

HBsAg (HEPA™ STRIP)

(Serum/Plasma)

IMMUNOPAK

Last update 04-2023

Ref. RDT-HES.73M, 100 Test

INTENDED USE

Strip test for detection of (HBsAg) in serum or plasma.

INTRODUCTION

Hepatitis B surface antigen ("Australia Antigen") consists of lipid, carbohydrate and protein elements; the protein moiety provides a marker for identification of chronic, infectious HBV-HEPATITIS B VIRUS infections. Hepatitis B is transmitted sexually or intravenously and has an incubation period of six months. If not diagnosed properly and in time, it can develop into acute or chronic infection, liver cirrhosis and fulminant hepatitis.

This test is very useful for screening blood donors, to find out whether they are HBsAg positive before collection of blood.

PRINCIPLE

HBsAg Strip is a qualitative test based on immunochromatography sandwich principle. The test strip includes a combination of monoclonal antibody gold conjugate (colloidal gold) and monoclonal solid phase antibodies which selectively binds Hepatitis B surface antigen with high degree of sensitivity.

The HBsAg test is a one-step immunochromatographic assay based on the antigen capture or "Sandwich" principle. The method uses monoclonal antibodies conjugated to colloidal gold and monoclonal antibodies immobilized on a nitrocellulose strip in a thin line. The test sample flows laterally through an absorbent pad where it mixes with the signal reagent. If the sample contains HBsAg, the colloidal gold-antibody (mouse) conjugate binds to the antigen, forming an antigen-antibody-colloidal gold complex. The complexes then migrate through the nitrocellulose strip by capillary action, which are stopped by an immobilized antibody zone forming a pink-purple line. The formation of the first pink-purple line (Test line) is an indication of hepatitis positive. To serve as a procedural control, an additional line of Goat anti-mouse IgG has been immobilized on the strip. If the test is performed correctly, this will result in the formation of pink-purple line on control line.

PRESENTATION

	100 Tests
HBsAg (HEPA™ STRIP)	100 Strips

PRECAUTION

1. HBsAg Strip is for in vitro diagnostic use only.
2. Handle all specimens as they may contain infectious agents. After the completion of assay procedure, treat the glasswares with 0.5% to 1% solution of sodium hypochlorite for 1 hour before disposal.
3. Avoid any contact between hands and eyes or nose during specimen collection and testing.

STORAGE & STABILITY

HBsAg test strip should be stored at 2°C-40°C. The strip may be stored at room temperature but not exceeding 40°C in the original sealed pouch. The shelf life or expiry of the strip is printed on the pouch as well as on the carton label. The test kit should be kept away from direct sunlight, moisture and heat.

SPECIMEN COLLECTION AND STORAGE

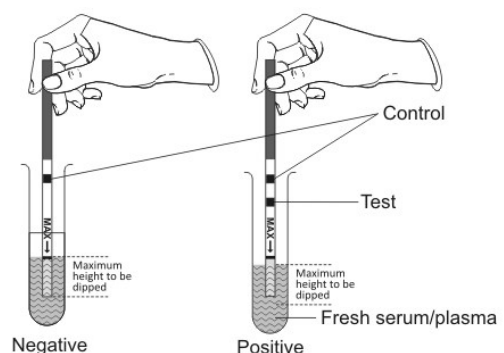
HBsAg test strip test is performed on human serum or plasma. It is recommended that the test should be carried out immediately after the collection of blood and separation of serum. The antigen HBsAg is thermo labile. Serum specimen can be stored at 2°C-8°C following collection upto 3 days or for longer storage the specimen should be frozen (-20°C).

Specimen containing precipitates, can cause a problem, is well known in chromatography procedures, and hence should be clarified either by centrifugation or by filtration. If your strip test is showing stagnant flow on chromatography, it is most likely due to problem in the sample. Retest with a fresh fasting sample or a diluted sample.

TEST PROCEDURE

1. Bring the specimen and HBsAg Strip to room temperature prior to testing.
2. Place an 8 x 75 mm test tube in a test tube stand, pipette approximately 200 µl of sample directly to the bottom of the test tube. Avoid wetting of the inside walls of the test tubes, as drops on the walls of the test tubes may risk the test by wetting the test stick above the filter area.
3. Take the test strip from the pouch and place it in the test tube till the mark () on the strip with sample pad end downwards.
4. Let the strip remain standing in the sample until you see that the control line (the upper part in the Reaction Zone) as fully formed. Allow the reaction to occur for 20 minutes.
5. Read the results within 10 to 20 minutes, strong positive reaction will be visible within 5 minutes.
6. If negative or questionable results are obtained, and HBV infection is suspected, the test should be repeated on a fresh serum specimen.
7. As with all diagnostic tests, a definitive clinical diagnosis should not be based on the result of a single test, but the physician should interpret only after all clinical and laboratory findings have been evaluated.

INTERPRETATION OF RESULTS



- **Negative:** If a distinct pink-purple line is formed only at the upper end of the Reaction Zone (control line), the test result is negative.
- **Positive:** If a distinct pink-purple line is formed at the end (test line) and in the upper part (control line) of the Reaction Zone, the test result is positive indicating that the sample contains Hepatitis B surface Antigen
- **Invalid:** A total absence of pink-purple line in both regions or no line appears on the control (C) region is an indication of procedure error and / or the test reagent deterioration. Repeat the test with a new strip.

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SENSITIVITY

HBsAg Strip can detect Hepatitis B surface Antigen in serum or plasma in a concentration of as low as 0.5 ng/ml.

LIMITATIONS

The test will only indicate the presence or absence of Hepatitis B Surface Antigen in the specimen and other considerations like clinical symptoms should be noted before making final diagnosis. Additional followup testing, using available clinical methods (along with repeating HBsAg Strip test) is required, if the HBsAg Strip test is negative with persisting clinical symptoms.

REFERENCES

1. MILICH D.R., Immune response to the hepatitis B Virus: infection, animal models, vaccination, VIRAL HEPATITIS, 1997, 3,63-103
2. HOLLINGER F.B., Hepatitis B virus, in Fields Virology, Third Edition. Lippincott - Raven Publishers, Philadelphia. 1996, 2739-2807
3. BLUMBERG B.S., ALTER H.J., VISNICH S. JAMA. A "New" Antigen in Leukemia Sera, 1965, 191. 541-546.
4. PRINCE A.M., An antigen detected in blood during the incubation period of serum hepatitis. Proc Natl Acad. Sci. USA, 1968, 60. 814-821.



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