

COVID-19 NAb

Rapid COVID-19 Neutralizing Antibody (NAb) "Quantitative" Test

A Rapid Immunochromatographic Test for the Quantitative Detection of Neutralizing Antibodies (NAb) Titer post COVID-19 Vaccination or after SARS-CoV-2 Infection in Human Finger-prick Blood, Serum or Plasma



For Professional In Vitro Diagnostic use only

Read Instructions before use

TestNOW® - COVID-19 NAb Test Device is Rapid immunochromatography in vitro test for the Quantitative detection of circulating Neutralizing Antibodies (NAb) Titer against SARS-CoV-2 that block the interaction between the Receptor Binding Domain (RBD) of the viral Spike Protein (S) with the Angiotensin Converting Enzyme-2 (ACE2) cell surface receptor. TestNOW® - COVID-19 NAb Test detects Neutralizing Antibodies (NAb) in whole blood, serum and plasma that neutralize the RBD-ACE2 interaction after SARS-CoV-2 infection or post COVID-19 vaccination. TestNOW® - COVID-19 NAb is a Point-Of-Care finger-prick whole blood Quantitative test for checking the efficacy of COVID-19 vaccines and monitoring the levels of protective, neutralizing antibodies Titer longitudinally to help determine duration of immunity.

SUMMARY

Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2, or 2019-nCoV) is an enveloped non-segmented positive-sense RNA virus. It is the cause of coronavirus disease 2019 (COVID-19), which is contagious in humans. SARS-CoV-2 has several structural proteins including spike (S), envelope (E), membrane (M) and nucleocapsid (N). The spike protein (S) contains a Receptor Binding Domain (RBD), which is responsible for recognizing the cell surface receptor, Angiotensin Converting Enzyme-2 (ACE2). It is found that the RBD of the SARS-CoV-2 S protein strongly interacts with the human ACE2 receptor leading to endocytosis into the host cells of the deep lung and viral replication. Infection with the SARS-CoV-2 or post COVID-19 vaccination initiates an immune response, which includes the production of antibodies in the blood. The secreted antibodies provide protection against future infections from viruses, because they remain in the circulatory system for months to years and will bind quickly and strongly to the pathogen to block cellular infiltration and replication. These sub-group of IgG antibodies are named Neutralizing Antibodies (NAb). Clinical study has shown that Serum IgG against RBD best correlates with virus-neutralizing activity and disease severity1.

PRINCIPLE

TestNOW® - COVID-19 NAb Test Device utilizes the principle of "Sandwich" Immunochromatography. Mouse anti-human IgG antibodies are immobilized on the nitrocellulose membrane as Test line (T) in the test window of the device. As the test sample flows through the membrane within the test device, the colored Receptor Binding Domain (RBD)-colloidal gold conjugate forms complex with specific Neutralizing Antibodies (NAb) against SARS-CoV-2, if present in the sample. This complex moves further on the membrane to the test line region where it is captured by the anti-human IgG antibodies coated on the membrane, leading to formation of a colored band, which indicates a positive test result. The intensity of colored band in the test line region is Neutralizing Antibody (NAb) concentration-dependent, higher the concentration of Neutralizing Antibody (NAb) in the tested sample, the stronger the colored band is. Absence of this colored band in the test window indicates a negative test result. A built-in control line (C) will always appear in the test window when the test has performed properly, regardless of the presence or absence of Neutralizing Antibodies (NAb) against SARS-CoV-2 in the specimen.

MATERIALS PROVIDED

- TestNOW® COVID-19 NAb Test device (Kit Size: 25 Tests/Box)
- 2. Sample Buffer (One Bottle of 6.5 ml)
- 3. UniSampler™ Device (26 Collection Tubes + 26 Blood Collectors)
- 4. RFID Card 1
- 5. Instructions for use 1

MATERIALS REQUIRED BUT NOT PROVIDED

- Timer or clock
- Safety Lancet
- Alcohol Swab 3.
- Disposable gloves and disinfectant 4.
- 5. Biohazard waste container
- 6
- Micropipette for Serum or Plasma testing

 RapiRead™ CUBE Reader (CE Marked) To be purchased separately 7.

STORAGE

- Store the test device at 4° to 30°C in the original sealed pouch.
- The expiration date indicated on the pouch is based on the storage conditions.
- The test device should remain in its original sealed pouch until ready for use. After opening, the test device should be used immediately. Do not reuse the device.

