# QuICK PROFILE™ ADENO-ROTA VIRUS **ANTIGEN COMBO TEST**

Immunochromatographic rapid assay for the Detection of

Adenovirus and Rotavirus Antigens in Human Stool Specimens

# Cat.# 71033

#### INTENDED USE

Quick Profile™ Adeno/Rota Combo Test is an in vitro qualitative immunochromatographic assay for the rapid detection of adenovirus rotavirus antigens in human stool specimen. The test results are intended to aid in the diagnosis of adenovirus and rotavirus infection and to monitor the effectiveness of therapeutic treatment.

#### SUMMARY AND EXPLANATION

Rotavirus is the primary causative agent 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 900,000 young children around the world die each year from rotaviruses. Most of these deaths occur in 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. The infection usually begins with a fever. Soon the little one begins to vomit and has a nasty stomach 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.

Adenovirus is the second most common cause of viral gastro- enteritis in Children (10 -15%). This virus may also cause respiratory diseases and, depending on the serotype, also diarrhea, conjunctivitis, cystitis, etc. At lease 47 serotypes of adenovirus have been described, all sharing a common hexon antigen. Serotypes 40 and 41 are the ones associated with gastro-enteritis. The main syndrome is diarrhea that may last between 9 and 12 days associated with fever and vomiting.

# PRINCIPLE OF THE ASSAY

Quick Profile™ Adeno/Rota Combo Test is a sandwich soli d 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 pad containing antibod ies against adenovirus and rotavirus coupled to red-colored colloidal gold. If the sample contains adenovirus or 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 adenovirus and rotavirus specific antibodies are immobilized separately. As the complexes reach the test line, they will bind to the antibody corresponding to the virus on the membrane to form of a line. A 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 virus is not present or lower than the detection limit of the test, only the control line will be visible. If the control line does not develop, the test is invalid.

# MATERIALS PROVIDED

1. Quick Profile™ Adeno/Rota Combo test card

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

2. Sample bottle

Each sample bottle contains 1.5 ml of stool specimen collection buffer. Store at 4-30°C.





- MATERIALS NOT PROVIDED 1. Specimen collection container
- 2. 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 4-30 °C.
- 3. Store test device at 4-30 °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 QuickProfile™ Adeno/Rota Combo 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 pointed 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 at 10 minutes. A strong positive sample may show result earlier.

Note: Results after 10 minutes may not be accurate.

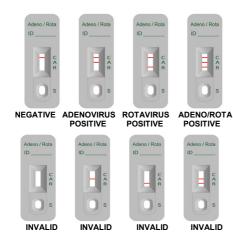
# INTERPRETATION OF RESULTS

#### Positive:

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

The control line next to the test line does not become visible within 10 minutes after the addition of the sample.

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



#### 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**

Quick Profile™ Adeno-Rota Combo Test detects the presence of adenovirus and *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

## Accuracy

QuickProfile™ Adeno-Rota Combo Test was evaluated on 1050 stool samples. The test results were compared with an approved predicate kit.

Table 1. Accuracy results of Rotavirus

		Predicate Kit		Total
		Pos.	Neg.	
QuickProfile <sup>TM</sup>	Pos.	214	6	220
Adeno-Rota Combo Test	Neg.	6	824	830
		220	830	1050

Out of two hundred and twenty (220) samples that were tested positive by the predicate kit, two hundred and forteen (214) were positive on QuickProfile<sup>TM</sup> Adeno-Rota Combo Test. Out of eight hundred and thirty (830) samples that were tested negative by the predicate kit, eight hundred and twenty four (524) were negative on QuickProfile<sup>TM</sup> Adeno-Rota Combo Test. Twelve (12) samples that have disagreed results were verified by a third product. Six (6) samples have the results agreed with QuickProfile<sup>TM</sup> Adeno-Rota Combo Test and six (6) samples agreed with the predicate kit. The agreement with the predicate kit is summarized as below.

