For professional in vitro diagnostic use only.

INTENDED USE

VitassayRotavirus+Adenovirus+Astrovirus+Norovirus+Enterovirusis a rapid, immunochromatographic assay for thesimultaneousqualitativedetectionofrotavirus, norovirus and enterovirus in human stool samples.

Simple, non-invasive and highly sensitivity immunoassay to make a presumptive diagnosis of rotavirus, adenovirus, astrovirus, norovirus and/or enterovirus infection.

INTRODUCTION

Rotavirus is the leading cause of severe dehydration in children ${<}5$ years of age.

Most rotavirus infections are community-acquired and transmitted by the feco-oral route and peak the winter season between November and February in temperate climates.

Adenovirus, initially recognized as a cause of respiratory disease, is associated also with gastrointestinal, ophthalmological, and neurological infections. Watery, non-bloody diarrhea typically precedes vomiting and children admitted to the hospital for adenovirus gastroenteritis are more likely to present diarrhea that usually lasts more than in rotavirus gastroenteritis (more than 5 days).

Astrovirus, especially classic astrovirus, are considered gastrointestinal pathogens affecting children worldwide, with very few reports of astrovirus-mediated disease in normal healthy adults. Immunocompromised individuals and the elderly also represent high-risk groups.

Norovirus represents the most common cause of gastroenteritis outbreaks and causes acute, self-limiting gastroenteritis in people from all age groups.

Watery diarrhea occurs several times a day. Rotavirus, adenovirus, astrovirus and norovirus infection occasionally leads to severe dehydration in infants and children. Symptoms of dehydration include lethargy, dry, cool skin, absence of tears when crying, dry mouth, sunken eye and extreme thirst.

In general, the symptoms begin 1 to 2 days following infection with a virus that causes gastroenteritis and may last from 1 to 10 days, depending on which virus causes the illness (Rotavirus 3 days, Adenovirus 5-8 days and Astrovirus 3 days).

The human enteroviruses belong to the genus *Enterovirus* and *Picornaviridae* family. These agents infect millions of people worldwide each year, resulting in a wide variety of clinical conditions ranging from unapparent infection, undifferentiated fevers, common cold to serious diseases such as aseptic meningitis, hand-foot-mouth disease, acute hemorrhagic

conjunctivitis, myocarditis, encephalitis and paralytic poliomyelitis. The average incubation period for enteroviral contagious is from 3-10 to 30 days.

PRINCIPLE

Vitassay Rotavirus+Adenovirus+Astrovirus+Norovirus+ Enterovirus is a qualitative immunochromatographic assay to make a presumptive diagnosis of rotavirus, adenovirus, astrovirus, norovirus and/or enterovirus infection.

Strip A: The test line zone of the nitrocellulose membrane is precoated with monoclonal antibodies against rotavirus.

Strip B: The test line zone of the nitrocellulose membrane is precoated with monoclonal antibodies against adenovirus.

Strip C: The test line zone of the nitrocellulose membrane is precoated with monoclonal antibodies against astrovirus.

Strip D: The test line zone of the nitrocellulose membrane is precoated with monoclonal antibodies against norovirus.

Strip E: The test line zone of the nitrocellulose membrane is precoated with monoclonal antibodies against enterovirus.

During the process, the sample reacts with the antibodies against rotavirus (strip A) and/or adenovirus (strip B) and/or astrovirus (strip C), and/or norovirus (strip D) and/or enterovirus (strip E) forming conjugates. The mixture moves upward on the membrane by capillary action. If the sample is rotavirus positive, antibodies present on the membrane (test line) capture the conjugate complex and a red line will be visible in the strip A, if the sample is adenovirus positive, antibodies present on the membrane (test line) capture the conjugate complex and a red line will be visible in strip B, if the sample is astrovirus positive, antibodies present on the membrane (test line) capture the conjugate complex and a red line will be visible in strip C, if the sample is norovirus positive, antibodies present on the membrane (test line) capture the conjugate complex and a red line will be visible in strip D and if the sample is enterovirus positive, antibodies present on the membrane (test line) capture the conjugate complex and a red line will be visible in strip E. Although the sample is positive or negative, the mixture continues to move across the membranes and the green control line always appears (for all the strips).

