FDENO1B
6. After applying the specimen, immediately press the "TEST START" button. STANDARD F

# Dengue IgM/IgG FIA

STANDARD™ F Dengue IgM/IgG FIA

SD BIOSENSOR

KIT CONTENTS			
Test Device	Acay duart	P	
Test device (individually in a foil pouch with desiccant)	Assay diluent	STANDARD™ Ezitube+ (10 µl)	Instuctions for use

### MATERIALS REQUIRED BUT NOT PROVIDED

STANDARD F Analyzer
 Timer

### SPECIMEN COLLECTION AND PREPARATION

- Serum

  Collect the whole blood into the commercially available plain tube, NOT containing anti-coagulants such as heparin, EDTA or sodium dirate by venipuncture and leave to settle for 30 minutes for blood coagulation and then centifuge blood to get serum specimen of supernatant.

  If serum in the plain tube is stored in a reffigerator at 2 ~8°C/38 ~40°C, the specimen can be used for testing within 1 week after collection. Using the specimen in the long-term keeping more than 1 week can cause non-specific recordino. For prolonged storage, it should be at below ~40°C/~40°F.

  It should be brought to room temperature prior to use.

- Plasma
  Collect the venous blood into the commercially available anti-coagulant tube such as heparin, EDTA or sodium critare by venipuncture and centrifuge blood to get plasma specimen of supernatant.

  If plasma in an anti-coagulant tube is stored in a refrigerator at 2 ° 8°C / 36° 46°F, the specimen can be used for testing within 1 week after collection. Using the specimen in the long-term keeping more than 1 week on cause non-specific reaction. For prolonged storage, it should be at below -40°C / -40°F.

  It should be brought to room temperature prior to use.

- Whole blood

  [Capillary whole blood]

  1. Capillary whole blood should be collected aseptically by fingertip.

  2. Clean the area to be lanced with an alcohol swab.

  3. Squeeze the end of the fingertip and pierce with a sterile lancet.

  4. Collect the capillary whole blood to the black line of the disposable dropper for the testing.

  5. The capillary whole blood must be tested immediately after collection.

The capillary whole blood must be tested minieusively available anti-coagulant tube such as heparin, EDTA or sodium citrate by venipuncture.

If venous whole blood in an anti-coagulant tube is stored in a refrigerator at 2 °8°C / 36 ° 46°F, the specimen can be used for testing within 1 °2 days after collection.

Do not use hemolyzed blood specimens.

Anticoagulants such as heparin, EDTA or sodium citrate do not affect the test result.

As known relevant interference, hemolytic specimen, theumatoid factors contained specimen and lipaemic, Icteric specimen can lead to impair the test results.

Use separate disposable materials for each specimen in order to avoid crosscontamination which can cause erroneous results.

# TEST PROCEDURE

- Preparation
   Allow kit components and collected specimen to room temperature at least 30 minutes before starting
- the test.

  Carefully read instructions for using the STANDARD F Dengue IgM/IgG FIA.

  Check the expiry date at the back of the foil pouch. Use another lot, if expiry date has passed.

  Open the foil pouch, and check the test device and the desiccant in the foil pouch.







Test device

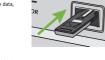
Do not write on the barcode or damage the barcode of the test device.

Foil pouch

STANDARD F200 and F2400 Analyzer Prepare a STANDARD F Analyzer. Take the test device out of the foil pouch and place it on a flat and dry

surface. Write patient information on the label of test device. Select the 'Standard Test' mode according to the analyzer's manual as below. 

Insert the test device to the test slot of the analyzer. When inserting the test device to the analyzer, the analyzer will read the barcode data, and check the test device is valid.





<sup>7</sup>//10 µl ∕

PERFORMACE CHARACTERISTICS





START

LIMITATION OF TEST

QUALITY CONTROL

The contents of this kit are to be used the qualitative detection of anti-Dengue IgM/IgG from blood

The contents of this kit are to de used for the qualitative detection of a inchanging lightlying from blood specimens. Failure to follow the test procedure or improper specimen collection may adversely affect test performance or invalidate the test result.

For more accuracy of immune status, additional follow-up testing using other laboratory methods is recommended.

A negative test result may occur if the level of antibody in a specimen is below the detection limit of the test or if the specimen was collected, transported, or stored improperly.

Negative test results do not rule out possible other infections.

Positive test results do not rule out co-infection with other pathogens.

Internal procedural control
In the internal procedural control
In the internal procedural control zone is on the membrane of the test device. STANDARD F Analyzers read the fluorescence signal of the internal procedural control zone and decide whether the result is valid or invalid.

Theimalifer souldenotesthathefluorescencesignalisnotwithinthepre-setrange. If these creenofs TANDARD FAnalyzers hows 'Invalid Device', turnoffandturnonoftheanalyzeragainandre-testwithanewtestdevice.

STANDARD F200 Analyzer

Take the test device out of the foil pouch and place it on a flat and dry surface. Write a specimen information on the label of test device.









