






Measles Virus Antibody IgG GENLISA™ ELISA

REF : KBD955

Ver 1.1

IVD

Enzyme Immunoassay for Qualitative Determination of Measles Virus Antibody IgG in human serum and plasma.

IVD	For In-vitro Diagnostic Use	REF	Catalog Number
	Store At	LOT	Batch Code
	Manufactured By		Biological Risk
	Expiry Date		Consult Operating Instructions

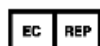
For In vitro Diagnostic use only. Purchase does not include or carry the right to resell or transfer this product either as a stand-alone product or as a component of another product. Any use of this product other than the permitted use without the express written authorization of KRISHGEN Pudgala LLP is strictly prohibited.



REF KBD955

 96 tests

Krishgen Pudgala LLP Unit Nos#318/319, Shah & Nahar, Off Dr E Moses Road, Worli, Mumbai 400018. India.
Tel: +91-22-49198700 | email: sales@krishgenpudgala.com



KinesisDx, Lyoner Strasse 14, Frankfurt, Germany

Introduction:

Measles is an acute infection caused by the *Rubeola virus* and is highly contagious, belonging to genus *Morbillivirus* of the family *Paramyxoviridae*. It is a very contagious and infectious disease. The ability of this virus to cause systemic infection, to transmit via aerosols or droplets and to suppress the immune response till a long time after the infection makes Measles a serious matter of concern. It is generally associated with fever and rashes.

Intended Use:

The Measles Virus Antibody IgG GENLISA™ ELISA is intended for the qualitative determination of IgG class antibodies in human serum and plasma.

Principle:

Measles Virus Antibody IgG GENLISA™ ELISA is an indirect enzyme linked immunosorbent assay for qualitative determination of Measles Virus Antibody IgG antibody present in the human serum and plasma. Antigens are pre-coated onto microwells. Samples and Controls are pipetted into microwells and Measles Virus Antibody IgG present in test sample binds to the antigen coated on the wells. And then enzyme conjugate antibody is pipetted and incubated to form an immune complex. After washing microwells in order to remove any non-specific binding, the substrate solution is added to microwells and color develops proportionally to the amount of Measles Antibody present in the sample. Color development is then stopped by addition of stop solution. Absorbance is measured at 450 nm.

Materials Provided:

1. Recombinant Measles Coated Microtiter Plate (8 x 12 wells) - 1 no
2. Negative Control - 2 ml
3. Positive Control - 2 ml
4. Anti-Human IgG:HRP Conjugate - 12 ml
5. (20X) Wash Buffer - 25 ml
6. Sample Diluent - 30 ml
7. TMB Substrate - 12 ml
8. Stop Solution - 12 ml
9. Instruction Manual

Materials to be provided by the End-User:

1. Microtiter Plate Reader able to measure absorbance at 450 nm.
2. Adjustable pipettes and multichannel pipettor to measure volumes ranging from 2 ul to 1000 ul
3. Deionized (DI) water
4. Wash bottle or automated microplate washer
5. Graph paper or software for data analysis
6. Timer
7. Absorbent Paper

Handling/Storage:

1. Store main kit components at recommended storage temperature indicated on the component label.
2. Before using, bring all components to room temperature (18-25°C). Upon assay completion return all components to appropriate storage conditions.
3. The Substrate is light-sensitive and should be protected from direct sunlight or UV sources.

Health Hazard Warnings:

1. Reagents that contain preservatives may be harmful if ingested, inhaled or absorbed through the skin.



Refer to the MSDS online for details.

2. To reduce the likelihood of blood-borne transmission of infectious agents, handle all serum and/or plasma in accordance with NCCLS regulations.

Sample Preparation and Storage:

Specimens should be clear and non-hemolyzed. Samples should be run at a number of dilutions to ensure accurate quantitation.

1. Extract as soon as possible after specimen collection as per relevant procedure. The samples should be tested as soon as possible after the extraction. Alternately the extracted samples can be kept in -20°C. Avoid repeated freeze-thaw cycles.
2. **Serum-** Coagulate at room temperature for 10-20 minutes; centrifuge for 20-min at 2000-3000 rpm. Remove the supernatant. If precipitation appears, recentrifuge.
3. **Plasma-** Use EDTA or citrate plasma as an anticoagulant, mix for 10-20 minutes; centrifuge for 15-min at
Note: Grossly hemolyzed samples are not suitable for use in this assay.

Sample Dilution:

To make 1:100 Dilution, add 3 ul Sample + 300 ul Sample Diluent

Test Sample Preparation - Samples have to be diluted 1:100 (v/v), e.g. 3 ul sample + 300 ul Sample Diluent prior to assay. The samples may be kept at 2 - 8°C for up to three days. Long-term storage requires -20°C. Note: Diluted samples should not be stored as they may show degradation in results.

Reagent Preparation:

1. To make (1X) Wash Buffer; dilute 25 ml of (20X) Wash Buffer in 475 ml of DI water. This is the working solution.
2. Allow all components to reach RT (Room Temperature) prior to use in the assay.