SPECIMEN COLLECTION AND PREPARATION

- The whole blood, serum or plasma specimen should be collected under standard laboratory conditions.
- Heat inactivation of specimens, which may cause hemolysis and protein denaturation, should be avoided.
- The test works best on fresh whole blood / serum / plasma samples. If testing cannot be performed immediately, serum / plasma may be stored at 2-8°C up to 3 3. days in case of delay in testing. For long-term storage, serum / plasma specimens can be frozen at -20°C for 3 months or -70°C for longer period. Repeated freezing and thawing of the specimen should be avoided.
- Sodium azide can be added as a preservative up to 0.1% without affecting the test results.

QUALITY CONTROL

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.

- Bring the kit components to room temperature before testing.
- Open the pouch and remove the Test Device. Once opened, the test device must be used immediately. 2.
- Label the test device with sample identification (ID). 3
- Wash your hand thoroughly and dry completely. 4
- Rub and Wipe your ring or middle finger of non-dominant hand.

- 6. Using safety lancet puncture the side of your finger.
- 7. Collect 10 µl blood using Blood Collector (See instructions below) and perform testing immediately.
- After applying 3 drops of pre-mix blood into the sample well (S), read and record the results at 15 Minutes by RapiRead™ CUBE Reader. For Timer Protocol, please consult RapiRead™ CUBE Reader Product Manual or Brochure.

Important Note: Result after 15 minutes may not be accurate.

SERUM / PLASMA PROTOCOL

TestNOW® - COVID-19 NAb has been designed for human finger-prick blood. However, Serum or plasma samples can be used for testing. Instead of taking finger prick blood with blood collector, apply 5µl of Serum or Plasma into the Collection Tube using Micropipette and follow "Instructions to Use UniSampler™ Device".

INSTRUCTIONS TO USE UniSampler™ DEVICE



 The UniSampler™ Device contains a Collection Tube (left) and a Blood Collector with Cap (right).



Add 5 drops of Sample Buffer from bottle into the Collection Tube.



Use a Lancet to draw finger-prick blood.



 Gently touch the tip of Blood Collector to blood droplet. Capillary action will completely fill 10 µl of blood and stop.

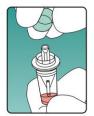
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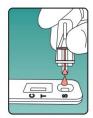
 Fully Insert the Blood from the Blood Collector into the Collection Tube and <u>push</u> firmly to close tightly.



6. Shake the UniSampler™ with "Jerk" 3-4 times to completely take out blood from Blood Collector into the Sample Buffer, followed by complete mixing.



7. Remove the Cap of the UniSampler™

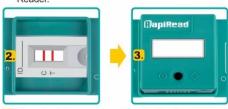


8. Invert the UniSampler™
Device and gently squeeze
3 drop of pre-mix blood into
the Sample Well (S) of the
Test Cassette.

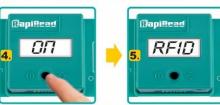
RapiRead™ CUBE READER PROCEDURE



 Check the "Correct Orientation" shown on the Adaptor for the Test Device and RapiRead CUBE Reader



- Place the Adapter on top of the Test Device.
- 3. Place the RapiRead on top of the Adaptor.



- 4. Turn-on the RapiRead by pressing the black button. Reader runs a self-test, during the self-test "WAIT" is displayed. After an audible beep signal, "ON" is displayed. To perform a reading, press the black button again once for 1 second.
- 5. The display will show "RFID".





MapiRead

- Place the Lot specific RFID Card provided with the Kit onto the top side of the RapiRead. This will upload COVID-19 NAb test specific Calibration data from RFID Card to RapiRead.
- Following an audible beep signal, "TEST" is displayed. Press the black button, the Reader displays "RUN".

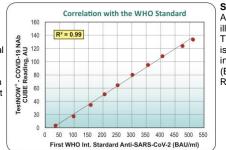




- After successful data transmission the measurement will start.
- Based on Neutralizing Antibody (NAb) level, the Titer is displayed as a Numeric Value in BAU/ml followed by Result with an audible beep signal.

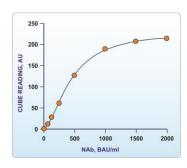
CORRELATION WITH THE WHO STANDARD

TestNOW® - COVID-19 NAb Test has been standardized against "First WHO International Standard for anti-SARS-CoV-2 Immunoglobulins" (NIBSC Code: 20/136) 2, 3, 4 with excellent Correlation Coefficient $(R^2 = 0.99)$.



STANDARD CURVE

A typical standard curve is illustrated on right side. The CUBE Reading AU is automatically converted into Binding Antibody Units (BAU)/ml in RapiRead Reader.



