
35.	17 OH PROGESTERONE	K217	17-OH-progesterone EIA	DE/CA64/00115878
36.	ESTRIOL	K218	free Estriol EIA	DE/CA64/00115880
37.	TESTOSTERONE (WITH DEHYDRO AND FREE TESTOSTERONE)	K219	free Testosterone EIA	DE/CA64/00115881
38.	CANCER ANTIGEN 125	K222	CA 125 EIA	DE/CA64/00115882
39.	CANCER ANTIGEN 19-9	K223	CA 19-9 EIA	DE/CA64/00115883
40.	CARCINOEMBRYONIC ANTIGEN	K224	CEA EIA	DE/CA64/00115884
41.	ALPHAFETOPROTEIN	K225	AFP EIA	DE/CA64/00115885
42.	CANCER ANTIGEN 15-3	K226	CA 15-3 (M12) EIA	DE/CA64/00115886
43.	OTHER OTHER TUMOUR MARKERS	K232	Thyroglobulin EIA	DE/CA64/00115887
44.	β HUMAN CHORIONIC GONADOTROPIN (INCL. SUBUNIT)	K235	free β-HCG EIA	DE/CA64/00115888
45.	CYFRA 21-1	K236	CYFRA 21-1 EIA	DE/CA64/00115889
46.	SQUAMOUS CELL CARCINOMA ANTIGEN	K237	SCC (A) EIA	DE/CA64/00115890
47.	PREGNANCY ASSOCIATED PLASMA PROTEIN - A (DOWNS)	K238	PAPP-A EIA	DE/CA64/00115892
48.	OTHER OTHER TUMOUR MARKERS	K239	HE4 EIA	DE/CA64/00115893
49.	CANCER ANTIGEN 242	K243	CA242 EIA	DE/CA64/00115894
50.	OTHER PREGNANCY TESTING HORMONES	K245	AMH EIA	DE/CA64/00115896

The above-mentioned medical products are marked with the CE symbol.
Die oben genannten medizinischen Produkte sind mit dem CE-Zeichen gekennzeichnet.

Annex to the Certificate No.:

Anhang zum Zertifikat Nr.:

AR/IVD/XEMA LLC/01/2023

The following medical devices can be placed on the market in the Federal Republic of Germany, in the member states of the European Economic Community (EEC) and in the other contract states of the agreement about the European Economic Area.

Die folgenden Medizinprodukte in der Bundesrepublik Deutschland, in den Mitgliedsstaaten der Europäischen Wirtschaftsgemeinschaft (EG) und in den Vertragsstaaten der EG in den Verkehr gebracht werden dürfen.

#	Nomenclature term Nomenklaturbezeichnung	Catalog No. Katalog-Nr.	Name of device Produktbezeichnung	DMIDS Registration number Registriernummer
51.	HUMAN PLACENTAL LACTOGEN HPL	K246	Placental lactogen EIA	DE/CA64/00115897
52.	C-REACTIVE PROTEIN	K250	CRP EIA	DE/CA64/00115898
53.	C-PEPTIDE	K267C	C-peptide EIA	DE/CA64/00115900
54.	INSULIN	K267N	Insulin EIA	DE/CA64/00115901
55.	SEX HORMONE BINDING GLOBULIN	K268	SHBG EIA	DE/CA64/00115902
56.	TROPONIN (T + I)	K291	Troponin I EIA	DE/CA64/00115903
57.	LYME ANTIBODY IGG	K118G	Borelia burgdorferi IgG EIA	DE/CA64/00115904
58.	LYME ANTIBODY IGM	K118M	Borelia burgdorferi IgM EIA	DE/CA64/00115905
59.	EBV ANTIBODIES	K108V K108VM K108N	Epstein-Barr virus VCA IgG EIA Epstein-Barr virus VCA IgM EIA Epstein-Barr virus EBNA IgG EIA	DE/CA64/00115906

The above-mentioned medical products are marked with the CE symbol.
Die oben genannten medizinischen Produkte sind mit dem CE-Zeichen gekennzeichnet.

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SRN: DE-AR-000006947Date: **March 07, 2023**

Polmed.de



Instruction for use
A solid-phase enzyme immunoassay kit
for the qualitative detection of IgG antibodies
to *Borelia burgdorferi sensu lato*
in human serum or plasma