The presence of these green lines (in the control zone (C)) indicates that sufficient volume is added; proper flow is obtained and serves as an internal control for the reagents.

PRECAUTIONS

- For professional in vitro use only.
- Do not use the test if its pouch is damaged.
- Do not use after expiration date.

VITASSAY

Rotavirus+Adenovirus+ Astrovirus+Norovirus +Enterovirus

Rapid test for the simultaneous qualitative detection of rotavirus, adenovirus, astrovirus, norovirus and enterovirus in human stool samples.

IUE-7715050 Ed00 October 2019

EN







- Specimens should be considered as potentially hazardous and handle in the same manner as an infectious agent.
- A new test must be used for each sample to avoid contaminations errors.
- Tests should be discarded in a proper biohazard container after testing.
- Reagents contain preservatives. Avoid any contact with the skin or mucous membrane. Consult safety data sheet, available on request.
- Components provided in the kit are approved for use with the Vitassay Rotavirus+Adenovirus+Astrovirus+Norovirus +Enterovirus. Do not use any other commercial kit component.
- Follow Good Laboratory Practices, wear protective clothing, use disposal gloves, goggles and mask. Do not eat, drink or smoke in the working area.
- The presence of yellow lines in the result window (control line zone and test line zone), before using the test, is completely normal and does not imply failure of the test functionality.

STORAGE AND STABILITY

Store as packaged in the sealed pouch either at refrigerated or room temperature $(2-30^{\circ}C/35.6-86^{\circ}F)$.

The test is stable until the expiration date printed on the sealed pouch.

The test must remain in the sealed pouch until use.

Do not freeze.

MATERIALS

MATERIAL PROVIDED	MATERIAL REQUIRED BUT NOT PROVIDED
 10 tests/kit 	Specimen collection
Vitassay Rotavirus+Adenovirus	container.
+Astrovirus+Norovirus+Enterovirus	 Disposable gloves.
 Instructions for use. 	• Timer.
• 10 vials with diluent for sample dilution.	 Spatula.

SPECIMEN COLLECTION

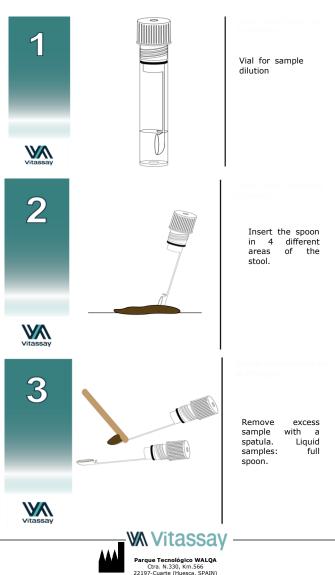
Stool samples should be collected in clean and dry containers. Collect sufficient quantity of feces: 1-2 g or mL for liquid samples.

The samples can be stored in the refrigerator $(2-8^{\circ}C/35.6-46.4^{\circ}C)$ for 1-2 days prior to testing. For longer storage, maximum 1 year, the specimen must be kept frozen at $-20^{\circ}C/4^{\circ}F$. The samples will be brought to room temperature before to testing.

Homogenise stool sample as thoroughly as possible prior to preparation.

SPECIMEN PREPARATION

- 1 Remove the cap of the vial with diluent for sample dilution (figure 1) and use the spoon to collect sufficient sample quantity. For solid stool, insert the spoon in 4 different areas of the stool sample (figure 2), remove any excess sample with a spatula (figure 3), and place the spoon cap back into the vial for sample dilution (figure 4). For liquid stool, take a spoonful of the sample (figure 3) and transfer it into the vial for sample dilution.
- 2.Close the vial for sample dilution tightly and shake it to dilute and mix the sample with the diluent (figure 4).



www.vitassay.com

4 Put the sample into the vial, close the cap and shake.

PROCEDURE

Allow the test, stool sample, controls and diluent to reach room temperature $(15-30^{\circ}C/59-86^{\circ}F)$ prior to testing. Do not open pouches until the performance of the assay.

1. Shake the vial with the sample vigorously to obtain a good sample dilution.

2. Remove the Vitassay Rotavirus+Adenovirus+Astrovirus+ Norovirus+Enterovirus from its sealed bag just before using it (figure 5).

