# OnSite™ Malaria Pf/Pv Ab Combo Rapid Test

# REF R0111C ( 6

The OnSite Malaria Pf/Pv Ab Combo Rapid Test is a lateral flow chromatographic immunoassay for the simultaneous detection and differentiation of antibodies including IgG, IgM and IgA to Plasmodium falciparum (Pf) and Plasmodium vivax (Pv) in human serum, plasma or whole blood. It is intended to be used by professionals as a screening test and provides a preliminary test result to aid in the diagnosis of infection with P. falciparum and P. vivax.

Any use or interpretation of this preliminary test result must also rely on other clinical findings and the professional judgment of health care providers. Alternative test method(s) should be considered to confirm the test result obtained by this device.

#### SUMMARY AND EXPLANATION OF THE TEST

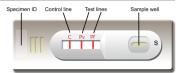
Malaria is a mosquito-borne, hemolytic, febrile illness that affects over 200 million people and kills more than half a million people per year1. Malaria is caused by four species of the protozoan parasite Plasmodium: P. falciparum, P. vivax, P. ovale and P. malariae. All Plasmodium spp. infect and destroy human erythrocytes and lead to chills, fever episodes, anemia and splenomegaly. P. falciparum causes more severe disease than the other Plasmodium species and accounts for most malaria deaths. P. falciparum and P. vivax are the most common pathogens, however, there is considerable geographic variation in species distribution2

Traditionally, malaria is diagnosed by the demonstration of the organisms in Giemsa stained smears of peripheral blood, and the different species of Plasmodium are distinguished by their appearance in infected erythrocytes2. This technique is performed only by well-trained microscopists using defined protocols, which presents major obstacles for remote and underprivileged areas of the world

The OnSite Malaria Pf/Pv Ab Combo Rapid Test detects antibodies present in serum, plasma or whole blood that are generated in response to the infection with P. falciparum and P. vivax5. Utilizing the highly reactive Pf specific antigen, Pf-MSP, and the Pv specific antigen, Pv-MSP, the test enables simultaneous detection and differentiation of infections with P. falciparum and P. vivax. The test can be performed within 15-20 minutes by minimally skilled personnel without the use of laboratory equipment.

#### TEST PRINCIPLE

The OnSite Malaria Pf/Pv Ab Combo Rapid Test is a double antigen lateral flow chromatographic immunoassay. The strip in the test cassette consists of: 1) a burgundy colored conjugate pad containing recombinant *Pf*-MSP and *Pv*-MSP antigens conjugated with colloidal gold (Pf conjugates and Pv conjugates) and a control antibody conjugated with colloidal gold



and 2) a nitrocellulose membrane strip containing two test lines (Pv and Pf lines) and a control line ( line). The Pf line is pre-coated with recombinant Pf-MSP antigen for the detection of antibodies to The Pv line is pre-coated with Pv-MSP antigen for the detection of antibodies to Pv. The C line is precoated with a control line antibody.

When an adequate volume of test specimen is dispensed into the sample well of e test specimen migrates by capillary action across the cassette. Antibodies (IgG, falciparum or P.vivax, if present in the specimen, will bind to the Pf or the Pv conju The immunocomplexes are then captured on the membrane by either the pre-coated P MSP antigens forming a burgundy colored Pf line (Pf positive result) and/or P result)

Absence of any test lines suggests a negative result. The test contains an (C line) which should exhibit a burgundy colored line of the immunocomple color development on any of the test lines. If the C line do ntibodi regardless of pp, the the specimen must be retested with another device.

#### REAGENTS AND MATERIA OVIDED

- Individually sealed foil pouches containing: 1.
  - a. One cassette device b. One desiccant
- Two-mark capillary tubes (10/20 µL)
- Sample diluent (REF SB-R0111C
- 4. One package insert (instruction

#### LS MA BE REQ RED AND NOT PROVIDED

- Positive Contro
- Negative Contro

# RIALS REQUIRED BUT NOT PROVIDED

- Clock or time
- 2. Lancing device for whole blood test

# WARNINGS AND PRECAUTIONS

### For in Vitro Diagnostic Use

- This package insert must be read completely before performing the test. Failure to follow the insert may lead to inaccurate test results.
- Do not open the sealed pouch unless ready to conduct the assay
- Do not use expired devices.
- Bring all reagents to room temperature (15-30°C) before use.
- Do not use components from any other type of kit as a substitute for the components in this kit.
- Do not use hemolyzed blood specimens for testing.
- Wear protective clothing and disposable gloves while handling the kit reagents and clinical specimens. Wash hands thoroughly after performing the test.

  Users of this test should follow the US CDC Universal Precautions for prevention of
- transmission of HIV, HBV and other blood-borne pathogens.
- Do not smoke, drink or eat in areas where specimens or kit reagents are being handled
- Dispose of all specimens and materials used to perform the test as biohazardous waste
- Handle the negative and positive controls in the same manner as the patient specimens.
- The test result should be read 15-20 minutes after a specimen is applied to the sample well or 12. sample pad of the device. Any results interpreted outside 15-20 minutes should be considered invalid and must be repeated.
- Do not perform the test in a room with strong air flow, i.e. an electric fan or strong air-13.