Borelia burgdorferi IgG EIA

Catalogue number **REF** **K118G**



For 96 determinations



In vitro diagnostic medical device

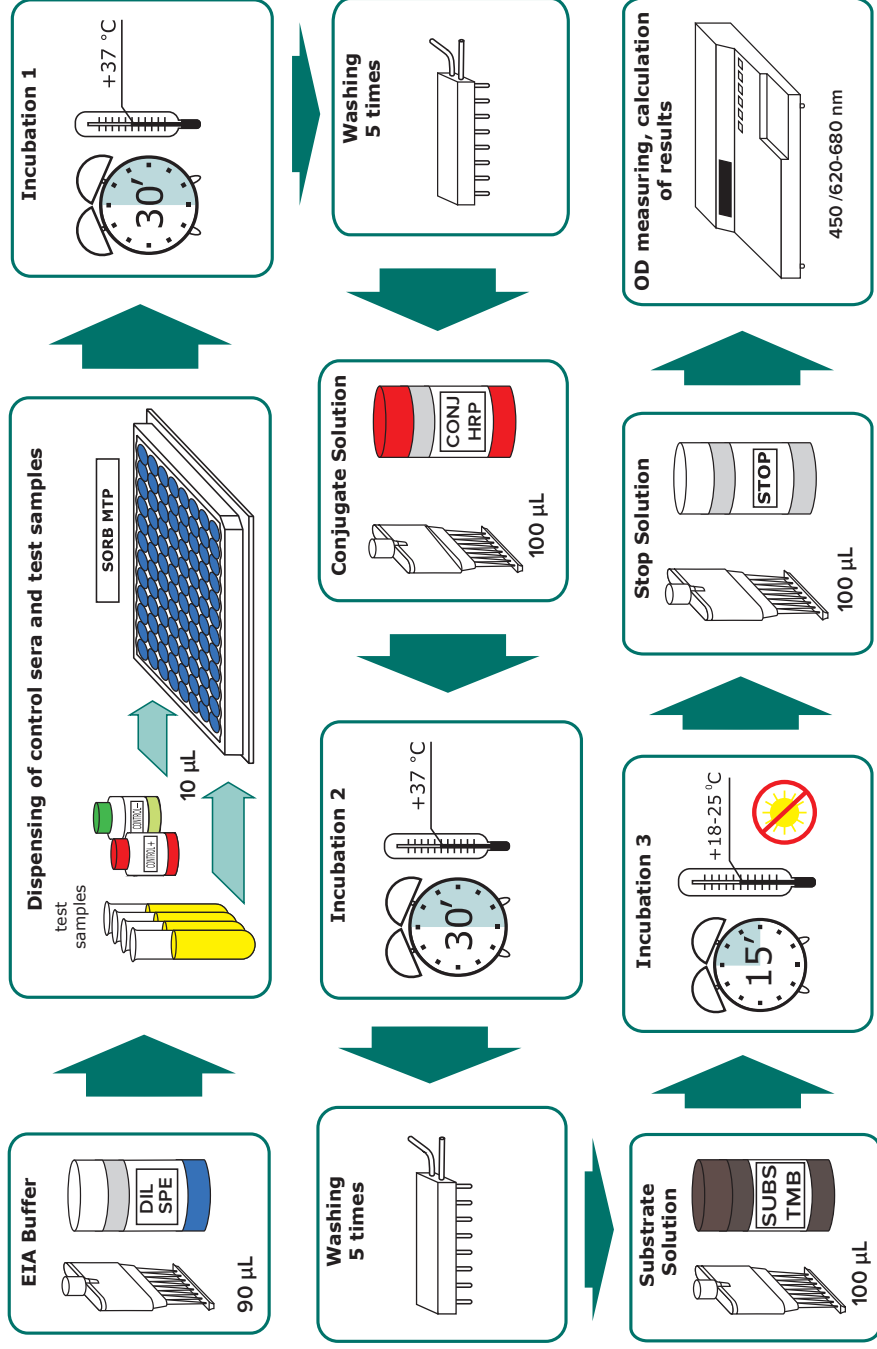


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ASSAY PROCEDURE



During performing several independent series of tests, Positive and Negative Control Serum should be used **each time**.

K118G

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Instruction for use
A solid-phase enzyme immunoassay kit
for the qualitative detection of IgG antibodies
to *Borelia burgdorferi sensu lato*
in human serum or plasma

Borelia burgdorferi IgG EIA

1. INTENDED USE

ELISA reagent kit Borelia burgdorferi IgG EIA is a solid-phase enzyme immunoassay for the qualitative detection of IgG antibodies to *Borelia burgdorferi sensu lato* in human serum or plasma.

The field of application is clinical laboratory diagnostics.

2. GENERAL INFORMATION

Borrelia burgdorferi sensu lato - is a group of borreliosis or Lyme disease pathogens, a common infection, the main host and vector of which is the ixodid tick. The disease is transmitted only through a tick bite.

In the early stages of borreliosis, fatigue, chills and headaches may be observed, and later more serious symptoms may occur, such as joint pain, meningitis, numbness in the extremities, facial nerve paralysis, memory disorders, and eye and heart damage. After the spirochete penetrates the skin, a creeping erythema occurs, and after several days or weeks, it reaches many organs by haematogenous or lymphatic means. In general, the incubation period is from 3 to 45 days.

Early diagnosis of the disease is based on clinical and epidemiological data. The diagnosis is confirmed by laboratory, usually by serological methods - the detection of specific antibodies to *Borrelia burgdorferi* in the blood.

IgM antibodies appear in the blood first, a few days after infection, but can be detected by laboratory tests in 2-3 weeks. After about 6 weeks, the concentration of antibodies reaches a maximum and then gradually decreases. IgG antibodies begin to be detected 4-6 weeks after infection and the maximum amount of IgG antibodies is synthesised 2-3 months after the onset of early symptoms of the disease. Then their number gradually decreases, but they remain in the body for several years.

3. TEST PRINCIPLE

The detection of IgG antibodies to *Borrelia burgdorferi* is based on the indirect enzyme immunoassay principle. On the inner surface of the microplate wells are immobilized recombinant *Borrelia burgdorferi* antigen. The analysis procedure includes three stages of incubation:

- during the first stage specific to *Borrelia burgdorferi* antibodies from the specimen are bound onto the microwell surface;
- during the second stage horseradish peroxidase-conjugated specific monoclonal anti-IgG antibodies bind to the antigen-antibody complexes, fixed in the formed at the previous stage complexes;
- during the third stage, the complexes formed due to the reaction with the chromogen 3,3',5,5'-tetramethylbenzidine are visualized.

After stopping the reaction with a stop solution, the intensity of the color of the microwells is measured. The optical density (OD) in the microwell is directly related to the concentration of the measured IgG antibodies to *Borrelia burgdorferi* in test specimen.

4. KIT COMPONENTS

Code of component	Symbol	Name	Volume	Qty, pcs.	Description
P118GZ	SORB MTP	Microplate	-	1	96-well polystyrene strip microplate coated with recombinant antigen of <i>Borrelia burgdorferi</i> , ready to use
CN118GZ	CONTROL -	Negative Control Serum K-	0.5 mL	1	Solution based on human serum, free of IgG antibodies to <i>Borrelia burgdorferi</i> , with preservative, ready to use (yellow liquid)
CP118GZ	CONTROL +	Positive Control Serum K+	0.2 mL	1	Solution based on human serum, containing of IgG antibodies to <i>Borrelia burgdorferi</i> , with preservative, ready to use (red liquid)
T118GZ	CONJ HRP	Conjugate Solution	12 mL	1	Solution of monoclonal antibodies to IgG conjugated to the horseradish peroxidase, ready to use (red liquid)
SP118GZ	DIL SPE	EIA Buffer	12 mL	1	Buffer solution with detergent and preservative, ready to use (purple liquid)
R055Z	SUBS TMB	Substrate Solution	12 mL	1	Tetramethylbenzidine (TMB) substrate solution, ready to use (colourless liquid)
S008Z	BUF WASH 26X	26x Concentrate Washing Solution	30 mL	1	Buffer solution with detergent, 26x concentrate (colourless liquid)
R050Z	STOP	Stop Solution	12 mL	1	5.0% solution of sulphuric acid, ready to use (colourless liquid)

The kit also includes instruction for use, quality control data sheet and plate sealing tape (2 pcs).