Procedural Notes:

1. In order to achieve good assay reproducibility and sensitivity, proper washing of the plates to remove excess un-reacted reagents is essential.
2. High Dose Hook Effect may be observed in samples with very high concentrations of Measles IgG. High Dose Hook Effect is due to excess of antibody for very high concentrations of Measles Virus Antibody IgG present in the sample.
3. Avoid assay of Samples containing sodium azide (NaN₃), as it could destroy the HRP activity resulting in under-estimation of the amount of Measles Virus Antibody IgG.
4. It is recommended that all Controls and Samples be assayed in duplicates or triplicates.
5. Maintain a repetitive timing sequence from well to well for all the steps to ensure that the incubation timings are same for each well.
6. If the Substrate has a distinct blue color prior to use it may have been contaminated and use of such substrate can lead to compromisation of the sensitivity of the assay.
7. The plates should be read within 15 minutes after adding the Stop Solution.
8. Make a work list in order to identify the location of Controls and Samples.

Test Procedure:

1. All reagents should be allowed to reach room temperature before use.
2. Add **100 ul Controls, diluted Sample** in appropriate wells.
3. Seal the plate and Incubate at 37°C for 30 minutes.

4. Aspirate and wash plate 5 times with **(1X) Wash Buffer** and blot residual buffer by firmly tapping plate upside down on absorbent paper. Wipe of any liquid from the bottom outside of the microtiter wells as any residue can interfere in the reading step. All the washes should be performed similarly.
5. Add **100 ul** of **Anti-Human IgG:HRP Conjugate** to each well. Incubate at 37°C for 30 minutes.
6. Repeat the Wash Step as mentioned in step (4) above.
7. Add **100 ul** of **TMB Substrate** into each well.
8. Incubate at 37°C for 30 minutes in dark. DO NOT SHAKE or else it may result in higher backgrounds and worse precision. Positive wells should turn bluish in color.
9. Add **100 ul** of **Stop Solution**. Wells should turn from blue to yellow in color.
10. Read result with an ELISA reader at 450 nm within 15 minutes of stopping the reaction.

Calculation of Results:

Determine the Mean Absorbance for each set of duplicate Controls and Samples. Results are interpreted qualitatively by calculating a cut-off value. The cut-off value is calculated as the mean of absorbance of the Negative Control plus 0.2.

Cut Off (CO) = Mean O.D. of Neg. Control + 0.02 (Cut Off Factor)

Example:

$$\begin{aligned} \text{Cut Off Value} &= \text{O.D. of Neg. Control 1} + \text{O.D. of Neg. Control 2} / 2 + 0.02 \\ &= 0.098 + 0.112 / 2 + 0.02 \\ &= 0.125 \end{aligned}$$

Reference Values:

Negative Results: Samples with O.D below or equal to the Cut Off Value (COV) are reported as Non Reactive.

Equivocal Results: Samples with O.D above Cut Off Value (COV) and below or equal to O.D of 0.3 are reported as Equivocal

Positive Results: Samples with O.D above 0.3 are reported as Reactive.

Interpretation of Results:

Negative Value	Absorbance \leq COV	No antibodies present against specific pathogen.
Equivocal*	Absorbance $>$ COV and \leq 0.3	Equivocal Samples should be retested or clinically interpreted.
Positive Value	Absorbance $>$ 0.3	Antibodies against specific pathogen are present.

Criteria of Validation:

Measles Virus Antibody IgG results are considered to be valid, if

O.D. of the Negative Control \leq 0.110

O.D. of the Positive Control $>$ 0.110

Limitations of Method:

Any clinical diagnosis should not be based on the results of in-vitro diagnostic methods alone.

Physicians are supposed to consider all clinical and laboratory findings possible to state a diagnosis.

Performance Characteristics of the Kit:

This kit has been developed and validated as per regulatory guidelines.

Sensitivity:

20 known Measles Virus Antibody IgG positive patient serum samples were tested using Measles Virus Antibody IgG GENLISA™ ELISA and all the 20 samples tested positive. 100% correlation was observed. The control has been calibrated using Human Mumps IgG Plasma (Catalog No. PLS103G) from Serion Diagnostics, Germany and tested positive for reactivity above the cut-off.

Specificity:

5 known Measles Virus Antibody IgG negative patient serum samples were tested using Measles Virus Antibody IgG GENLISA™ ELISA and all the 5 samples tested negative. 100% correlation was observed

Clinical Sensitivity/Specificity:

Total number of 20 known Measles Virus Antibody IgG positive patient serum samples and 5 negative patient serum samples were run using the Measles Virus Antibody IgG GENLISA™ ELISA. The results were correlated as under -

Particulars	Specificity as per Measles Virus Antibody IgG GENLISA™ ELISA	%
n=20 Positive Patient Samples	20	100
n=5 Negative Patient Samples	5	100

Precision:

Precision is defined as the percent coefficient of variation (%CV) i.e. standard deviation divided by the mean and multiplied by 100. Assay precision was determined by both intra (n=5 assays) and inter assay (n=5 assays) reproducibility on two pools with low, medium and high concentrations. While actual precision may vary from laboratory to laboratory and technician to technician, it is recommended that all operators achieve precision below these design goals before reporting results.