#### REAGENT PREPARATION AND STORAGE INSTRUCTIONS

All reagents are ready to use as supplied. Store unused test devices unopened at 2-30°C. If stored at 2-8°C, ensure that the test device is brought to room temperature before opening. The test device is stable through the expiration date printed on the sealed pouch. Do not freeze the kit or expose the kit to temperatures above 30°C

#### SPECIMEN COLLECTION AND HANDLING

Consider any materials of human origin as infectious and handle them using standard bio-safety

#### **Plasma**

- Step 1: Collect blood specimen into a lavender, blue or green top collection tube (containing EDTA, citrate or heparin, respectively, in Vacutainer®) by venipuncture
- Step 2: Separate the plasma by centrifugation.
- Step 3: Carefully withdraw the plasma into a new pre-labeled tube

#### Serum Step 1:

Collect blood specimen into a red top collection tube (containing no anticoagulants in

- Vacutainer®) by venipuncture
- Step 2: Allow the blood to clot.
- Separate the serum by centrifugation. Step 3:
- Carefully withdraw the serum into a new pre

Test specimens as soon as possible after collecting. If not ted imn v. store specimens at 2-8°C for up to 5 days. For longer storage, specimens should be

Avoid multiple freeze-thaw cycles. Prior to testing, bug from and mix gently. Specimens containing visible partial late materials and mix gently. speciens to som temperature slowly should be clarified by centrifugation and mix gently. Specimens containing visible pa ng gr lipemia, gross hemolysis or turbidity in order to before testing. Do not use samples de avoid interference with result interpr

# Whole Blood

Drops of whole blood can be obtain specimen into a lavender, blue or respectively, in Vacutainer® ).Do not u ned by differe methods, such as venipuncture. Collect blood ction tube (containing EDTA, citrate or heparin, een top co

The whole blood specimens must be tested within 24 hours of collection. The specimens should be stored in refrigeration not tested immediately.

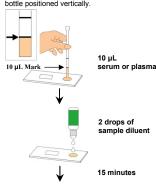
### ASSAY PROCEDURE

- d test components to room temperature if refrigerated or frozen. Once wed, mix well prior to performing the assay.
- to test, open the pouch at the notch and remove the device. Place the test clean, flat surface.
- ure to label the device with specimen ID number

The volume of the specimen is different according to different type of the specimen.

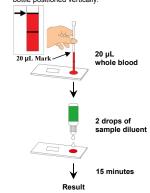
### FOR SERUM, PLASMA SPECIMENS (10 µL)

- Fill the capillary tube with serum or plasma not to exceed the specimen mark (10 uL Mark) as shown in the following image. The volume of the specimen is around 10 μL.
- 4.2 Holding the capillary tube vertically, dispense the entire amount of specimen into the center of the sample well making sure that there are no air bubbles. For better precision, transfer specimen using a pipette capable of delivering a volume of 10 uL for serum
- 4.3 Immediately add 2 drops (60-80  $\mu$ L) of sample diluent to the sample well with the bottle positioned vertically.



# FOR WHOLE BLOOD SPECIMENS (20 µL)

- 4.1 Fill the capillary tube with whole blood not to exceed the specimen mark (20 µL Mark) as shown in the following image. The volume of the specimen is around 20 µL.
- 4.2 Holding the capillary tube vertically, dispense the entire amount of specimen into the center of the sample well making sure that there are no air bubbles. For better precision, transfer specimen using a pipette capable of delivering a volume of 20 uL for whole
- 4.3 Immediately add 2 drops (60-80  $\mu L$ ) of sample diluent to the sample well with the bottle positioned vertically.



Result

Step 6: Read results at 15-20 minutes. Positive results may be visible in as short as 1 minute. Negative results must be confirmed at the end of the 20 minutes only. However, any results interpreted outside 15-20 minutes should be considered invalid and must be repeated. Discard used device after interpreting the result following local laws governing the disposal of device.

# QUALITY CONTROL

- Internal Control: This test contains a built-in control feature, the C line. The C line develops after adding specimen and sample diluent. If the C line does not develop, review the entire procedure and repeat the test with a new device.
- External Control: Good Laboratory Practice recommends using external positive and negative controls to ensure the proper performance of the assay, particularly under the following circumstances:

- A new operator uses the kit, prior to performing testing of specimens
- b. A new lot of test kits is used.
- A new shipment of test kits is used.
- The temperature during storage of the kit falls outside of 2-30°C
- The temperature of the test area falls outside of 15-30°C.
- To verify a higher than expected frequency of positive or negative results.
- To investigate the cause of repeated invalid results.

## INTERPRETATION OF ASSAY RESULT

1. NEGATIVE RESULT: If only the C line is present, the absence of any burgundy color in both test lines (Pf and Pv) indicates that antibodies to Pf and Pv are not detected in the specimen. The result is negative or non-reactive for both Pf and Pv.



#### POSITIVE RESULT:

2.1 In addition to the presence of the C line, if only the Py line develops, the test result indicates the presence of antibodies to Pv in the specimen. The result is Pv positive or reactive and Pf negative or non-reactive.