5. EQUIPMENT AND MATERIAL REQUIRED BUT NOT PROVIDED

- microplate photometer with 450\620-680 nm wavelength;
- dry thermostat for $+37^{\circ}\text{C}\pm 1^{\circ}\text{C}$;
- automatic plate washer (optional);
- micropipettes with variable volume, range volume 5-1000 μL ;
- graduated cylinder of 1000 mL capacity;
- distilled or deionized water;
- timer;
- vortex mixer;
- disposable gloves;
- absorbent paper.

6. WARNING AND PRECAUTIONS

In order to prevent incorrect results, strictly follow the recommended order and duration of the analysis procedure.

6.1. The kit is for *in vitro* diagnostic use only. For professional laboratory use.

6.2. Follow the rules mentioned below during the kit using:

- do not use kit beyond expire date;
- do not use the kit if its packaging is damaged;
- in order to avoid contamination, use new tips to pipette samples and reagents;
- use only verified equipment;
- close each vial with its own cap, after using the reagent;
- do not use components of other kits or reagents of other manufacturers;
- do not let wells dry after completing the rinsing step; immediately proceed to the next stage;
- avoid bubbles when adding reagents.

ATTENTION! The TMB substrate solution is light sensitive. Avoid prolonged exposure of the component to light.

6.3. Some kit components, such as stop solution, substrate solution, and washing solution, may cause toxic or irritant effects. If they get on the skin or mucosa, the affected area should be washed with plenty of running water.

6.4. All human products, including patient samples, should be considered potentially infectious. Handling and disposal should be in accordance with the procedures defined by an appropriate national biohazard safety guidelines or regulations.

6.5. The positive and negative control serum included in the kit are negative for antibodies to HIV 1,2, hepatitis C virus and HBsAg, but the reagents should be considered as potentially infectious material and handled carefully.

6.6. Specimens must not contain any azide compounds, as they inhibit activity of peroxidase.

6.7. Wear protective gloves, protective clothing, eye protection, face protection.

6.8. Do not smoke, eat, drink or apply cosmetics in areas where specimens or kit reagents are handled.

6.9. Safety Data Sheet for this product is available upon request directly from XEMA LLC.

6.10. Serious incidents related to the kit must be reported to the manufacturer, Authorized Representative, and to the Competent Authority of the EU member state(s) where the incident has occurred.

7. SPECIMEN COLLECTION, TRANSPORTATION AND STORAGE OF SAMPLES

7.1. Blood sampling should be carried out from the cubital vein with a disposable needle using a vacuum blood sampling system. Serum or plasma specimens should be clearly labeled and identified. Serum must be separated from the clot as early as possible to avoid hemolysis of red blood cells. If there are any visible particles in the sample, they should be removed by centrifugation at 3000-5000 rpm for 20 minutes at room temperature or by filtration.

Don't use samples with high lipidemia, hemolysis as they may give false test results.

7.2. Specimen should be stored at +2...+8°C up to 3 days. Specimen held for a longer time, should be placed in a freezer at -15°C or below, avoid no more than three cycles of thawing-freezing samples.

7.3. For the transportation of samples, it is recommended to use triple packaging. The primary package is the labeled tube containing the sample. Secondary packaging is a polyethylene bag that is hermetically closed with a zip-lock. The outer packaging is a heat-insulating container, while the secondary packaging is placed in the outer packaging for transportation in the center of the thermal container. Frozen refrigerants are placed on the bottom, along the side walls of the thermal container, and cover the samples with them.

8. TRANSPORTATION AND STORAGE TERMS OF KIT, WASTE DISPOSAL

Information about the singularity storage conditions, transportation of the kit, and disposal of waste should be taken into account by all persons who participate in these processes.

8.1. Transportation

The *Borrelia burgdorferi* IgG EIA kit should be transported in the manufacturer's packaging at +2...+8°C. Single transportation at the temperature up to 25°C for 5 days is acceptable.

8.2. Storage

The *Borrelia burgdorferi* IgG EIA kit should be stored in the manufacturer's packaging at +2...+8°C. Do not freeze.

The kit contains reagents sufficient for 96 determinations including Positive and Negative Control Serum.

Once opened test-kit is stable for 2 months when stored properly as intended by manufacturer at 2-8°C.

In case of partial use of the kit, the components should be stored in the following way:

- the remaining strips should be immediately resealed in the bag along with the silica gel, closed with the zip-lock, and stored at +2...+8°C within 2 months;
- EIA Buffer, Substrate Solution, Stop Solution, and Washing Solution concentrate after opening the vial, can be stored tightly closed at +2...+8°C until the kit's shelf life;
- Conjugate Solution, Positive and Negative Control Serum after opening the vial, can be stored tightly closed at +2...+8°C within 2 months;
- diluted Washing Solution can be stored at room temperature (+18...+25°C) for up to 5 days or at +2...+8°C for up to 14 days.

Kits that were stored in violation of the storage condition cannot be used.

8.3. Disposal

Expired kit components, used reagents and materials, as well as residual samples must be inactivated and disposed of in accordance with legal requirements.

9. REAGENTS PREPARATION

9.1. All reagents (including microstrips) and test samples should be allowed to reach room temperature (+18...+25 °C) for at least 30 minutes before use.

9.2. Microplate preparation

Open the package with the microplate and install the required number of strips into the frame. The remaining strips should be immediately resealed in the bag along with the silica gel and closed with the zip-lock to prevent moisture from affecting the plate's strips.