3. Take the vial for sample dilution containing the diluted sample (figure 6), place it inside the multiplex tube (figure 7). Screw the cap of the multiplex tube tightly (figure 8). The bottom of the vial for sample dilution will break and the diluent+sample solution reaches the sample zone of the strips (figure 9).

4. Leave the multiplex tube vertically on a flat surface and read the results at **10 minutes**. Do not read the test results later than 10 minutes.

If the test does not run due to solid particles (the sample is not homogenized), migration process can stop on one or more strips. In this case, tap the end of the multiplex tube on hard surface to allow migration to start again.



Vitassay Rotavirus+Adenvirus+ Astrovirus+Norovirus+ Enterovirus



Vial with the diluted sample inside. Introduce the vial with the diluted sample into the multiplex. Close the cap and the bottom of the diluent vial will break.

Reaction

results at 10 minutes.

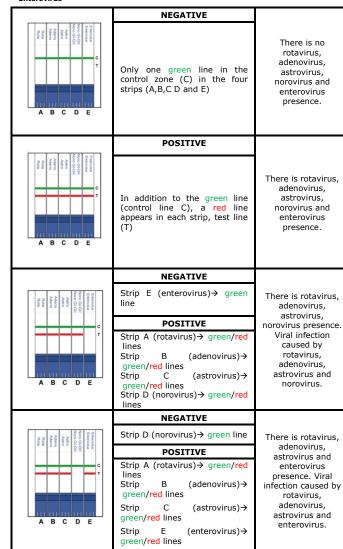
place.

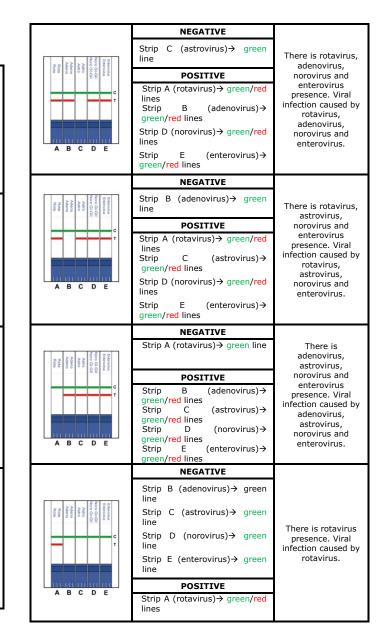
takes

Read

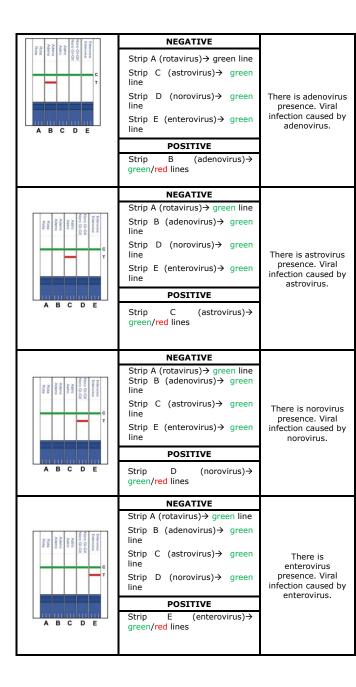
INTERPRETATION OF THE RESULTS

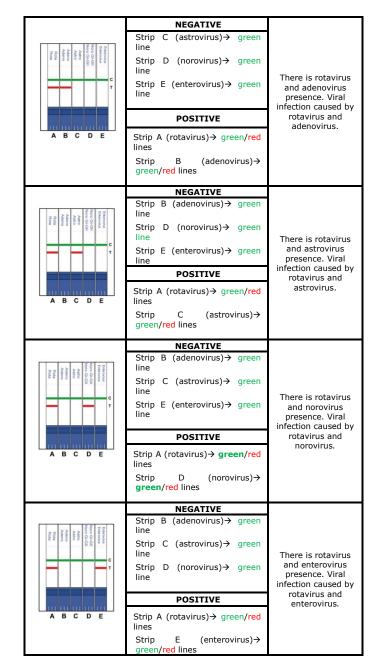
Strip A: rotavirus, Strip B: adenovirus, Strip C: astrovirus ,Strip D: norovirus, Strip E: Enterovirus