2.2 In addition to the presence of the C line, if only the Pf line develops, the test result indicates the presence of antibodies to Pf in the specimen. The result is Pf positive or reactive and Pv



2.3 In addition to the presence of the C line, if both Pf and Py lines develop, the test result indicates the presence of antibodies to Pf and Pv in the specimen. The result is Pf and Pv positive or



Specimens with positive results should be confirmed with alternative testing method(s) clinical findings before a diagnosis is made.

INVALID: If no C line develops, the assay is invalid regardless of any burgundy co lines as indicated below. Repeat the assay with a new device.



# PERFORMANCE CHARACTERIS

### Performance for Pf Ab Test

from A total of 195 samples were college sceptible subjects and tested with the OnSite Malaria Pf/Pv Ab Combo Rapid est a Test on the market. Compariso or all sub commercial Malaria Pf/Pv Ab Combo Rapid ts is shown in the following table.

	7	OnSite Maria Pf/	Ab Combo Rapid Test	
Reference		Positive	Negative	Total
Positive		26	2	28
Negative		2	165	167
Total		28	167	195

Relative Sensitivity: 92.9%, Relative Specificity: 98.8%, Overall Agreement: 97.9%

A total of 196 samples were collected from susceptible subjects and tested with the OnSite Malaria Pf/Pv Ab Combo Rapid Test and with a commercial Malaria Pf/Pv Ab Combo Rapid Test. Comparison for all subjects is shown in the following table.

	OnSite Malaria Pf/Pv		
Reference	Positive	Negative	Total
Positive	66	2	68
Negative	5	123	128
Total	71	125	196

Relative Sensitivity: 97.1%, Relative Specificity: 96.1%, Overall Agreement: 96.4%

# Cross-Reactivity

No false positive Pf or Pv test results were observed on 4-10 specimens from the following disease states or special conditions:

HAV	HBV	HCV	HEV	HIV
hCG	Dengue	H. pylori	TB	T. pallidum
Typhoid	ANA	HAMA	RF (up to 8,400 IU/mL)	

#### Interference

Common substances (such as pain and fever medication and blood components) may affect the performance of the OnSite Malaria Pf/Pv Ab Combo Rapid Test. This was studied by spiking these substances into three levels of Pf Ab and Pv Ab standard controls (negative, weak positive and strong positive). The results demonstrate, at the concentrations tested, the substances studied do not affect the performance of the OnSite Malaria Pf/Pv Ab Combo Rapid

List of potentially interfering substances and concentrations tested

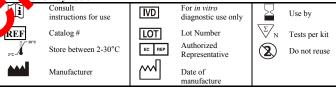
<ol> <li>Albumin</li> </ol>	60 g/L	<ol><li>Human IgG</li></ol>	150 mg/dL
<ol><li>Bilirubin</li></ol>	20 mg/dL	<ol><li>Hemoglobin</li></ol>	2 g/L
<ol><li>Creatinine</li></ol>	442 µmol/L	8. Heparin	3,000 U/L
<ol><li>EDTA</li></ol>	3.4 µmol/L	<ol><li>Salicylic acid</li></ol>	4.34 mmol/L
5 Glucose	5.5 mmol/L	<ol><li>Sodium citrate</li></ol>	3.8%

#### LIMITATIONS OF TEST

- The Assay Procedure and the Interpretation of Assay Result sections must be followed closely when testing for the presence of antibodies to P. falciparum and P. vivax parasites in serum, plasma or whole blood from individual subjects. Failure to follow the procedure may lead to inaccurate test results.
- The OnSite Malaria Pf/Pv Ab Combo Rapid Test is limited antibodies to P. falciparum and P. vivax parasites in human serum lasma or whole blood. The intensities of the test lines do not have linear corre ant ody titers in the specimen.
- A negative or non-reactive result for an individual sub-P. falciparum and P. vivax antibodies. However, a neg does not preclude the possibility of exposure to or infection with Plas para
- A negative or non-reactive result can occur if e detection antibodies present in the specimen is below limits of the assay or the antibodies of the disease in which a sample is collected. that are detected are not pres
- y. If the syl tom sists, while the result from OnSite Malaria non-reactive, it is recommended to test with an Infection may progress rap Pf/Pv Ab Combo Rapid T alternative test method.
- Some specimens containing usually high ters of heterophile antibodies or rheumatoid factor may affect expected results.
- The results obtained with this test should only be interpreted in conjunction with other diagnostic procedures and clinical findings.

- World Health Organization. World Malaria
  - /world\_malaria\_report\_2011/en
- 424. Chapter 9. Infectious and Parasitic Diseases. Rubin E., Farber JL: Mal 1994. J.B. Lippincott, Philadelphia
- Chi Jini PL, Doherty T, et al, Am J Trop Med. Hyp, 1999, Feb: 60(2):173-2. arch Pathol Lab Med. 2013 Jun;137(6):805-11. H. Chi
- - D, Burgess DC, Taylor HJ, Kain KC. Bull World Health Organ. 1999;77(7):553-9.

### of CE Symbols





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