# Quick Reference Guide

# INDICAID

INDICAID™ COVID-19 Rapid Antigen Test For Emergency Use Authorization (EUA) Only

Intended Use The INDICAID $^{\text{TM}}$  COVID-19 Rapid Antigen Test is a lateral flow immunoassay intended for the qualitative detection of nucleocapsid protein antigen from SARS-CoV-2 in direct anterior nasal swab specimens from individuals who are suspected of nasai swaa specimens trom inaviauauas wno are suspected a COVID-19 by their healthcare provider within the first five (5) days of symptom onset. Anterior nasal swab specimens may be calected by a healthcare provider (HCP) or self-calected (byindixiduals 18) years of age or dotted under the supervision of an HCP). Testing is limited to laboratories certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA), 42 U.S.C. § 263a, that meet the requirements to perform moderate complexity, high complexity, or waived tests. This test is authorized for use at the Point of Care (POC), i.e., in patient care settings operating under a CLIA Certificate of Waiver, Certificate of Compliance, or Certificate of Accreditation.

The INDICAID  $^{TM}$  COVID-19 Rapid Antigen Test does not differentiate between SARS-CoV and SARS-CoV-2  $\vee$  iruses.

Results are for the identification of SARS-CoV-2 nucleocapsid protein antigen. Antigen is generally detectable in anterior nasal swabs during the acute phase of infection. Positive results indicate the presence of viral antigens, but clinical correlation with patient history and other diagnostic information is necessary to determine nistory and other alagnostic information is necessary to determine infection status. Positive results do not rule outbacterial infection or co-infection with other viruses. The agent detected may not be the definite cause of disease. Laboratories within the United Statesand its territories are required to report all positive results to the appropriate public health authorities.

Negative results should be treated as presumptive and may be Negative results should be treated as presumptive and may be confirmed with a molecular assay, if necessary, for patient management. Negative results do not rule out SARS-CoV-2 infection and should not be used as the sole basis for treatment or patient management decisions, including infection control decisions. Negative results should be considered in the context of a patient's recent exposures, history, and the presence of clinical signs and symptoms consistent with COVID-19.

The INDICAID™ COVID-19 Rapid Antigen Test is intended for use by trained clinical laboratory personnel and medical and healthcare personnel in Point of Care (POC) settings. The INDICAID™ COVID-19 Rapid Antigen Test is only for use under the Food and Drug Administration's Emergency Use Authorization.

Materials required but not provided

- 1.Timer
- 2.Personal protective equipment 3.INDICAID™COVID-19 Antigen Quality Control (Sold Separately)

- 1. 25 individually wrapped Test Devices
- 2, 25 Buffer Solution Vials
- 3. 25 individually wrapped Swabs
   HIFU and Quick Reference Guide
- See Package Insert for complete instruction, warnings, precautions, limitations, storage &handling conditions, and Quality Control recommendations.
- For in vitro diagnostic use only.
- Specimens should be tested immediately after specimen collection. Do not test specimens after 2 hours of collection.
   All components in this test kit should remain sealed until ready for
- · All components in this test kit are for one-time use only. Do not
- Storeat 2-30°C.Do not freeze. Avoid direct sunlight.
   If Buffer Solution comes into contact with eyes and/or skin, flush abundantly with water.
- Do not use the test kit after the expiration date

Wear appropriate personal protective equipment and gloves when handling patient samples and running the test. Nasalswab specimens may be self-collected by the patient if collection procedure observed by ahealthcare professional.

Remove the Swab & Test Devicefrom their packaging.

Place the Test Device on ahorizontal (flat) surface forrunning the test.

1 Insert the entire collection tip of the swab provided (usually ½ to ¾ of an inch, or Ito 1.5 cm) inside the nostril.

Firmly sample the nasal wall by rotating the swab in a drcular path against the nasal wall at least 4 times. Take approximately 15 seconds to collect the specimen. Be sure to collect any nasal drainage that may be present on the swab.

Repeat in the other nostril using the same swab.

The Buffer Solution Vial cap is composed of two parts (purple and white).

Remove the entire cap. Sfir the swab into the Buffer Solution, ensuring that the swab head is fully submerged by tilting the vial.



Twist the swab back and forth 20 times in the Buffer Solution. Roll the swab head against the inner wall of the vial to release the liquid from the swab, then discard the swab.

Close the entire cap tightly. Immediately perform steps 5-7



Remove the purple top half of the cap to expose the dropper



Hold the vial vertically above the sample well (S). Slowly squeeze and apply 3 drops of the Buffer Solution into the sample well (S) of the Test Device. 06



Readthetestline(T) andcontrol line (C) results promptly at 20 minutes, and not earlier to ensure propertestperformance.



Results after 25 m inutes should not be used.



Interpretation of the test results

The presence of both the red-colored control line (C) and colored test line (T) indicates the presence of SARS-CoV-2 antigen. The result suggests current SARS-CoV-2 infection. Samples with low levels of antigen may produce a faint test line. Any visible test is considered positive.

## Negative result:

The presence of red-colored control line (C) and no visible test line (T) indicates a negative result. No SARS-CoV-2 antigen was detected.

## Invalid result:

If the red-colored control line (C) is not visible, DO NOT interpret the test result.

The result is invalid regardless of the appearance of the test line. Collect a new nasal swab sample and repeat the assay with a new INDICAID™ COVID-19 Rapid Antigen Test.



INDICAID™ COVID-19 Rapid Antigen Quality Control Kit is available separately from PHASE Scientific International, Ltd. We recommend that these external positive and negative controls are run once with every new kit lot, new shipment,



- Remove a new Swab & Test Device from their packaging. Place the Test Device on a horizontal (flat) surface for running the test.
- 2. Hold the external positive control vial vertically and
- 3. Dip the Swab into the vial, making sure that the Swab head is fully submerged in solution. Remove the Swabfrom the vial.
- 4. Test the Swab by performing Steps 3 through 7 of the Test Procedure in this Quick Reference Guid
- 5. Repeat to test the external negative control.

Control line (C)

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In the USA, this product has not been FDA cleared or approved, but has been authorized by FDA under an EUA for use by authorized laboratories; use by laboratories certified under the CLIA, 42 U.S.C. §2630, that meet requirements to perform moderate complexity, high complexity, or waived tests. This product is authorized for use at the Point of Care (POC), i.e., inpatient care settings operating under a CLIA Certificate of Waiver, Certificate of Compliance, or Certificate of Accreditation. This product has been authorized only for the detection of proteins from SARS-COV-2, not for any other viruses or pathogens. In the USA, the emergency use of this product is only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of in vitro diagnostics for detection and/or diagnosis of the virus that causes COVID-19 under Section \$64(b)(1) of the Federal Food, Drug and Cosmetic Act, 21 U.S.C. §360bbb-3(b)(1), unless the declaration is terminated or the §360bbb-3(b)(1), unless the declaration is terminated or the authorization is revoked sooner

# Manufactured By

PHASE Scientific International Limited 32 & 33F, Gravity, 29 Hing Yip St., Kwun Tong, Kowloon, Hona Kona

Caution, Consult accompanying documents



Temperature Limitation



Sufficient for Use



Keep away from sunlight Keep away from moisture





Do not reuse



Consult Instructions for Use



In-Vitro Diagnostic Medical Device



Catalog number



B atch code





Manufacturer

For more information, please visit

www.phasescientific.com

If you have questions, please contact Customer Service Indicaid@phasesci.com

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