9.3. Washing solution preparation

Add the contents of the 30 mL washing solution concentrate vial to 750 mL of distilled or deionized water and mix thoroughly. In case of partial use of the kit, take the necessary amount of washing solution concentrate and dilute it 26 times with distilled or deionized water.

The spending of the components in case of partial use of the kit is given in the table:

Quantity of strips	1	2	3	4	5	6	7	8	9	10	11	12
Volume of the washing solution concentrate, mL	2.5	5	7.5	10	12.5	15	17.5	20	22.5	25	27.5	30
Volume of water, mL	62.5	125	187.5	250	312.5	375	437.5	500	562.5	625	687.5	750

10. ASSAY PROCEDURE

- 10.1. Put the desired number of strips into the frame based on the number of test samples and 4 wells for Positive and Negative Control Serum (1 well for Positive Control (CP) and 3 wells for Negative Control Serum (CN)).
- 10.2. Dispense **90 µL of EIA Buffer** to all wells.
- 10.3. Dispense **10 µL of Positive and Negative Control Serum as well as 10 µL of test serum/plasma samples (SAMP)** to the wells of the microplate according to the scheme below. The introduction of Positive and Negative Control Serum and test samples should be carried out within 5 minutes to ensure equal incubation time for the first and last samples.

NOTE: during performing several independent series of tests, Positive and Negative Control Serum should be used each time.

Scheme of introduction of samples

	1	2	3	4	5	6	7	8	9	10	11	12
A	CP	SAMP5	SAMP13	SAMP21								
B	CN	SAMP6	SAMP14	SAMP22								
C	CN	SAMP7	SAMP15	SAMP23								
D	CN	SAMP8	SAMP16									
E	SAMP1	SAMP9	SAMP17									
F	SAMP2	SAMP10	SAMP18									
G	SAMP3	SAMP11	SAMP19									
H	SAMP4	SAMP12	SAMP20									

- 10.4. Carefully mix the contents of the microplate in a circular motion on a horizontal surface, cover strips with a plate sealing tape and incubate for **30 minutes at +37°C**.
- 10.5. At the end of the incubation period, remove and discard the plate cover. Aspirate and wash each well **5 times** using an automatic washer or an 8-channel dispenser. For each washing, add 300 µL of Washing Solution (see 9.3) to all wells, then remove the liquid by aspiration or decantation. The residual volume of the Washing Solution after each aspiration or decantation should be no more than 5 µL. After washing, carefully remove the remaining liquid from the wells on the absorbent paper. For the automatic washer/analyzer, the Washing Solution volume can be increased to 350 µL.
- 10.6. Add **100 µL of Conjugate Solution** to all wells.
- 10.7. Cover strips with a plate sealing tape and incubate for **30 minutes at +37°C**.
- 10.8. At the end of the incubation period, aspirate and wash each well **5 times** as described in 10.5.
- 10.9. Add **100 µL of Substrate Solution** to all wells. The introduction of the Substrate Solution into the wells must be carried out within 2-3 minutes. Incubate the microplate in the dark **at room temperature (+18...+25°C) for 15 minutes**.
- 10.10. Add **100 µL of Stop Solution** to all wells in the same order as the Substrate Solution. After adding the Stop Solution, the contents of the wells turn yellow.
- 10.11. Read the optical density (OD) of the wells at 450 nm and reference light filters 620–680 nm using a microplate photometer within 5 minutes of adding the stop solution. Set photometer blank on air.

11. TEST VALIDITY AND CALCULATION OF RESULTS

11.1. The test results are valid only if Positive and Negative Control Serum are within the specified ranges and if all other test parameters are also within the given assay specifications, namely:

- OD of CONTROL- < 0.15;
- OD of CONTROL+ > 1.5;
- $OD(CN) \times 0,5 < OD(CN) < OD(CN) \times 2$.

11.2. Calculate the mean OD value of the Negative Control Serum:

$$\text{meanOD(CN)} = (\text{OD1(CN)} + \text{OD2(CN)} + \text{OD3(CN)})/3$$

11.3. Calculate the Cut Off value by adding to the mean OD value of the Negative Control Serum the coefficient 0.3.

$$\text{Cut off} = \text{meanOD(CN)} + 0.3$$

11.4. Calculate Positivity Index (PI) for each sample by dividing the OD of the sample by Cut off value:

$$\text{PI} = \text{ODsample}/\text{Cut off}$$

12. INTERPRETATION OF THE RESULTS

- If PI value > 1.1 the result is **POSITIVE**,
- If PI value is between 0.9 and 1.1 the result is **EQUIVOCAL**,
- If PI value < 0.9 the result is **NEGATIVE**.

If equivocal results are obtained, it is recommended to conduct a reexamination of the sample in several replicates. If the result is equivocal again, a new sample should be obtained within 5-7 days and retested. If the result remains equivocal, the sample should be considered negative.

13. PERFORMANCE CHARACTERISTICS

13.1. Analytical performance characteristics

13.1.1. Precision of Measurement

Reproducibility (Intra assay repeatability) was determined by evaluation the coefficient of variation (CV) for 2 different samples, with different levels of IgG antibodies to the *Borrelia burgdorferi sensu lato* antigen, during 1 day in 43 replicates on one series of ELISA kit.

Nº serum	mean OD	mean PI	CV PI, %
1	0.31	1.02	8.29
2	1.08	3.59	6.65

Reproducibility (Inter assay reproducibility) was determined by evaluating the coefficients of variation (CV) for 2 samples of each serum for 4 days in 8-replicate determinations.

Nº serum	mean OD	mean PI	CV PI, %
1	0.27	0.9	8.1
2	1.1	3.66	6.8

13.1.2. Analytical specificity

For the analysis result is not affected by the presence in the sample of bilirubin in a concentration of up to 0.21 mg/mL, hemoglobin in a concentration of up to 10 mg/mL and triglycerides in a concentration of up to 10 mg/mL.