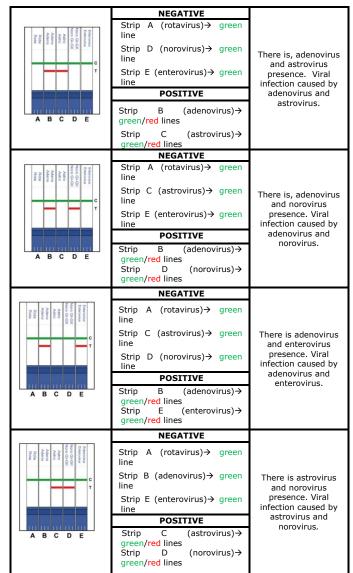




F09-06 Rev00

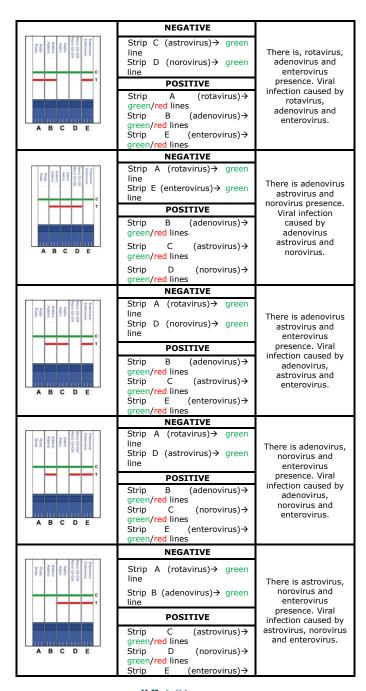


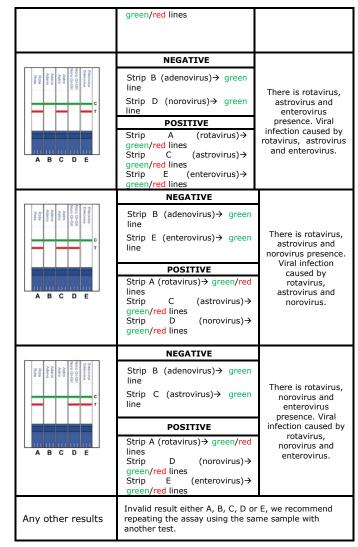






	NECATIVE	
1991	NEGATIVE	
Esterovitus Esterovitus Nore GI-GII Nore GI-GII Nore GI-GII Adeno Adeno Adeno Rota Rota	Strip A (rotavirus)→ green line	
С	Strip B (adenovirus)→ green line	There is astrovirus and enterovirus
	Strip D (norovirus)→ green line	presence. Viral infection caused by astrovirus and
	POSITIVE	enterovirus and
ABCDE	Strip C (astrovirus)→ green/red lines Strip E (enterovirus)→ green/red lines	
	NEGATIVE	
Enterovitus Eleterovitus Norre GI-GII Norre GI-GII Astro Astro Asteno Ademo Ademo Ademo	Strip A (rotavirus)→ green line	
C T	Strip B (adenovirus)→ green line	There is norovirus and enterovirus
	Strip C (astrovirus)→ green line	presence. Viral infection caused by norovirus and
	POSITIVE	enterovirus and
A B C D E	Strip D (norovirus)→ green/red lines Strip E (enterovirus)→ green/red lines	
	NEGATIVE	
Celevora Celevora Noro OLGII Noro OLGII Noro Alero Alero Alero Rota Rota	NEGATIVE Strip D (norovirus)→ green line Strip E (enterovirus)→ green line	There is rotavirus adenovirus and
	Strip D (norovirus)→ green line Strip E (enterovirus)→ green	adenovirus and astrovirus presence.
c	Strip D (norovirus)→ green line Strip E (enterovirus)→ green line	adenovirus and
C T	Strip D (norovirus)→ green line Strip E (enterovirus)→ green line POSITIVE Strip A (rotavirus)→ green/red lines Strip B (adenovirus)→ green/red lines Strip C (astrovirus)→	adenovirus and astrovirus presence. Viral infection caused by rotavirus adenovirus and
C T	Strip D (norovirus) → green line Strip E (enterovirus) → green line POSITIVE Strip A (rotavirus) → green/red lines Strip B (adenovirus) → green/red lines Strip C (astrovirus) → green/red lines Strip C (astrovirus) → green/red lines	adenovirus and astrovirus presence. Viral infection caused by rotavirus adenovirus and astrovirus.
	Strip D (norovirus)→ green line Strip E (enterovirus)→ green line POSITIVE Strip A (rotavirus)→ green/red lines Strip C (astrovirus)→ green line Strip E (enterovirus)→ green line	adenovirus and astrovirus presence. Viral infection caused by rotavirus adenovirus and astrovirus.
A B C D E	Strip D (norovirus)→ green line Strip E (enterovirus)→ green line POSITIVE Strip A (rotavirus)→ green/red lines Strip B (adenovirus)→ green/red lines Strip C (astrovirus)→ green/red lines Strip C (astrovirus)→ green line Strip E (enterovirus)→ green line POSITIVE	adenovirus and astrovirus presence. Viral infection caused by rotavirus adenovirus and astrovirus.
	Strip D (norovirus)→ green line Strip E (enterovirus)→ green line POSITIVE Strip A (rotavirus)→ green/red lines Strip C (astrovirus)→ green line Strip E (enterovirus)→ green line	adenovirus and astrovirus presence. Viral infection caused by rotavirus adenovirus and astrovirus. There is rotavirus, adenovirus and norovirus presence. Viral infection caused by rotavirus, adenovirus and
A B C D E	Strip D (norovirus) → green line Strip E (enterovirus) → green line POSITIVE Strip A (rotavirus) → green/red lines Strip C (astrovirus) → green line Strip E (enterovirus) → green line Strip A (rotavirus) → green Strip A (rotavirus) →	adenovirus and astrovirus presence. Viral infection caused by rotavirus adenovirus and astrovirus. There is rotavirus, adenovirus and norovirus presence. Viral infection caused by rotavirus,