INTERPRETATION OF RESULTS

The RapiRead™ CUBE analyzer automatically determines the final result by comparing the CUBE Reading: AU for each sample against a pre-established calibration curve. The concentration of total SARS-CoV-2 Neutralizing Antibody Titer Results are expressed in WHO Recommended Unit: Binding Antibody Units BAU/ml. Results obtained with the TestNOW® - COVID-19 NAb Test are interpreted according to First WHO International Reference Panel for anti-SARS-CoV-2 Immunoglubulin (NIBSC Code: 20/268) 5, as follows:

Neutralizing Antibody Titer (Numeric Result in BAU/ml)	Result Message	Result Interpretation	Degree of Immunity	
< 15 BAU/ml	NEGATIVE	Negative for SARS-CoV-2 Neutralizing Antibodies	NO IMMUNITY	
≥ 15 – < 205 BAU/mI	LOW +	Positive for SARS-CoV-2 Neutralizing Antibodies. Low Titer	LOW IMMUNITY	
≥ 205 – < 817 BAU/ml	MEDIUM +	Positive for SARS-CoV-2 Neutralizing Antibodies. Medium Titer	MEDIUM IMMUNITY	
≥ 817 BAU/ml	HIGH +	Positive for SARS-CoV-2 Neutralizing Antibodies. High Titer	HIGH IMMUNITY	

PERFORMANCE CHARACTERISTICS

The clinical study comparing with RT-PCR and Abbott Architect SARS-CoV-2 IgG Positive and Negative convalescent plasma samples was conducted:

		Reference Neutralizing Antibody (NAb) ELISA Positive	Reference Neutralizing Antibody (NAb) ELISA Negative	
	Number of Samples	120	75	
TestNOW® - COVID-19 NAb Test	Positive	119	1	
	Negative	1	74	

Clinical Sensitivity = 119 / 120 = 99.17% (CI 95%: 95.44% - 99.98%)

Positive Predictive Value (PPV) = 119 / (120 +1) = 98.35%

Clinical Specificity = 74 / 75 = 98.67% (CI 95%: 92.79% - 99.97%)

Negative Predictive Value (NPV) = 74/(74 + 1) = 98.67%

Total Confidence Rate: (119+74) / (119+74+1+1) *100 = 98.97%

POST COVID-19 VACCINE NAb TITER

16 persons who either received Pfizer or Modorna COVID-19 vaccine were tested with TestNOW® - COVID-19 NAb Test, 2 Weeks Post 1st and 2nd shots, and their longitudinal Neutralizing Antibodies (NAb) Titers are show below:

Person No.	Sample	COVID-19 Vaccine Type	NAb Titer (BAU/ml)			
			2 Weeks Post 1st shot	Result	2 Weeks Post 2nd shot	Result
1	Finger-prick Blood	Pfizer	449.1	MEDIUM +	1242.7	HIGH +
2	Finger-prick Blood	Pfizer	380.2	MEDIUM +	1265.6	HIGH +
3	Finger-prick Blood	Pfizer	68.9	LOW +	732.9	MEDIUM +
4	Finger-prick Blood	Pfizer	83.6	LOW +	750.0	MEDIUM +
5	Finger-prick Blood	Pfizer	68.4	LOW +	708.5	MEDIUM +
6	Finger-prick Blood	Pfizer	225.1	MEDIUM +	1086.6	HIGH +
7	Finger-prick Blood	Pfizer	347.4	MEDIUM +	1395.2	HIGH +
8	Finger-prick Blood	Pfizer	95.8	LOW +	767.6	MEDIUM +
9	Finger-prick Blood	Pfizer	189.9	LOW +	1199.5	HIGH +
10	Finger-prick Blood	Pfizer	190.2	LOW +	1022.5	HIGH +
11	Finger-prick Blood	Pfizer	90.9	LOW +	1179.0	HIGH +
12	Finger-prick Blood	Pfizer	58.3	LOW +	795.5	MEDIUM +
13	Finger-prick Blood	Pfizer	100.3	LOW +	939.1	HIGH +
14	Finger-prick Blood	Moderna	253.0	MEDIUM +	1159.2	HIGH +
15	Finger-prick Blood	Moderna	387.0	MEDIUM +	1069.8	HIGH +
16	Finger-prick Blood	Moderna	284.5	MEDIUM +	758.7	MEDIUM +
			Mean = 204.5	56.2% LOW + 43.8% MEDIUM +	Mean = 1004.5	37.5% MEDIUM+ 62.5% HIGH +

Study on Autologous Serum, Plasma, and Whole Blood Samples:

TestNOW® - COVID-19 NAb Test Device was also tested with 10 Negative convalescent serum and autologous plasma and whole blood samples, and 10 Positive convalescent serum and autologous plasma and whole blood samples. Consistent test results were obtained for all samples confirming that serum, plasma, and whole blood can all be used as testing samples for the TestNOW® - COVID-19 NAb Test Device.