13.2. Diagnostic performance characteristics

The clinical sensitivity and specificity of the assay were evaluated using a serum panel with 8 positive and 8 negative clinical serum samples and were 100%. The relative sensitivity and specificity of the assay were investigated in a sample of 96 donor sera characterised for the content of IgG antibodies to *Borrelia burgdorferi* antigen in commercial Kits, and the results were 99.7% and 97.5%, respectively.

14. LIMITATIONS

A positive result is evidence of the presence of IgG antibodies to *Borrelia burgdorferi sensu lato* antigen. The diagnosis cannot be based on the results of an IgG antibody test to *Borrelia burgdorferi* alone and requires confirmation, including an assessment of the patient's clinical presentation and history, the detection of IgM antibodies to *Borrelia burgdorferi* and conducting an immunoblot test.

A negative result indicates the absence of IgG antibodies to *Borrelia burgdorferi sensu lato* or antibody levels below the limit of sensitivity of the kit.

The results of serum tests in patients with immunosuppression and immunological disorders should be interpreted with caution.

15. REFERENCES

1. Lyme Borreliosis (Lyme disease). In: International travel and health. Geneva: World Health Organization; 2014.
2. M Cinco 1, R Murgia, M Ruscio, B Andriolo. IgM and IgG significant reactivity to *Borrelia burgdorferi sensu stricto*, *Borrelia garinii* and *Borrelia afzelii* among Italian patients affected by Lyme arthritis or neuroborreliosis. *FEMS Immunol Med Microbiol* . 1996 Jun;14(2-3):159-66. doi: 10.1111/j.1574-695X.1996.tb00283.x.
3. Наказ МОЗ України №325 від 08.06.2015 «Про затвердження Державних санітарно-протиепідемічних правил і норм щодо поводження з медичними відходами».
4. Постанова КМУ від 02 жовтня 2013р. №754 «Про затвердження технічного регламенту щодо медичних виробів для діагностики *in vitro*».
5. НПАОП 85.14-1.09-81. Правила облаштування, техніки безпеки, виробничої санітарії, протиепідемічного режиму і особистої гігієни при роботі в лабораторіях (відділеннях, відділах) санітарноепідеміологічних установ системи Міністерства охорони здоров`я СРСР (НАОП 9.1.50-1.09-81).

SAMPLES IDENTIFICATION PLAN

	1	2	3	4	5	6	7	8	9	10	11	12
A												
B												
C												
D												
E												
F												
G												
H												

LOT _____













DATE _____

SAMPLES IDENTIFICATION PLAN

	1	2	3	4	5	6	7	8	9	10	11	12
A												
B												
C												
D												
E												
F												
G												
H												

LOT _____

DATE _____

	Manufacturer
	<i>In vitro</i> diagnostic medical device
	Catalogue number
 YYYY-MM	Use-by date
	Batch code
	Temperature limit
	Contains sufficient for <n> tests
	Caution
	Consult instructions for use
	Conformity Marking with technical regulations in Ukraine
	Authorized representative in the European Community/European Union
	CE Conformity Marking

**For any issues related to operation of the kit and technical support,
please contact by telefon number**

+38 044 294-69-78

or write to:

qa@xema.com.ua



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Instruction for use
A solid-phase enzyme immunoassay kit
for the qualitative detection of IgM antibodies
to *Borelia burgdorferi sensu lato*
in human serum or plasma