Notes: The intensity of the red coloured test line in the result line region (T) will vary depending on the concentration of antigens in the specimen.

Positive results detailed in the above table should be followed up with additional confirmatory diagnostic procedures.

Single or dual simultaneous virus infections are more frequent than triple, quadruple or fivefold.

Invalid results: Total absence of any control coloured lines (green) indicates an invalid result, regardless of the appearance or



not of the test lines (red). Wrong procedural techniques or deterioration of the reagents are mostly the main reasons for control line failure. Review the procedure and repeat the assay with a new test. If the problem persists, discontinue using the kit and contact your local distributor.

QUALITY CONTROL

Internal procedural controls are included in **Vitassay Rotavirus+Adenovirus+Astrovirus+Norovirus+Enterovirus**. Green lines appearing in the results window are internal controls, which confirm sufficient specimen volume and correct procedural technique.

LIMITATIONS

Vitassay Rotavirus+Adenovirus+Astrovirus+Norovirus

+Enterovirus must be carried out within 2 hours of opening the sealed bag.

- An excess of stool sample could cause wrong results (brown bands appear). Dilute the sample with the diluent and repeat the test.
- The intensity of test line may vary depending on the concentration of antigens.
- After one week of infection, the number of viruses in faeces is decreasing, making the sample less reactive. Stool samples should be collected within one week of the onset symptoms.
- The use of other samples different from human fecal samples has not been established.
- The quality of Vitassay Rotavirus+Adenovirus+Astrovirus+ Norovirus depends on the quality of the sample; Proper fecal specimens must be obtained.
- Positive results determine the presence of rotavirus, adenovirus, astrovirus, norovirus and/or enterovirus in fecal samples. A positive result should be followed up with additional laboratory techniques to confirm the results. A confirmed infection should only be made by a physician after the evaluation of all clinical and laboratory findings and must be based in the correlation of the results with further clinical observations.
- Negative results should not be considered as conclusive; it is possible that the concentration of antigen is lower than the detection limit value. If symptoms or situation still persist a rotavirus, adenovirus and/or astrovirus determination should be carried out with another technique.
- Bloody stool samples and/or mucous stool samples can be cause non-specific reactions in the test. These types of samples whose result is positive should be followed up with other techniques of diagnosis to confirm the result.

EXPECTED VALUES

Currently, rotavirus, norovirus, astrovirus and adenovirus 40/41 have been recognized as the most significant etiological agents of childhood viral gastroenteritis in industrialized countries.