Prepare the STANDARD F Analyzer and set the 'READ ONLY" mode following the instructions in the manual.



INTERPRETATION OF TEST RESULTS

TERM REPARENCE OF TEST RESOLUTION								
Result COI (Cutoff index) value Interpretation								
Positive	COI ≥ 1.0	Positive for Dengue IgM/IgG antibody						
Negative	COI < 1.0	Negative for Dengue IgM/IgG antibody						
Invalid	Not show the COI value	Retest should be performed						

Desiccant

Results should be considered in conjunction with the clinical history and other data available to the physician.

The Analyzer's test result of a specimen is given either as Positive(+) / Pos(+) or Negative(-) / Neg(-) with a COI (cutoff index) value. Cut-off index (COI) is based on the ratio of assay signal to cut-off value.

## **EXPLANATION AND SUMMARY**

### Introduction

■ Introduction

Dengue viruses, transmitted by Aedes aegypti and Aedes albopictus mosquitoes, are widely distributed throughout the tropical and subtropical areas of the world. There are four known distinct serotypes of dengue virus (DEN-1, DEN-2, DEN-3 and DEN-4), Rapid and reliable tests for primary and secondary infections of Dengue are essential for patient management. An infected person experiences the acute symptoms of Dengue when there is a high level of the virus in the bloodstream. As the immune response fights the Dengue infection, the person's 8 cells begin producing IgNs and IgGs antibodies that are released in the blood and lymph fluid, where they recognize and neutralize the Dengue virus and viral molecules such as the Dengue non-structural protein 1 (NS1) antigen.

■ Intended use

STANDARD F Dengue IgM/IgG FIA is a fluorescence immunoassay for the detection of IgM/IgG antibodies against Dengue virus in human serum, plasma, or whole blood specimens. This test let it is for in vitro use only.

This is intended for professional use only for an intial screening test. Test results of this let have to analyze with appropriate analyzer, STANDARD F Analyzer, manufactured by SD BIOSENSOR.

## ■ Test principle

m Test principle

STANDARD F Dengue IgM/IgG FIA has "M", "G" test lines and "C" control line. Monoclonal anti-human IgM and monoclonal anti-human IgG are immobilized at two individual test lines respectively (M, G line) on the nitrocellulose membrane. Inactivated Dengue virus in the antigen pad and europium conjugated antibodies (monoclonal anti-Dengue Ent-Fip in the conjugation pad release by adding assay diluents and react with anti-Dengue IgM or IgG in patient specimen. If human anti-Dengue IgM or IgG esist in patient serum, complexes with anti-human IgM/IgG on the test Iness, human IgM/IgG in patient specimen, inactivated Dengue virusin the antigen pad, and europium conjugated antibodies in the conjugation pad make IgM correscence signal. The intensity of the fluorescence light generated on the membrane is scanned by the STANDARD F Analyzer can analyze the presence of the analyte in the clinical specimen by processing the results using pre-programmed algorithms and display the test result on the screen.

# KIT STORAGE AND STABILITY

# WARNINGS AND PRECAUTIONS

- Do not resize the test lit.

  Use the STANDARD F Dengue IgM/IgG FIA at 15 ~ 32°C / 59 ~ 90°F and 10 ~ 90% RH.

  Do not use the lit if the pouch is damaged or the seal is broken.

  Do not smoke, drink or eat while handling specimen.

  Wear personal protective equipment, such as gloves and lab coats when handling kit reagents. Wash hands thoroughly after you experiment.
- Clean up spills throughly using an appropriate disinfectant.
   Handle all specimens as if they contain infectious agents.
   Observe established precautions against microbiological hazards throughout testing procedures.
   Dispose of all specimens and materials used to perform the test as bio-hazard waste. Laboratory chemical and biohazard wastes must be handled and discarded in accordance with all local, state, and
- national regulations.

  10. The barocide of the test device is used by analyzer to identify the type of test being run and to identify the individual test device so as to prevent to a second read of the test device by the same analyzer.
- the individual test device so as to prevent to a second read of the test device by the same analyzer.

  11. Immediately use the test device after taking out of a foil pouch.

  12. As the detection reagent is a fluorescent compound, no visible results will form on the test device. The STANDARD F Analyzers authorized by SD BIOSENSOR must be used for result interpretation.

  13. Improper specimen collection, handling or transport may yield inaccurate results.

  14. Do not write on the barcode or damage the barcode of the test device.

43 of Dengue IgM/IgG positive confirmed specimens and 184 of Dengue IgM/IgG specimens were tested internally. For STANDARD™ F Dengue IgM/IgG FIA, the result she sensitivity and 183/184 (99%) specificity for plasma specimen.