Borelia burgdorferi IgM EIA

Catalogue number **REF** **K118G**



For 96 determinations



In vitro diagnostic medical device

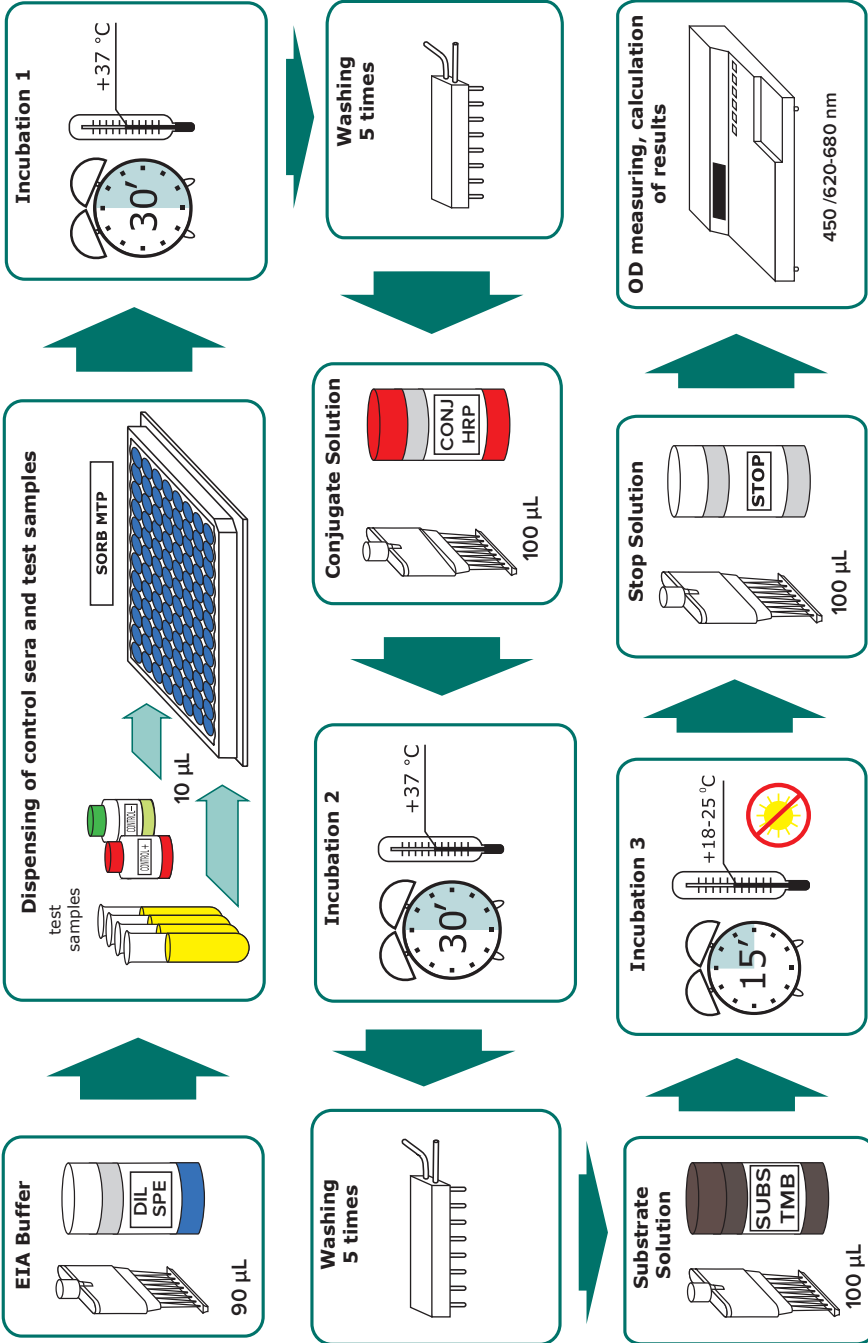


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ASSAY PROCEDURE



During performing several independent series of tests, Positive and Negative Control Serum should be used **each time**.

K118M

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Instruction for use
A solid-phase enzyme immunoassay kit
for the qualitative detection of IgM antibodies
to *Borelia burgdorferi sensu lato*
in human serum or plasma

Borelia burgdorferi IgM EIA

1. INTENDED USE

ELISA reagent kit Borelia burgdorferi IgM EIA is a solid-phase enzyme immunoassay for the qualitative detection of IgM antibodies to *Borelia burgdorferi sensu lato* in human serum or plasma.

The field of application is clinical laboratory diagnostics.

2. GENERAL INFORMATION

Borrelia burgdorferi sensu lato - is a group of borreliosis or Lyme disease pathogens, a common infection, the main host and vector of which is the ixodid tick. The disease is transmitted only through a tick bite.

In the early stages of borreliosis, fatigue, chills and headaches may be observed, and later more serious symptoms may occur, such as joint pain, meningitis, numbness in the extremities, facial nerve paralysis, memory disorders, and eye and heart damage. After the spirochete penetrates the skin, a creeping erythema occurs, and after several days or weeks, it reaches many organs by haematogenous or lymphatic means. In general, the incubation period is from 3 to 45 days.

Early diagnosis of the disease is based on clinical and epidemiological data. The diagnosis is confirmed by laboratory, usually by serological methods - the detection of specific antibodies to *Borrelia burgdorferi* in the blood.

IgM antibodies appear in the blood first, a few days after infection, but can be detected by laboratory tests in 2-3 weeks. After about 6 weeks, the concentration of antibodies reaches a maximum and then gradually decreases. IgG antibodies begin to be detected 4-6 weeks after infection and the maximum amount of IgG antibodies is synthesised 2-3 months after the onset of early symptoms of the disease. Then their number gradually decreases, but they remain in the body for several years.

3. TEST PRINCIPLE

The detection of IgM antibodies to *Borrelia burgdorferi* is based on the indirect enzyme immunoassay principle. On the inner surface of the microplate wells are immobilized recombinant *Borrelia burgdorferi* antigen. The analysis procedure includes three stages of incubation:

- during the first stage specific to *Borrelia burgdorferi* antibodies from the specimen are bound onto the microwell surface;
- during the second stage horseradish peroxidase-conjugated specific monoclonal anti-IgM antibodies bind to the antigen-antibody complexes, fixed in the formed at the previous stage complexes;
- during the third stage, the complexes formed due to the reaction with the chromogen 3,3',5,5'-tetramethylbenzidine are visualized.

After stopping the reaction with a stop solution, the intensity of the color of the microwells is measured. The optical density (OD) in the microwell is directly related to the concentration of the measured IgM antibodies to *Borrelia burgdorferi* in test specimen.

4. KIT COMPONENTS

Code of component	Symbol	Name	Volume	Qty, pcs.	Description
P118MZ	SORB MTP	Microplate	-	1	96-well polystyrene strip microplate coated with recombinant antigen of <i>Borrelia burgdorferi</i> , ready to use
CN118MZ	CONTROL -	Negative Control Serum K-	0.5 mL	1	Solution based on human serum, free of IgM antibodies to <i>Borrelia burgdorferi</i> , with preservative, ready to use (yellow liquid)
CP118MZ	CONTROL +	Positive Control Serum K+	0.2 mL	1	Solution based on human serum, containing of IgM antibodies to <i>Borrelia burgdorferi</i> , with preservative, ready to use (red liquid)
T118MZ	CONJ HRP	Conjugate Solution	12 mL	1	Solution of monoclonal antibodies to IgM conjugated to the horseradish peroxidase, ready to use (red liquid)
SP118MZ	DIL SPE	EIA Buffer	12 mL	1	Buffer solution with detergent and preservative, ready to use (purple liquid)
R055Z	SUBS TMB	Substrate Solution	12 mL	1	Tetramethylbenzidine (TMB) substrate solution, ready to use (colourless liquid)
S008Z	BUF WASH 26X	26x Concentrate Washing Solution	30 mL	1	Buffer solution with detergent, 26x concentrate (colourless liquid)
R050Z	STOP	Stop Solution	12 mL	1	5.0% solution of sulphuric acid, ready to use (colourless liquid)

The kit also includes instruction for use, quality control data sheet and plate sealing tape (2 pcs).

5. EQUIPMENT AND MATERIAL REQUIRED BUT NOT PROVIDED

- microplate photometer with 450/620-680 nm wavelength;
- dry thermostat for $+37^{\circ}\text{C}\pm 1^{\circ}\text{C}$;
- automatic plate washer (optional);
- micropipettes with variable volume, range volume 5-1000 μL ;
- graduated cylinder of 1000 mL capacity;
- distilled or deionized water;
- timer;
- vortex mixer;
- disposable gloves;
- absorbent paper.

