

“See Now” HBsAb Strip Test

Serum/Plasma

For *in vitro* Diagnosis Use
Product Code: SN 5.5

INTENDED USE

The “See Now” Hepatitis B Surface Antibody (HBsAb) Test is a rapid and convenient immunochromatographic *in vitro* assay for detection of HBsAb in human serum or plasma. The test provides a visual, qualitative result, and all positive specimens must be confirmed with other qualified assays. The test is intended for healthcare professional use only.

PRINCIPLE

HBsAb appears several weeks after disappearance of HBsAg and existing for a long time. It is a kind of antibody for protection. HBsAb detection can be used to monitor the prognosis of patients recovering from hepatitis B viral infection. The appearance of HBsAb suggested that the patient has prior immunological exposure to the hepatitis B surface antigen and indicated that it is convalescent state recovered from acute phase of hepatitis B.

The principle of “See Now” HbsAb Test is a double antigen sandwiched, immunochromatographic assay. The purified recombinant HbsAgs are conjugated to colloidal gold and dry-immobilized on the nitrocellulose membrane. When the sample is added, it migrates by capillary diffusion rehydrating the gold conjugate to form antigen-antibody-gold complex if HbsAb is present in the sample. These complexes will continue to migrate along the strip until the Test Zone (T) of the membrane where they are captured by the HBsAg to form a visible red line. The un-bound gold conjugate will continue to move to the Control Zone (C) forming a visible red line. To serve as an internal process control, a control band should always be seen after test is completed. Absence of a colored control line in the control region is an indication of an invalid result.

MATERIALS SUPPLIED

- Test Strip, Desiccant
- Test instruction

MATERIALS REQUIRED BUT NOT SUPPLIED

- Specimen collection container, Timer

STORAGE AND STABILITY

- Test device in the sealed pouch can be stored at 2-30°C up to the expiration date. Do not freeze the test device.
- The test device should be kept away from direct sunlight, moisture and heat.

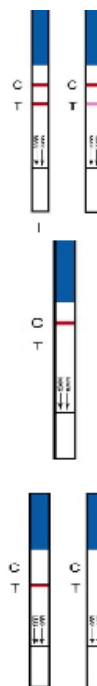
SPECIMEN COLLECTION AND STORAGE

- For serum samples collect blood in a tube without anticoagulant and allow it to clot
- For plasma samples collect blood in a tube containing anticoagulant (EDTA, citrate or heparin, respectively).
- Separate serum or plasma from blood as soon as possible to avoid hemolysis. Use only clear, non-hemolyzed specimens
- Testing should be performed immediately after the specimens have been collected. Do not leave the specimens at room temperature

TEST PROCEDURE

- Remove the test device from pouch when ready to perform the test .Label the test strip with patient or control identification
- Immerse the strip into the sample tube with the arrow end pointing towards the sample. Let it stay immersed until you see liquid traveling up past the MAX word.
- Take the strip out after a minimum of 10 seconds. Lay the strip (MAX side facing up) flat on a clean, dry, non-absorbent surface
- Read the result at 15 minutes. Ensure that the background of the test area is white before interpreting the results. Do not read the results after 30 minutes.

INTERPRETATION OF RESULTS



Positive: Two colored lines should be observed. The line in the test region (T) is the probe line; the line in the control region (C) is the control line, which is used to indicate proper performance of the device.

The color intensity of the test line may be weaker or stronger than that of the control line.

Negative: The control line appears in the test, but the test line is not visible.

Invalid: No line appears in the control region. Under no circumstances should a positive sample be identified until the control line forms in the viewing area. If the control line does not form, the test result is inconclusive and the assay should be repeated.

LIMITATION OF PROCEDURE

- This product is designed for in vitro diagnostic use only.
- There is always a possibility that false results will occur due to the presence of interfering substances in the specimen beyond the control of the manufacturer, such as technical or procedural errors associated with the testing.
- As with all diagnostic tests, a definitive clinical diagnosis should not be based on the results of a single test, but should only be made by the physician after all clinical and laboratory findings have been evaluated.

QUALITY CONTROL

Although the testing device contains an internal quality control (pink colored band in the control region), good laboratory practice recommends the daily use of an outside control to ensure proper testing device performance. Quality control samples should be tested according to the standard quality control requirements established by your laboratory.