Rotavirus Antigen RapiCard

Cat. # 176066-1

Immunochromatographic rapid assay for the Detection of Rotavirus Antigens in Human Stool Specimens

IVD See external label Σ **Σ=25 tests**

REF Cat. #176066-1

2°C-30°C for test card and Sample tube

INTENDED USE

Rotavirus test is an *in vitro* qualitative immunochromatographic assay for the rapid detection of *rotavirus* antigens in human stool specimen. The test results are intended to aid in the diagnosis of *rotavirus* infection and to monitor the effectiveness of therapeutic treatment.

INTRODUCTION

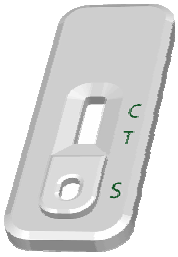
Rotaviruses are one of the major causes of pediatric gastroenteritis and diarrhea worldwide. The improvement of food, water, and hygiene has done nothing to decrease the incidence of rotavirus disease. Almost every child on the planet may get infected by age 5. Scientists say that families of the 900,000 young children around the world who die each year from rotaviruses. Many of them get it between December and April in the temperate climates of the northern hemisphere. Most of these deaths occur in developing countries. The infection usually begins with a fever. Soon the little one begins to vomit and has a nasty tummy-ache. The vomiting goes away, followed by watery diarrhea that lasts from 3 to 9 days. Most of the time, kids recover with little difficulty. Sometimes, severe dehydration results. The extreme dehydration that can be caused by rotaviruses is second only to the dehydration caused by cholera. The infection starts suddenly and lasts for an average of four to six days. Rotaviruses are extremely contagious. Only a very few particles are needed to transmit infection. They originate in the stool, but are found throughout the environment wherever young children spend much time, especially during the winter months. They are resistant to disinfectants used to clean surfaces and to anti-bacterial hand-washing agents. Rotavirus particles remain active on human hands for at least 4 hours, on hard dry surfaces for 10 days, and on wet areas for weeks. Untreated, rotavirus infection may result in severe illness with dehydration and disturbances of the body's normal electrolyte balance, especially in babies and preschool children. Rotavirus is the cause of up to 50% of the hospitalized cases of diarrheal illness in infants and young children. Rotavirus induced dehydration is a major cause of infant morbidity in both developed and underdeveloped countries, and a major cause of infant mortality in the developing countries. The highest prevalence of the disease is experienced in temperate climates during the cooler months of the year. In tropical climates, rotavirus infection can occur all year round. The age groups most susceptible to the disease are that of infants and children

PRINCIPLE OF THE TEST

Rotavirus Antigen Test is a sandwich solid phase immunochromatographic assay. To perform the test, an aliquot of diluted stool sample is added to the sample well of the test cassette. The sample flows through a label pad containing rotavirus antibody coupled to red-colored colloidal gold. If the sample contains rotavirus antigens, the antigen will bind to the antibody coated on the colloidal gold particles to form antigen-antibody-gold complexes. These complexes move on the nitrocellulose membrane by capillary action toward the test line region on which rotavirus specific antibodies are immobilized. As the complexes reach the test line, they will bind to the antibody on the membrane in the form of a line. A second red control line will always appear in the result window to indicate that the test has been correctly performed and the test device functions properly. If rotavirus antigen is not present or lower than the detection limit of the test, only the control line will be visible. If the control line dose not developed, the test is invalid.

MATERIALS PROVIDED

1. Rotavirus Antigen test card
   Each cassette contains a test strip with rotavirus specific antibody on the test region of the membrane and colored rotavirus antibody-gold conjugate pad.



Rotavirus Antigen Test Card


Sample bottle

2. Sample bottle
   Each sample bottle contains 1.5 ml of stool specimen collection buffer. Store at 2-30^{o}C

MATERIALS NOT PROVIDED

2. Specimen collection container
3. Timer.

WARNINGS AND PRECAUTIONS

1. For *in vitro* diagnostic use.
2. Wear protective glove while handling kit components and test specimens.
3. Patient specimens and inactivated Positive Control may contain infectious agents and should be handled and disposed of as potential biohazards.