6. WARNING AND PRECAUTIONS

In order to prevent incorrect results, strictly follow the recommended order and duration of the analysis procedure.

6.1. The kit is for *in vitro* diagnostic use only. For professional laboratory use.

6.2. Follow the rules mentioned below during the kit using:

- do not use kit beyond expire date;
- do not use the kit if its packaging is damaged;
- in order to avoid contamination, use new tips to pipette samples and reagents;
- use only verified equipment;
- close each vial with its own cap, after using the reagent;
- do not use components of other kits or reagents of other manufacturers;
- do not let wells dry after completing the rinsing step; immediately proceed to the next stage;
- avoid bubbles when adding reagents.

ATTENTION! The TMB substrate solution is light sensitive. Avoid prolonged exposure of the component to light.

6.3. Some kit components, such as stop solution, substrate solution, and washing solution, may cause toxic or irritant effects. If they get on the skin or mucosa, the affected area should be washed with plenty of running water.

6.4. All human products, including patient samples, should be considered potentially infectious. Handling and disposal should be in accordance with the procedures defined by an appropriate national biohazard safety guidelines or regulations.

6.5. The positive and negative control serum included in the kit are negative for antibodies to HIV 1,2, hepatitis C virus and HBsAg, but the reagents should be considered as potentially infectious material and handled carefully.

6.6. Specimens must not contain any azide compounds, as they inhibit activity of peroxidase.

6.7. Wear protective gloves, protective clothing, eye protection, face protection.

6.8. Do not smoke, eat, drink or apply cosmetics in areas where specimens or kit reagents are handled.

6.9. Safety Data Sheet for this product is available upon request directly from XEMA LLC.

6.10. Serious incidents related to the kit must be reported to the manufacturer, Authorized Representative, and to the Competent Authority of the EU member state(s) where the incident has occurred.

7. SPECIMEN COLLECTION, TRANSPORTATION AND STORAGE OF SAMPLES

7.1. Blood sampling should be carried out from the cubital vein with a disposable needle using a vacuum blood sampling system. Serum or plasma specimens should be clearly labeled and identified. Serum must be separated from the clot as early as possible to avoid hemolysis of red blood cells. If there are any visible particles in the sample, they should be removed by centrifugation at 3000-5000 rpm for 20 minutes at room temperature or by filtration.

Don't use samples with high lipidemia, hemolysis as they may give false test results.

7.2. Specimen should be stored at +2...+8°C up to 3 days. Specimen held for a longer time, should be placed in a freezer at -15°C or below, avoid no more than three cycles of thawing-freezing samples.

7.3. For the transportation of samples, it is recommended to use triple packaging. The primary package is the labeled tube containing the sample. Secondary packaging is a polyethylene bag that is hermetically closed with a zip-lock. The outer packaging is a heat-insulating container, while the secondary packaging is placed in the outer packaging for transportation in the center of the thermal container. Frozen refrigerants are placed on the bottom, along the side walls of the thermal container, and cover the samples with them.

8. TRANSPORTATION AND STORAGE TERMS OF KIT, WASTE DISPOSAL

Information about the singularity storage conditions, transportation of the kit, and disposal of waste should be taken into account by all persons who participate in these processes.

8.1. Transportation

The *Borrelia burgdorferi* IgM EIA kit should be transported in the manufacturer's packaging at +2...+8°C. Single transportation at the temperature up to 25°C for 5 days is acceptable.

8.2. Storage

The *Borrelia burgdorferi* IgM EIA kit should be stored in the manufacturer's packaging at +2...+8°C. Do not freeze.

The kit contains reagents sufficient for 96 determinations including Positive and Negative Control Serum.

Once opened test-kit is stable for 2 months when stored properly as intended by manufacturer at 2-8°C.

In case of partial use of the kit, the components should be stored in the following way:

- the remaining strips should be immediately resealed in the bag along with the silica gel, closed with the zip-lock, and stored at +2...+8°C within 2 months;
- EIA Buffer, Substrate Solution, Stop Solution, and Washing Solution concentrate after opening the vial, can be stored tightly closed at +2...+8°C until the kit's shelf life;
- Conjugate Solution, Positive and Negative Control Serum after opening the vial, can be stored tightly closed at +2...+8°C within 2 months;
- diluted Washing Solution can be stored at room temperature (+18...+25°C) for up to 5 days or at +2...+8°C for up to 14 days.

Kits that were stored in violation of the storage condition cannot be used.

8.3. Disposal

Expired kit components, used reagents and materials, as well as residual samples must be inactivated and disposed of in accordance with legal requirements.

9. REAGENTS PREPARATION

9.1. All reagents (including microstrips) and test samples should be allowed to reach room temperature (+18...+25 °C) for at least 30 minutes before use.

9.2. Microplate preparation

Open the package with the microplate and install the required number of strips into the frame. The remaining strips should be immediately resealed in the bag along with the silica gel and closed with the zip-lock to prevent moisture from affecting the plate's strips.

9.3. Washing solution preparation

Add the contents of the 30 mL washing solution concentrate vial to 750 mL of distilled or deionized water and mix thoroughly. In case of partial use of the kit, take the necessary amount of washing solution concentrate and dilute it 26 times with distilled or deionized water.

The spending of the components in case of partial use of the kit is given in the table:

Quantity of strips	1	2	3	4	5	6	7	8	9	10	11	12
Volume of the washing solution concentrate, mL	2.5	5	7.5	10	12.5	15	17.5	20	22.5	25	27.5	30
Volume of water, mL	62.5	125	187.5	250	312.5	375	437.5	500	562.5	625	687.5	750

10. ASSAY PROCEDURE

- 10.1. Put the desired number of strips into the frame based on the number of test samples and 4 wells for Positive and Negative Control Serum (1 well for Positive Control (CP) and 3 wells for Negative Control Serum (CN)).
- 10.2. Dispense **90 µL of EIA Buffer** to all wells.
- 10.3. Dispense **10 µL of Positive and Negative Control Serum as well as 10 µL of test serum/plasma samples (SAMP)** to the wells of the microplate according to the scheme below. The introduction of Positive and Negative Control Serum and test samples should be carried out within 5 minutes to ensure equal incubation time for the first and last samples.

