

RayBio[®] COVID-19 S1 RBD protein Human IgG ELISA Kit

*** This test has not been reviewed by the FDA ***

**For in vitro diagnostics and following FDA policy for the
public health emergency**

Catalog #: IEQ-CoVS1RBD-IgG

User Manual
Revision 7.0

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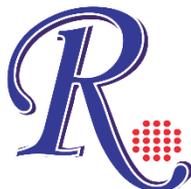
Caution:
Extraordinarily useful information enclosed



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RayBiotech, Inc.

RayBio[®] COVID19 S1 RBD protein Human
IgG ELISA Kit Protocol

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Please read the entire manual carefully before starting your experiment

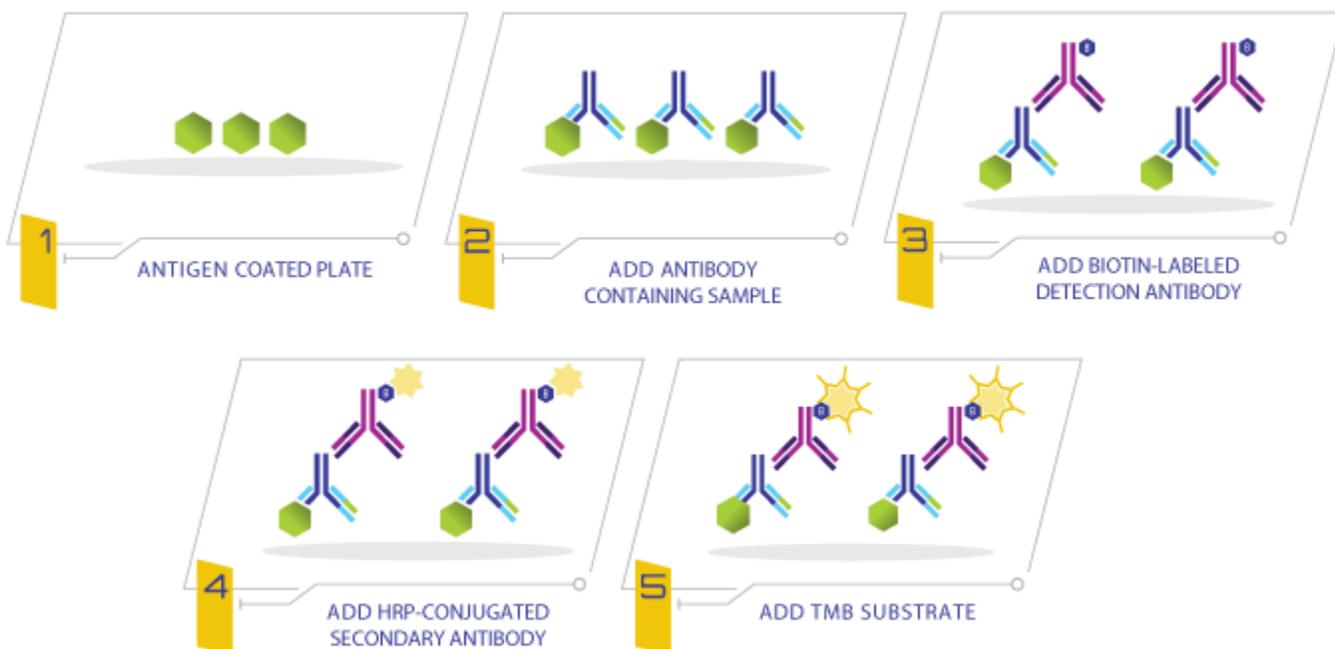
I. INTRODUCTION

The Novel Coronavirus (SARS-CoV-2) S1 RBD protein Human IgG ELISA Kit is an in vitro indirect ELISA for the quantitative measurement of human IgG antibody against SARS-CoV-2 S1 RBD protein in human serum or plasma. This ELISA kit is for IVD use

PRINCIPLE OF THE ASSAY

This COVID19 human IgG antibody ELISA kit employs an indirect ELISA method. In this kit, standard 96-well plates (12 strips with 8 wells/strip) are coated with the SARS-CoV-2 S1 RBD protein, which combines with the corresponding antibody present in a sample and Positive Control, which used as calibration curve for interpretation purposes. The wells are washed, and biotinylated anti-human IgG antibody is added. After washing away unbound biotinylated antibody, HRP-conjugated streptavidin is pipetted to the wells. The wells are again washed, a TMB substrate solution is added to the wells, and color develops in proportion to the amount of COVID19 S1 RBD protein human IgG antibody bound. The Stop Solution changes the color from blue to yellow, and the intensity of the color is measured at 450 nm.