Pool	Intra Assay %CV	Inter Assay %CV
Low	<10%	<12%
Medium	<10%	<10%
High	<10%	<10%

Safety Precautions:

- **This kit is For In-vitro Diagnostic Use only.** Follow the working instructions carefully.
- The expiration dates stated on the kit are to be observed. The same relates to the stability stated for reagents
- Do not use or mix reagents from different lots.
- Do not use reagents from other manufacturers.
- Avoid time shift during pipetting of reagents.
- All reagents should be kept in the original shipping container.
- Some of the reagents contain small amount of sodium azide (< 0.1 % w/w) as preservative. They must not be swallowed or allowed to come into contact with skin or mucosa.
- Source materials maybe derived from human body fluids or organs used in the preparation of this kit were tested and found negative for HBsAg and HIV as well as for HCV antibodies. However, no known test guarantees the absence of such viral agents. Therefore, handle all components and all patient samples as if potentially hazardous.
- Since the kit contains potentially hazardous materials, the following precautions should be observed
 - Do not smoke, eat or drink while handling kit material
 - Always use protective gloves
 - Never pipette material by mouth
 - Wipe up spills promptly, washing the affected surface thoroughly with a decontaminant.
- In any case GLP should be applied with all general and individual regulations to the use of this kit.



Note:

All materials including controls have been tested and classified on donor level to be negative or non-reactive for STS, HBsAg, HIV 1 Ag (or HIV PCR (NAT), HCV antibody, HCV (NAT) and HIV 1/2 antibody, as required at the time of bleeding, by using FDA / CDSCO licensed test kits. However, no test system can guarantee complete absence of infectious agents. Therefore, all products should be considered potentially infectious and handled with appropriate safety precautions.

LIMITED WARRANTY

Krishgen Pudgala LLP does not warrant against damages or defects arising in shipping or handling, or out of accident or improper or abnormal use of the product; against defects in products or components not manufactured by Krishgen Pudgala LLP, or against damages resulting from such non-Krishgen Pudgala LLP made products or components. Krishgen Pudgala LLP passes on to customer the warranty it received (if any) from the maker thereof of such non-Krishgen made products or components.

This warranty also does not apply to product to which changes or modifications have been made or attempted by persons other than pursuant to written authorization by Krishgen Pudgala LLP.

THIS WARRANTY IS EXCLUSIVE. The sole and exclusive obligation of Krishgen Pudgala LLP shall be to repair or replace the defective product in the manner and for the period provided above. Krishgen Pudgala LLP shall not have any other obligation with respect to the products or any part thereof, whether based on contract, tort, and strict liability or otherwise. Under no circumstances, whether based on this Limited Warranty or otherwise, shall Krishgen Pudgala LLP be liable for incidental, special, or consequential damages.

This Limited Warranty states the entire obligation of Krishgen Pudgala LLP with respect to the product. If any part of this Limited Warranty is determined to be void or illegal, the remainder shall remain in full force and effect.

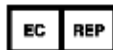
Krishgen Pudgala LLP, 2022.

THANK YOU FOR USING KRISHGEN PRODUCT!



Krishgen Pudgala LLP

Unit No.1/2, Om Sainath Commercial Complex,
Off Mankoli-Anjur Phata Road. Village Dapode, Bhiwandi 421302



KinesisDx, Lyoner Strasse 14, Frankfurt, Germany

Regulatory Status:



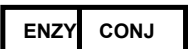








CE Marked	Europe
FDA registered *	USA
CDSCO registered	India

** under registration. Site establishment undertaken.*

SCHEMATIC ASSAY PROCEDURE

1	All reagents should be allowed to reach room temperature before use.
2	Add 100 ul Controls, diluted Samples in appropriate wells
3	Seal the plate and Incubate at 37°C for 30 minutes.
4	Aspirate and wash plate 5 times with (1X) Wash Buffer and blot residual buffer by firmly tapping plate upside down on absorbent paper. Wipe of any liquid from the bottom outside of the microtiter wells as any residue can interfere in the reading step. All the washes should be performed similarly.
5	Add 100 ul Anti-Human IgG:HRP Conjugate to each well except blank well.
6	Incubate at 37°C for 30 minutes.
7	Repeat the Wash Step as mentioned in step (4) above
8	Add 100 ul of TMB Substrate into each well.
9	Incubate at 37°C for 30 minutes.
10	Add 100 ul of Stop Solution. Read result with an ELISA reader at 450 nm within 15 minutes stopping the reaction.

SYMBOLS KEY

	Coated Microtiter Plate (12x8 wells)
	Control
	Enzyme Conjugate
	Sample Diluent
	(20X) Wash Buffer
	TMB Substrate
	Stop Solution
	Consult Instructions for Use
	Catalog Number
	Expiration Date
	Storage Temperature