NOTE: during performing several independent series of tests, Positive and Negative Control Serum should be used each time.

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A	CP	SAMP5	SAMP13	SAMP21								
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H	SAMP4	SAMP12	SAMP20									

- 10.4. Carefully mix the contents of the microplate in a circular motion on a horizontal surface, cover strips with a plate sealing tape and incubate for **30 minutes at +37°C**.
- 10.5. At the end of the incubation period, remove and discard the plate cover. Aspirate and wash each well **5 times** using an automatic washer or an 8-channel dispenser. For each washing, add 300 µL of Washing Solution (see 9.3) to all wells, then remove the liquid by aspiration or decantation. The residual volume of the Washing Solution after each aspiration or decantation should be no more than 5 µL. After washing, carefully remove the remaining liquid from the wells on the absorbent paper. For the automatic washer/analyzer, the Washing Solution volume can be increased to 350 µL.
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- 10.8. At the end of the incubation period, aspirate and wash each well **5 times** as described in 10.5.
- 10.9. Add **100 µL of Substrate Solution** to all wells. The introduction of the Substrate Solution into the wells must be carried out within 2-3 minutes. Incubate the microplate in the dark **at room temperature (+18...+25°C) for 15 minutes**.
- 10.10. Add **100 µL of Stop Solution** to all wells in the same order as the Substrate Solution. After adding the Stop Solution, the contents of the wells turn yellow.
- 10.11. Read the optical density (OD) of the wells at 450 nm and reference light filters 620–680 nm using a microplate photometer within 5 minutes of adding the stop solution. Set photometer blank on air.

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11.1. The test results are valid only if Positive and Negative Control Serum are within the specified ranges and if all other test parameters are also within the given assay specifications, namely:

- OD of CONTROL- < 0.15;
- OD of CONTROL+ > 1.5;
- $OD(CN) \times 0,5 < OD(CN) < OD(CN) \times 2$.

11.2. Calculate the mean OD value of the Negative Control Serum:

$$\text{meanOD(CN)} = (\text{OD1(CN)} + \text{OD2(CN)} + \text{OD3(CN)})/3$$

11.3. Calculate the Cut Off value by adding to the mean OD value of the Negative Control Serum the coefficient 0.3.

$$\text{Cut off} = \text{meanOD(CN)} + 0.3$$

11.4. Calculate Positivity Index (PI) for each sample by dividing the OD of the sample by Cut off value:

$$\text{PI} = \text{ODsample}/\text{Cut off}$$

12. INTERPRETATION OF THE RESULTS

- If PI value > 1.1 the result is **POSITIVE**,
- If PI value is between 0.9 and 1.1 the result is **EQUIVOCAL**,
- If PI value < 0.9 the result is **NEGATIVE**.

If equivocal results are obtained, it is recommended to conduct a reexamination of the sample in several replicates. If the result is equivocal again, a new sample should be obtained within 5-7 days and retested. If the result remains equivocal, the sample should be considered negative.

13. PERFORMANCE CHARACTERISTICS

13.1. Analytical performance characteristics

13.1.1. Precision of Measurement

Reproducibility (Intra assay repeatability) was determined by evaluation the coefficient of variation (CV) for 2 different samples, with different levels of IgM antibodies to the *Borrelia burgdorferi sensu lato* antigen, during 1 day in 43 replicates on one series of ELISA kit.

Nº serum	mean OD	mean PI	CV PI, %
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Reproducibility (Inter assay reproducibility) was determined by evaluating the coefficients of variation (CV) for 2 samples of each serum for 4 days in 8-replicate determinations.

Nº serum	mean OD	mean PI	CV PI, %
1	0.27	0.9	8.1
2	1.1	3.66	6.8

13.1.2. Analytical specificity

For the analysis result is not affected by the presence in the sample of bilirubin in a concentration of up to 0.21 mg/mL, hemoglobin in a concentration of up to 10 mg/mL and triglycerides in a concentration of up to 10 mg/mL.

13.2. Diagnostic performance characteristics

The clinical sensitivity and specificity of the assay were evaluated using a serum panel with 8 positive and 8 negative clinical serum samples and were 100%. The relative sensitivity and specificity of the assay were investigated in a sample of 96 donor sera characterised for the content of IgM antibodies to *Borrelia burgdorferi* antigen in commercial Kits, and the results were 99.7% and 97.5%, respectively.

14. LIMITATIONS

A positive result is evidence of the presence of IgM antibodies to *Borrelia burgdorferi sensu lato* antigen. The diagnosis cannot be based on the results of an IgM antibody test to *Borrelia burgdorferi* alone and requires confirmation, including an assessment of the patient's clinical presentation and history, the detection of IgG antibodies to *Borrelia burgdorferi* and conducting an immunoblot test.

A negative result indicates the absence of IgM antibodies to *Borrelia burgdorferi sensu lato* or antibody levels below the limit of sensitivity of the kit.

The results of serum tests in patients with immunosuppression and immunological disorders should be interpreted with caution.

15. REFERENCES

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5. НПАОП 85.14-1.09-81. Правила облаштування, техніки безпеки, виробничої санітарії, протиепідемічного режиму і особистої гігієни при роботі в лабораторіях (відділеннях, відділах) санітарноепідеміологічних установ системи Міністерства охорони здоров`я СРСР (НАОП 9.1.50-1.09-81).

SAMPLES IDENTIFICATION PLAN

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	Manufacturer
	<i>In vitro</i> diagnostic medical device
	Catalogue number
 YYYY-MM	Use-by date
	Batch code
	Temperature limit
	Contains sufficient for <n> tests
	Caution
	Consult instructions for use
	Conformity Marking with technical regulations in Ukraine
	Authorized representative in the European Community/European Union
	CE Conformity Marking

**For any issues related to operation of the kit and technical support,
please contact by telefon number**

+38 044 294-69-78

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