The Positive Control is from an inactivated serum sample which contains SARS-COV-2 S1 RBD protein human IgG antibody. We do not know the exact amount of SARS-COV-2 S1 RBD protein human IgG antibody in the Positive Control sample. The Positive Control can be used as a calibration curve for interpretation purposes in different assays.



II. STORAGE

The entire kit may be stored at -20°C for up to 1 year from the date of shipment. Avoid repeated freeze-thaw cycles. For extended storage, it is recommended to store at -80°C. For prepared reagent storage, see table below.

III. REAGENTS

Component	Size / Description	Storage / Stability After Preparation
SARS-CoV-2 S1 RBD protein coated 96 well-Microplate (Item A)	96 wells (12 strips x 8 wells) coated with SARS-CoV-2 S1 RBD protein	1 month at 4°C*
Wash Buffer Concentrate (20X) (Item B)	25 ml of 20X concentrated solution.	1 month at 4°C
Positive Control (Item C)	1 vial of Positive Control sample from an inactivated serum sample which contains SARS-Cov-2 S1 RBD protein human IgG antibody.	1 week at -80°C
Biotinylated Anti-Human IgG (Item F)	1 vial of solution.	5 days at 4°C
HRP-Streptavidin concentrate (Item G)	1 vial of solution.	Do not store and reuse
TMB One-Step Substrate Reagent (Item H)	12 ml of 3,3',5,5'-tetramethylbenzidine (TMB buffer solution).	1 month at 4°C
Stop Solution (Item I)	8 ml of 0.2 M sulfuric acid.	N/A
Assay Diluent B (Item E)	15 ml of 5X concentrated buffer.	1 month at 4°C
5X Sample Diluent (Item J)	25 ml of 5X diluent buffer, 0.5% proclin 300 as preservative.	1 month at 4°C

*Return unused wells to the pouch containing desiccant pack, reseal along entire edge.

IV. ADDITIONAL MATERIALS REQUIRED

1. Microplate reader capable of measuring absorbance at 450 nm.
2. Precision pipettes to deliver 2 µl to 1 ml volumes.
3. Adjustable 1-25 ml pipettes for reagent preparation.
4. 100 ml and 1 liter graduated cylinders.
5. Absorbent paper.
6. Distilled or deionized water.

V. REAGENT PREPARATION

1. Bring all reagents and samples to room temperature (18 - 25°C) before use.
2. 5X Sample Diluent (Item J) should be diluted 5-fold with deionized or distilled water before use to make 1X Sample Diluent.
3. 5X Assay Diluent B (Item E) should be diluted 5-fold with deionized or distilled water before use to make 1X Assay Diluent B.
4. Dilute sample (human serum or plasma) with 1X Sample Diluent (Item J) 1500 times. For example, add 1 μ l serum + 1499 μ l 1X Sample Diluent. Mix the diluted sample well and evenly for the best results.

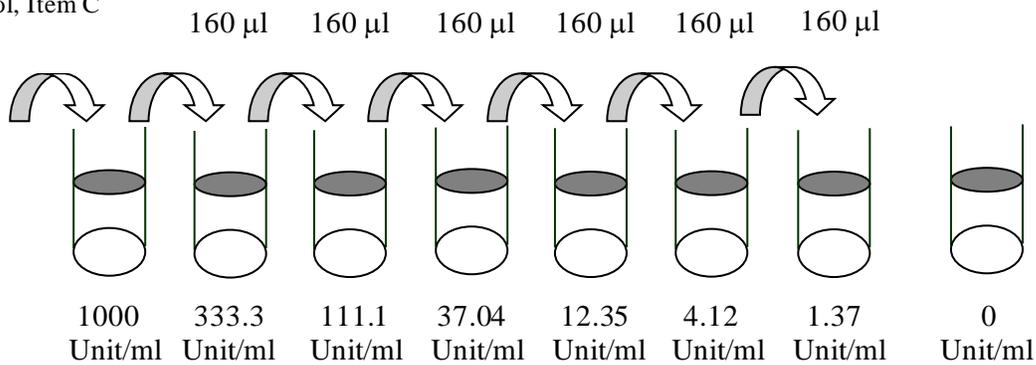
Note 1: The user needs to calculate the amount of the sample used for the whole test. Please reserve sufficient amount of sample in advance.