Agreement of positive = 214/220 = 97.27%

Agreement of Negative = 824/830 = 99.28%

Total Agreement = 1038/1050 = 98.86%

Table 2. Accuracy results of Adenovirus

		Predicate Kit		Total
		Pos.	Neg.	
QuickProfile <sup>™</sup>	Pos.	197	6	203
Adeno-Rota Combo Test	Neg.	7	840	847
		204	846	1050

Out of two hundred and four (204) samples that were tested positive by the predicate kit, one hundred and ninety seven (197) were positive on QuickProfile<sup>TM</sup> Adeno-Rota Combo Test. Out of eight hundred and forty six (846)

DCR 17-028 71033 5161 E3R3 4-28-2017 samples that were tested negative by the predicate kit, eight hundred and forty (840) were negative on QuickProfile<sup>TM</sup> Adeno-Rota Combo Test. Thirteen (13) samples that have disagreed results were verified by a third product. Seven (7) samples have the results agreed with QuickProfile<sup>TM</sup> Adeno-Rota Combo Test while six (6) samples agreed with the predicate kit. The agreement with the predicate kit is summarized as below.

Agreement of positive = 197/204 = 96.57% Agreement of Negative = 840/846 = 99.29% Total Agreement = 1037/1050 = 98.76%

#### Assay Specificity

Following bacterial and viral strains were used to test the specificity of QuickProfile™ Adeno-Rota Combo Test. Positive and negative controls spiked with the bacteria or virus at the indicated concentration showing no interference on the test results.

Adenovirus type 40 1x10<sup>6</sup> TCID<sub>50</sub> (no inteference to Rotavirus) Adenovirus type 41 1x10<sup>6</sup> TCID<sub>50</sub> (no inteference to Rotavirus) 1x10<sup>6</sup> TCID<sub>50</sub> (no inteference to Adenovirus) Rotavirus Wa 7.63 x 10<sup>7</sup>CFU/ml Campylobacter jejuni 1x108CFU/ml Candida albicans Clostridium perfringens A 1x10<sup>8</sup>CFU/ml 1x108CFU/ml Citrobacter freundii 1x108CFU/ml Enterococcus faecalis 1x108CFU/ml Escherichia coli

1x108CFU/ml Klebsiella pneumonia 1x108CFU/ml Listeria monocytogenes Moraxella catarrhalis 9.9x10<sup>6</sup>CFU/ml Neisseria gonorrhoeae 1x10<sup>8</sup>CFU/ml Pseudomonas aeruginosa 1x108CFU/ml Stapylococcus epidermidis 1x108CFU/ml Stapylococcus aureus 1x10<sup>8</sup>CFU/ml 1x108CFU/ml Shigella flexneri 1x108CFU/ml Shigella sonnel Streptococcus dysgalactiae 1x108CFU/ml Streptococcus agalactiae 1x10°CFU/ml 1x108CFU/ml Streptococcus pyogenes

#### **Cross Reactivity**

Quick Profile™ Adeno-Rota Combo Test may cross-react with the rotavirus antigen from monkey and porcine.

#### REFERENCES

- 1. Al-Yousif, Y., J. Anderson, C. Chard-Bergstrom, A. Bustamante, M. Muenzenberger, K. Austin, and S. Kapil. 2001. Evaluation of a latex agglutination kit (Virogen Rotatest) for detection of bovine rotavirus in fecal samples. Clin. Diagn. Lab. Immunol. 8:496-498
- 2. Bellinzoni, R. C., J. Blackhall, H. R. Terzolo, A. R. Moreira, N. Auza, N. Mattion, G. L. Micheo, J. L. La Torre, and E. A. Scodeller. 1990. Microbiology of diarrhea in young beef and dairy calves in Argentina. Rev. Argent. Microbiol. 22:130-136.
- 3. Bendali, F., H. Bichet, F. Schelcher, and M. Sanaa. 1999. Pattern of diarrhea in newborn beef calves in southwest France. Vet. Res. 30:61-74.
- 4. Benfield, D. A., I. J. Stotz, E. A. Nelson, and K. S. Groon. 1984. Comparison of a commercial enzyme-linked immunosorbent assay with electron microscopy, fluorescent antibody, and virus isolation for the detection of bovine and porcine rotavirus. Am. J. Vet. Res. 45:1998-2002.
- 5. Chinsangaram, J., G. Y. Akita, A. E. Castro, and B. I. Osburn. 1993. PCR detection of group A bovine rotaviruses in feces. J. Vet. Diagn. Investig. 5:516-521.
- 6. Wood S.R. et al. 1997. Rapid detection and serotyping of adenovirus by direct immunofluorescence. J. Med. Virol. 51: 198-201















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

Tel: (408) 855.0061 Fax: (408) 855.0063 Email: info@lumiquick.com www.lumiquick.com EC REP

Emergo Europe
Prinsessegracht 20
2514 AP The Hague,
The Netherlands

Page 2 of 2 08730 / 180803