	Reference test (ELISA)			
Dengue IgM/IgG		POS	NEG	TOTAL
	POS	42	0	42
STANDARD™ F Dengue IgM/IgG FIA	NEG	1	0	1
igivi/igG FIA	TOTAL	43	0	43
Clinical Specificity	Sensibilidad	1: 42/43 (98%)		
Clinical Specificity			ference test (ELIS	A)
Clinical Specificity  Dengue Igl			ference test (ELIS	A) TOTAL
Dengue Igf		Re		
Dengue Igf STANDARD™ F Dengue	W/IgG	POS	NEG	
Dengue Igi	M/lgG POS	POS 0	NEG 1	TOTAL 1

# ■ ANALYTICAL PERFORMANCE 1. Analytical Sensitivity (Limit of Detection)

Analytical Sensitivity (Limit of Detection)							
ne analytical sensitivity [Limit of Detection (LoD)] of STANDARD™ F Dengue IgM/IgG FIA are shown below;							
STANDARD™ F Dengue IgM/IgG FIA							
Antibody Limit of Detection(ug/mL)							
Dengue IgM 2.0							
Dengue IgG 3.9							

1		Acinetobacter baumannii	
2		Bacteriodes fragilis	
3	Ī	Bordetella pertussis	
4	Ī	Candida albicans	
5		Chlamydia pneumoniae	
6		Escherichia coli	
7	Bacteria	Fusobacterium nucleatum	2.0x10 <sup>6</sup> cfu/mL
8	Ī	Haemophilus influenzae	
9	Ī	Kingella kingae	
10		Klebsiella pneumoniae	
11		Lactobacillus plantarum	
12		Legionella pneumophila	
13		Moraxella catarrhalis	

# 2. Cross Reactivity STANDARD™ F Dengue IgM/IgG FIA does not be affected by those potenti

netobacter baumannii	
Bacteriodes fragilis	
Bordetella pertussis	
Candida albicans	
amydia pneumoniae	
Escherichia coli	
bacterium nucleatum	2.0x10 <sup>6</sup> cfu/mL
emophilus influenzae	
Kingella kingae	
ebsiella pneumoniae	
tobacillus plantarum	
ionella pneumophila	
loraxella catarrhalis	
	,

Neisseria mucosa Peptostreptococcus anaerobius Prevotella oralis Proteus mirabilis

Serratia marcescens Staphylococcus aureus

Streptococcus mutans

Streptococcus pyogenes Streptococcus salivarius

Veillonella parvula

Adenovirus 5 Adenovirus 11 Coranavirus 229E Coranavirus OC43 Cytomegalovirus AD–169
Cytomegalovirus Towne
Echovirus Type 3
Enterovirus Herpes Simplex virus 1 Herpes Simplex virus 2 HSV Type 1 Human Metapneumovirus A2 Human Metapneumovirus B1 Human Metapneumovirus B2 Influenza A H1N1 (FM/1/47)

Influenza A HTN1 (Mexxco/4108/2009)
Influenza A H1N1 (New Jersey/8/76)
Influenza A H1N1 (PR/8/34)
Influenza A H3N2
Influenza B Hong Kong 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 Measles virus Mumps virus Parainfluenza virus 1 2.0x10<sup>5</sup> TCID<sub>so</sub>/mL Parainfluenza virus 2 Parainfluenza virus 3 Parainfluenza virus 4A Parainfluenza virus 4B Rhinovirus Type 2 Rhinovirus Type 7 Rhinovirus Type 15 Rhinovirus Type 18

lo.	Interfering Substances	Concentration
1	Acetamidophenol	20 mg/mL
2	Acetylsalicylic acid	20 mg/mL
3	Albuterol	20 mg/mL
4	Beclomethasone	10 ug/mL
5	Bilirubin	200 ug/mL
6	Budesonide	10 ug/mL
7	Chlorpheniramine	5 mg/mL
8	Dextromethorphan	10 mg/mL
9	Diphenhydramine	4 mg/mL
LO	Flunisolide	500 ng/mL
11	Fluticasone	500 ng/mL
12	Guaiacol	30 mg/mL
13	Hemoglobin	10 mg/mL
L4	Homeopathic Allergy Medicine	20 mg/mL
15	Ibuprofen	20 mg/mL
16	Mucin	10 mg/mL
L7	Oxymetazoline	0.05 mg/mL
18	Phenylephrine	10 mg/mL
19	Ribavirin	1 ug/mL
20	Rimantadine	500 ng/mL
21	Synagis	4 μg/mL
22	Tobramycin	500 ng/mL

3. Interference Substances
The following substances do not interfere the test result up to the indicated concentrations;

No. Interfering Substances Concentration 23 Triamcinolone 500 ng/mL

20 ms/ml 24 Triglyceride 9 ng/mL



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SYMBO											
[===]	Reference number	Â	Caution	23	Use by	LOT	Batch code	[]i	Consult Instructions for Use	(2)	Do not re-use
IVD	In vitro Diagnostics	<b></b>	Note	***	Manufacturer	$\sim$	Date of manufacture	Σ	Contains Sufficient for <n> Tests</n>	杰	Keep away from sunlight
*	Indicate that you should keep the product dry	1		in which t	erature he transport and handled.	$\epsilon$	This product fulfills the requirements of the European Directive 98/79/EC.	8	Do not use if packaging is damaged		

EC REP

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