Note 2. Avoid using samples with severe hemolysis, precipitate, contamination by bacteria or protein suspension.

Note 3. The use of EDTA, heparin sulfate, sodium citrate, or other anticoagulants will not affect the results.

5. Preparation of Positive Control calibration curve: **Briefly spin the vial of Positive Control, Item C.** Add 400 μ l 1X Sample Diluent (Item J) into the Item C vial to prepare a 1000 Unit/ml Positive Control solution and mix thoroughly. Pipette 320 μ l 1X Sample Diluent into each of 7 tubes. Use the 1000 Unit/ml Positive Control solution to produce a dilution series (shown below). Mix each tube thoroughly before the next transfer. 1X Sample Diluent serves as the zero (0 Unit/ml).

Positive Control, Item C
+ 400 μ l



6. If the Wash Concentrate (20X) (Item B) contains visible crystals, warm to room temperature and mix gently until dissolved. Dilute 20 ml of Wash Buffer Concentrate into deionized or distilled water to yield 400 ml of 1X Wash Buffer.
7. Briefly spin the Biotinylated Anti-Human IgG Antibody vial (Item F) before use. Add 200 μ l of 1X Assay Diluent B (Item E) into the vial to prepare an antibody concentrate. Pipette up and down to mix gently (the concentrate can be stored at 4°C for 5 days). The detection antibody concentrate should then be diluted 100-fold with 1X Assay Diluent B and used in step 5 of Part VI Assay Procedure.
8. Briefly spin the HRP-Streptavidin concentrate (Item G) and pipette up and down to mix gently before use. HRP-Streptavidin concentrate should be diluted 800-fold with 1X Assay Diluent B (Item E) and used in step 7 of Part VI Assay Procedure.

For example: Briefly spin the vial (Item G) and pipette up and down to mix gently. Add 12.5 μ l of HRP-Streptavidin concentrate into a tube with 10 ml 1X Assay Diluent B to prepare a 800-fold diluted HRP-Streptavidin solution (don't store the diluted solution for next day use). Mix well.

VI. ASSAY PROCEDURE

1. Bring all reagents and samples to room temperature (18 - 25°C) before use. It is recommended that the positive control, and all samples be run at least in duplicate.
2. Label removable 8-well strips as appropriate for your experiment.
3. Add 100 μ l of each prepared positive control (Item C, prepared in Reagent Preparation step 5), and sample (prepared in Reagent Preparation step 4) into appropriate wells. Cover wells and incubate for 1 hour at room temperature with gentle shaking.
4. Discard the solution and wash 4 times with 1X Wash Buffer. Wash by filling each well with 300 μ l of 1X Wash Buffer using a multi-channel Pipette or autowasher. Complete removal of all liquid at each step is essential for good performance. After the last wash, remove any remaining Wash Buffer by aspirating or decanting. Invert the plate and blot it against clean paper towels.
5. Add 100 μ l of prepared Biotinylated Anti-Human IgG Antibody (Item F, Reagent Preparation step 7) to each well. Incubate for 30 minutes at room temperature with gentle shaking.
6. Discard the solution. Repeat the wash as in step 4.

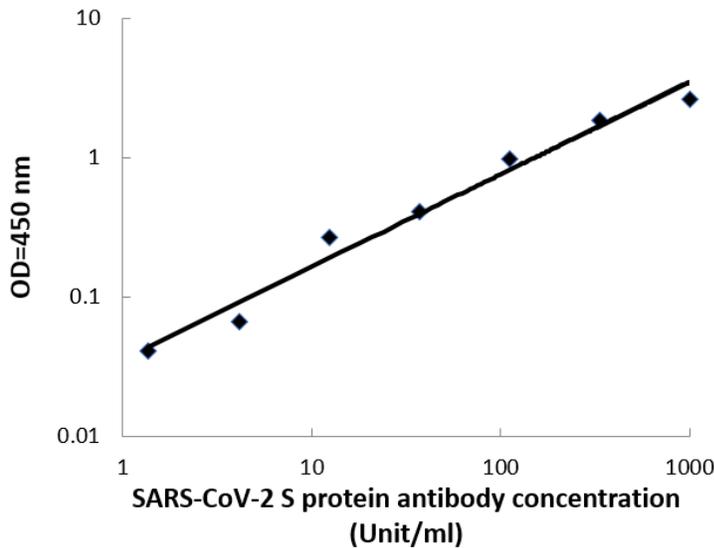
7. Add 100 μ l of prepared HRP-Streptavidin solution (see Reagent Preparation step 8) to each well. Incubate for 30 minutes at room temperature with gentle shaking.
8. Discard the solution. Repeat the wash as in step 4.
9. Add 100 μ l of TMB One-Step Substrate Reagent (Item H) to each well. Incubate for 15 minutes at room temperature in the dark with gentle shaking.
10. Add 50 μ l of Stop Solution (Item I) to each well. Read at 450 nm immediately.