PRECISION

Precision study was conducted by testing 30 each of Negative, Low, Medium and High positive plasma samples by 3 lots and duplicated by three technicians within a day. The results showed 100% agreement performance with no human error.

LIMIT OF DETECTION (LOD) & UPPER LIMIT OF QUANTIFICATION (ULOQ) - TEST LOT DEPENDENT

The LOD and ULOQ for TestNOW® - COVID-19 NAb Test against the "First WHO International Standard for anti-SARS-CoV-2 Immunoglobulins" (NIBSC Code: 20/136) are 15 – 45 BAU/ml and 2,500 – 3,000 BAU/ml respectively.

ASSAY SPECIFICITY

1. Other infectious diseases

TestNOW® - COVID-19 NAb Test Device has tested samples that were infected by the following diseases: Influenza A Virus, Influenza B Virus, Adenovirus, Rotavirus and Mycoplasma Pneumonia. All the samples showed no effect on the assay.

2. Blood compounds

TestNOW® - COVID-19 NAb Test Device has tested samples with high Rheumatoid Factor (RF), Bilirubin, Triglyceride and Hemoglobin. The results showed that these compounds had no effect on the specificity of the assay up to the listed concentration.

Bilirubin: 342 µmol/L Triglyceride: 37 mmol/L Rheumatoid Factor: 80 IU/ml Hemoglobin: 10 mg/ml

3. Interference Studies - Common drugs

The following substances with the listed concentrations were added to negative, low, medium and high positive controls to reach the defined concentration. Each compound in each level of controls was tested in triplicates using one lot of TestNOW® - COVID-19 NAb Test Device.

Histamine Hydrochloride:	1.5 mg/mL	Interferon-α	150 μg/mL	Zanamivir	426 ng/mL
Ribavirin	6 mg/L	Oseltamivir	46.9 mg/L	Peramivir	132.7 µg/mL
Lopinavir	3.2 mg/mL	Ritonavir	159 μg/mL	Arbidol	2.0 µg/mL
Levofloxacin	9.2 mg/L	Azithromycin	9.2 mg/L	Ceftriaxone	240 mg/L
Meropenem	200 mg/mL	Tobramycin	12 mg/L		· ·

The results showed that these drugs have no interference effect on the specificity of the assay.

PRECAUTIONS

- For Professional In Vitro diagnostic use only.
- 2. Do not use the product beyond the expiration date.
- Do not use the product if the pouch is damaged or the seal is broken.
- Handle all specimens as potentially infectious.
- Follow standard laboratory procedure and biosafety guidelines for the handling and disposal of potentially infectious material. When the assay procedure is completed, dispose specimens after autoclaving at 1210 C for at least 20 min or treating with 0.5% Sodium Hypochlorite for 1-2 hours.
- TestNOW® COVID-19 NAb Test must be quantified with RapiRead™ CUBE Reader only.
- RFID Card is Lot Specific and cannot be interchanged with another Lot.

LIMITATIONS

- Although the test is very accurate in detecting Neutralizing antibody Titer, a low incidence of false results can occur. Other clinically available tests are required if questionable results are obtained.
- As with all diagnostic tests, a definitive clinical diagnosis should not be based on the result of a single test but should only be made by the physician after all clinical and laboratory findings have been evaluated.

- os://www.jimmunol.org/content/206/10/2393
- Standardization of vaccines for coronavirus disease (COVID-19); 29 March 2021 https://www.who.int/news-room/feature-stories/detail/standardization-of-vaccines-for-coronavirus-disease-covid-19
- https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(21)00527-4/fulltext https://www.nibsc.org/documents/ifu/20-136.pdf
- WHO Reference Panel First WHO International Reference Panel for anti-SARS-CoV-2 Immunoglubulin (NIBSC Code: 20/268) https://www.nibsc.org/documents/ifu/20-268.pdf
- Eric Lau et al. Neutralizing antibody titers in SARS-CoV-2 infections; Nature, vol 12, 63 (2021)
 ZHOU Peng, YANG Xinglou. A pneumonia outbreak associated with a new coronavirus of probable bat origin. Nature, 2020.
- XUE Xiongyan, ZHU Changlin, HUANG Shaozhen, Inactivation of 2019 new coronary virus before antibodies detection by different methods. Journal of Southern Medical University, 2020. SHI Heshui, HAN Xiaoyu, FAN Yanqing. Radiologic Features of Patients with 2019-n Co V Infection. Journal of Clinical Radiology, 2020.

SHELF LIFE: 18 Months 2021-11-ver-6 (Lot # 21111555)

INDEX OF CE SYMBOLS





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