4. Do not use kit components beyond expiration date.
5. Dispose all used materials in appropriate container. Treat as potential biohazard.

STORAGE INSTRUCTION

1. The expiration date is indicated on the package label.
2. Store Sample Collection Tubes at 2-30°C.
3. Store test device at 2-30 °C.

SPECIMEN COLLECTION AND STORAGE

Stool samples must be taken as soon as the symptoms appear. Viral particles decrease in number after one week. Stool specimens should be collected in containers that do not contain media, preservatives, animal serum or detergents as any of these additives may interfere with the Rotavirus Antigen Test.Specimens may be stored at 2-8°C for 2 days without interfering with the assay performance. For long-term storage of specimens, -20°C or colder is recommended. Repeated freezing and thawing of specimens is not recommended and may cause erroneous results. Do not store specimens in self-defrosting freezers.

REAGENT PREPARATION

Bring all reagents, including test device, to room temperature (20-30°C) before use.

SPECIMEN PREPARATION

1. Unscrew the sample bottle, use the attached applicator stick attached on the cap to transfer small piece of stool (4-6 mm in diameter; approximately 50 mg – 200 mg) into the sample bottle containing specimen preparation buffer .
   For liquid or semi-solid stools, add 100 microliters of stool to the vial with an appropriate pipette.
2. Replace the stick in the bottle and tighten securely. Mix stool sample with the buffer thoroughly by shaking the bottle for a few seconds.

PROCEDURE

1. Bring all materials and specimens to room temperature (8 – 30°C).
2. Remove the test card from the sealed foil pouch.
3. Hold the sample bottle upright with the tip point toward the direction away from the test performer, snap off the tip.
4. Hold the bottle in a vertical position over the sample well of the test card, deliver 3 drops (120 -150 µL) of diluted stool sample to the sample well.
5. Read the result between 5 - 10 minutes. A strong positive sample may show result earlier.

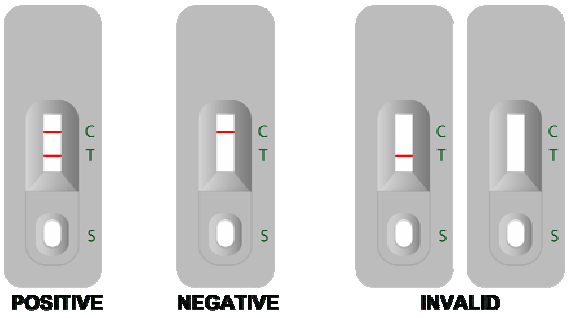
Note: Results after 10 minutes may not be accurate.

INTERPRETATION OF RESULTS

Positive result: A distinct pink colored band appears on test line regions, in addition to a pink line on the control line region.

Negative result: No line appears in the test line region. A distinct pink line shows on the control line region.

Invalid: The control line next to the test line does not become visible within 15 minutes after the addition of the sample.



QUALITY CONTROL

1. The control band is an internal reagent and 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 which is not provided with this test kit may be commercially available.

LIMITATIONS

1. The test is for qualitative detection of rotavirus antigen in stool sample and dose not indicate the quantity of the antigens.
2. The test is for *in vitro* diagnostic use only.
3. The test result should be used only to evaluate with patient with signs and symptoms of the disease. A definitive clinical diagnosis should only be made by the physician after all clinical and laboratory finding have been evaluated.

EXPECTED VALUES

Rotavirus Antigen Test detects the presence of *rotavirus* antigens in stool specimens. Expected values for any given population should be determined for each laboratory. The positivity rate of any given laboratory may vary depending on geographic location, season, and living environment.

PERFORMANCE CHARACTERISTICS

Sensitivity and Specificity

Rotavirus Antigen Test has shown 98% sensitivity and 97% specificity comparing to the ELISA results.

Reproducibility

Reproducibility of Rotavirus Antigen Test was determined using negative, low positive, and high positive controls. These samples were tested in replicates of 10 in a blind study by 3 operators working independently in the same laboratory. The agreement of the expected result was 100%.

Cross Reactivity

Rotavirus Antigen Test may cross with the rotavirus antigen from monkey and porcine.

REFERENCES

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