VII. ASSAY PROCEDURE SUMMARY

1. Prepare all reagents, samples and standards as instructed.
2. Add 100 μ l positive control, or sample to each well. Incubate 1 hour at room temperature.
3. Add 100 μ l prepared Biotinylated Anti-Human IgG Antibody into each well. Incubate 30 minutes at room temperature.
4. Add 100 μ l prepared HRP-Streptavidin solution to each well. Incubate 30 minutes at room temperature.
5. Add 100 μ l TMB One-Step Substrate Reagent to each well. Incubate 15 minutes at room temperature.
6. Add 50 μ l Stop Solution to each well. Read at 450 nm immediately.

VIII. INTERPRETATION OF RESULTS

1. Calibration curve: Calculate the mean absorbance for each set of duplicate Positive Control (Item C), and samples, and subtract the average zero Positive Control optical density. Plot the calibration curve on a log-log scale with Positive Control concentration (Unit/ml) on the x-axis and absorbance on the y-axis using Sigma plot or Excel software. The following calibration curve is a typical data for demonstration only. A calibration curve must be run with each assay.
2. A positive result for an unknown sample is considered as a Unit/ml calculated value using the calibration curve of greater than 15 Unit/ml.
3. A negative result for an unknown sample is considered as a Unit/ml calculated value using the calibration curve of less than 15 Unit/ml.



IX. ASSAY PERFORMANCE

1. The sensitivity of this assay against a reference standard is 94.74% (72/76, 95%CI: 87.07-98.55%).
2. The specificity of this assay against a reference standard is 98.57% (275/279, 95%CI: 96.37-99.61%).
3. The accuracy of this assay against a reference standard is 97.75% (347/355, 95%CI: 95.61-99.02%), with Kappa value of 0.933 and the AUC=0.992.

X. Precautions

1. Negative results do not rule out SARS-CoV-2 infection, particularly in those who have been in contact with the virus. Follow-up testing with a molecular diagnostic should be considered to rule out infection in these individuals.
2. Results from antibody testing should not be used as the sole basis to diagnose or exclude SARS-CoV-2 infection or to inform infection status.
3. Positive results may be due to past or present infection with non-SARS-CoV-2 coronavirus strains, such as coronavirus HKU1, NL63, OC43, or 229E.
4. Cross reactivity to other viral antibodies was not seen against the following (<10%): HCV, HBV, RSV, nor was cross reactivity seen in ANA+ patients.
5. The product is designed only for use with human serum for the qualitative detection of novel coronavirus (SARS-CoV-2).
6. Coronavirus may not be detected even though coronavirus antibodies are present in the sample, if the amount of coronavirus antibodies is below the detection level of the kit.
7. This test has not been reviewed by the FDA.
8. This product is for in vitro diagnostic use only following FDA guidance "Policy for Diagnostic Tests for Coronavirus Disease-2019 during the Public Health Emergency".
9. Not for the screening of donated blood.
10. The assay should be performed as outlined in this manual, and in accordance with all instructions.
11. Do not use expired or damaged products.
12. Take care to prevent the possibility of virus infection when collecting samples. Wear disposable gloves, masks, etc., and wash your hands afterwards.

XI. TROUBLESHOOTING GUIDE

Problem	Cause	Solution
Low signal	Improper preparation of positive control and/or the HRP-conjugated antibodies	Briefly spin down vials before opening.
	Inadequate reagent volumes or improper dilution	Check pipettes and ensure correct preparation
	Too brief incubation times	Ensure sufficient incubation time. Assay procedure step 3 may be done overnight at 4°C with gentle shaking (note: may increase overall signals including background).
Large CV	Inaccurate pipetting	Check pipettes
	Air bubbles in wells	Remove bubbles in wells
High background	Plate is insufficiently washed	Review the manual for proper wash procedure. If using a plate washer, ensure that all ports are unobstructed.
	Contaminated wash buffer	Make fresh wash buffer

This product is for in vitro diagnostic use only following FDA guidance “Policy for Diagnostic Tests for Coronavirus Disease-2019 during the Public Health Emergency

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For ordering information or other inquires, contact:



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