In children, group A rotavirus is the major etiologic agent of viral gastroenteritis and is responsible for 29 to 45% of hospitalizations worldwide. Recent work has showed that noroviruses are the second most frequent etiologic agents of viral gastroenteritis in children.

In the European Union, it is estimated that 3.6 million episodes of rotavirus gastroenteritis occur annually. Rotavirus gastroenteritis is estimated to occur at a rate of 1 symptomatic infection in every 7 children each year, accounting for 231 deaths, more than 87000 hospitalizations, and almost 700000 outpatient visits. It has been estimated that rotavirus accounts for 39% diarrheal hospitalizations and from 25.3% to 63.5% of community-acquired acute gastroenteritis in children <5 years of age.

The incidence and severity of enterovirus infections among infants are inversely related to their age, being more common in neonates and preterm infants.

Human enterovirus type 71 (EV71) has emerged as a major cause of viral encephalitis in children worldwide.

PERFORMANCE CHARACTERISTICS

Clinical sensitivity and specificity

An evaluation was performed using **Vitassay Rotavirus+ Adenovirus+Astrovirus+Norovirus+Enterovirus** and other commercial test (Ridascreen®Rotavirus ELISA Test, r-Biopharm).

Results were as follows:

		Ridascreen®Rotavirus ELISA Test		
	Positive Negative			Total
Vitassay Rotavirus+	Positive	18	1	19
Adenovirus+Astrovirus+ Norovirus	Negative	0	43	43
+Enterovirus	Total	18	44	62
Rotavirus				

Vitassay Rotavirus+Adenovirus+Astrovirus+Norovirus+Enterovirus Rotavirus) vs Ridascreen®Rotavirus ELISA Test					
Sensitivity	Sensitivity Specificity PPV NPV				
>99% 98% >94% >99%					
A 1 1 11	C				

And evaluation was performed using Vitassay Rotavirus+ Adenovirus+Astrovirus+Norovirus+Enterovirus and PCR. Results were as follows:

		PCR		
		Positive	Negative	Total
Vitassay Rotavirus +	Positive	7	0	7
Adenovirus + Astrovirus+Norovirus	Negative	0	52	52
+Enterovirus	Total	7	52	59
Adenovirus				

Vitassay Rotavirus+Adenovirus+Astrovirus+Norovirus+Enterovirus (Adenovirus) vs PCR					
Sensitivity Specificity PPV NPV					
>99%	>99%	>99%	>99%		

And evaluation was performed using **Vitassay Rotavirus+ Adenovirus+Astrovirus+Norovirus+Enterovirus** and an Elisa assay (Ridasscreen@Astrovirus Test, r-Biopharm).

Results were as follows:

		Ridascreen®Astrovirus Test		
		Positive	Negative	Total
Vitassay Rotavirus +	Positive	16	0	16
Adenovirus + Astrovirus+Norovirus +Enterovirus	Negative	1	11	12
Astrovirus	Total	17	11	28

Vitassay Rotavirus+Adenovirus+Astrovirus+Norovirus+Enterovirus (Astrovirus) vs Ridascreen®Astrovirus Test				
Sensitivity	Specificity	PPV	NPV	
>94%	>99%	>99%	>92%	

And evaluation was performed using **Vitassay Rotavirus+ Adenovirus+Astrovirus+Norovirus+Enterovirus** and other commercial test (Simple Norovirus, Operon).

Results were as follows:

		Simple Norovirus		
		Positive	Negative	Total
Vitassay Rotavirus + Adenovirus + Astrovirus+Norovirus	Positive	2	0	2
+Enterovirus	Negative	0	48	48
Norovirus GI	Total	2	48	50

Vitassay Rotavirus + Adenovirus + Astrovirus+Norovirus (Norovirus GI) vs Simple Norovirus					
Sensitivity	Sensitivity Specificity VPP VPN				
>99%	>99%	>99%	>99%		

		Simple Norovirus		
		Positive Negative Total		
Vitassay Rotavirus + Adenovirus +	Positive	10	0	10
Astrovirus+Norovirus +Enterovirus	Negative	0	48	48
Norovirus GII	Total	10	48	58

Vitassay Rotavirus+Adenovirus+Astrovirus+Norovirus (Norovirus GII) vs Simple Norovirus				
Sensitivity	Specificity	VPP	VPN	
>99%	>99%	>99%	>99%	

And evaluation was performed using **Vitassay Rotavirus+ Adenovirus+Astrovirus+Norovirus+Enterovirus** and a commercial test (IDEIA Enterovirus assay, Dako and IMAGEN[™] Enterovirus, Oxoid).

		IDEIA Enterovirus assay and IMAGEN™ Enterovirus		
		Positive	Negative	Total
Vitassay Rotavirus + Adenovirus + Astrovirus+Norovirus +Enterovirus Enterovirus	Positive	3	0	3
	Negative	0	32	32
	Total	3	32	35

Vitassay Rotavirus+Adenovirus+Astrovirus+Norovirus+Enterovirus (Enterovirus) vs Ridascreen®Astrovirus Test					
Sensi	tivity	Specificity		PPV	NPV
>99	9%	>99%		>99%	>99%
The	resu	ts show	wed	that	Vitassav

Rotavirus+Adenovirus+Astrovirus+Norovirus+Enterovirus has a high sensitivity and specificity to detect rotavirus, adenovirus, astrovirus, norovirus (GI and GII) and/or enterovirus.

Cross reactivity

No cross reactivity was detected against other gastrointestinal pathogens that are occasionally present in feces.

Adenovirus (Strip A, C, D	Escherichia coli	Salmonella	
and E)	O157:H7	typhimurium	
Astrovirus (Strip A, B, D	Giardia lamblia	Salmonella typhi	
and E)			
Campylobacter coli	Hepatitis A	Shigella boydii	
Campylobacter jejuni	Helicobacter pylori	Shigella dysenteriae	

Clostridium difficile	Listeria monocytogenes	Shigella flexneri
Cryptosporidium parvum	Norovirus (Strip A, B, C and E)	Shigella sonnei
Enterovirus (Strip A, B, C, and D)	Rotavirus (Strip B, C, D and E)	Staphylococcus aureus
Entamoeba hystolitica	Salmonella enteritidis	Yersinia enterocolitica
Escherichia coli 0111	Salmonella paratyphi	RSV

REFERENCES

1. ADISSA TRAN; DEBORAH TALMUD; BENOIT LEJEUNE; NICOLAS JOVENIN; FANNY RENOIS; CHRISTOPHER PAYAN; NICOLAS LEVEQUE; LAURENT ANDREOLETTI. "Prevalence of Rotavirus, Adenovirus, Norovirus and Astrovirus infections and coinfections among hospitalized children in Nothern France". Journal of Clinical Microbiology, May 2010, p. 1943-1946.

2. D. DONA; E. MOZZO; A. SCAMARCIA; G. PICELLI; M. VILLA; L. CANTARUTTI; C. GIAQUINTO. "Community-Acquired Rotavirus Gastroenteritis compared with adenovirus and norovirus gastroenteritis in Italian children: a pedianet study". Hindawi Publishing Corporation – International Journal of Pediatrics Volume 2016, article ID 5236243, 10 pages.

3. ALBERT BOSCH; ROSA M. PINTÓ; SUSANA GULX. "Human Astroviruses". Clinical Microbiology Reviews, October 2014, Vol. 27, Number 4, pp. 1048-1074.

4. DIOCRECIANO M. BERO; NILSA DE DEUS; ELIANE V. DA COSTA; FERNANDA M. BURLANDY; ILESH V. JANI; EDSON E. DA SILVA. "Natural circulation of human enterovirus in Maputo city, Mozambique". African Jorunal of Microbiology Research, Vol. 9(21), pp. 1419-1423, 27 May, 2015.

5. PENG-NIEN HUANG; SHIN-RU SHIH. "Update on enterovirus 71 infection". Current opinion in Virology, vol 5, april 2014, pages 98-104.

SYMBOLS FOR IVD COMPONENTS AND REAGENTS

IVD	in vitro diagnostic device	Ť	Keep dry
Ĩ	Consult instructions for use	X	Temperature limitation
2	Use by	***	Manufacturer
LOT	Batch code	Σ _n	Contains sufficient for <n> test</n>
DIL	Sample diluent	REF	Catalogue number







