

# Strep A Rapid Test Device Package Insert

A rapid test for the qualitative detection of Strep A antigen in throat swab specimens.

For professional *in vitro* diagnostic use only.

## INTENDED USE

The Strep A Rapid Test Device is a rapid chromatographic immunoassay for the qualitative detection of Strep A antigen from throat swab specimens to aid in the diagnosis of Group A Streptococcal infection.

## SUMMARY

*Streptococcus pyogenes* is non-motile gram-positive cocci, which contains the Lancefield group A antigen that can cause serious infections such as pharyngitis, respiratory infection, impetigo, endocarditis, meningitis, puerperal sepsis, and arthritis.<sup>1</sup> Left untreated, these infections can lead to serious complications, including rheumatic fever and peritonsillar abscess.<sup>2</sup> Traditional identification procedures for Group A Streptococci infection involve the isolation and identification of viable organisms using techniques that require 24 to 48 hours or longer.<sup>3</sup>

Rapid diagnosis and early antibiotic therapy of Group A Streptococcal infection appear to be the best means of preventing medical complications and reducing the spread of the disease.<sup>4</sup> The Strep A Rapid Test Device is a rapid test to qualitatively detect the presence of Strep A antigen in throat swab specimens, providing results within 5 minutes. The test utilizes antibodies specific for whole cell Lancefield Group A Streptococcus to selectively detect Strep A antigen in a throat swab specimen.

## PRINCIPLE

The Strep A Rapid Test Device is a qualitative, lateral flow immunoassay for the detection of Strep A carbohydrate antigen in a throat swab. In this test, antibody specific to Strep A carbohydrate antigen is coated on the test line region of the strip. During testing, the extracted throat swab specimen reacts with an antibody to Strep A that is coated onto particles. The mixture migrates up the membrane to react with the antibody to Strep A on the membrane and generate a red line in the test region. The presence of this red line in the test region indicates a positive result, while its absence indicates a negative result. To serve as a procedural control, a red line will always appear in the control region indicating that proper volume of specimen has been added and membrane wicking has occurred.

## PRECAUTIONS

- For professional *in vitro* diagnostic use only. Do not use after expiration date.
- Do not eat, drink or smoke in the area where the specimens and kits are handled.
- Handle all specimens as if they contain infectious agents.

Observe established precautions against microbiological hazards throughout the procedure and follow the standard procedures for proper disposal of specimens.

- Wear protective clothing such as laboratory coats, disposable gloves and eye protection when specimens are assayed.
- Humidity and temperature can adversely affect results.
- Reagent B contains an acidic solution. If the solution contacts the skin or eye, flush with large volumes of water.
- The positive and negative controls contain sodium azide ( $\text{NaN}_3$ ) as a preservative.
- Do not interchange kit reagents.
- Do not interchange reagent bottle caps.
- Do not interchange external control solution bottle caps.

## STORAGE AND STABILITY

The kit can be stored at room temperature or refrigerated (2-30°C). The test device must remain in the sealed pouch until use. **DO NOT FREEZE.** The test device and the reagents are stable through the expiration date printed on the box. Do not use beyond the expiration date.

## SPECIMEN COLLECTION AND PREPARATION

- Only use reagents and sterile swabs provided in the kit.
- Collect the throat swab specimen with the sterile swab that is provided in the kit. Swab the posterior pharynx, tonsils and other inflamed areas. Avoid touching the tongue, cheeks and teeth with the swab.<sup>5</sup>
- Testing should ideally be performed immediately after the specimens have been collected. Swab specimens may be stored in a clean, dry plastic tube for up to 8 hours at room temperature or 72 hours at 2°-8°C. Transport swabs containing modified Stuart's or Amies medium can also be used with this product.
- If a culture is desired, lightly roll the swab tip onto a Group A selective blood agar plate before using the swab in the Strep A Rapid Test Device.

## MATERIALS

### Materials Provided

- Test Devices
- Disposable extraction test tubes
- Dropper Tips
- Sterile Swabs (Dacron)
- Reagent A (2M Sodium Nitrite)
- Reagent B (0.4M Acetic Acid)
- Positive control (Non-viable Strep A; 0.1%  $\text{NaN}_3$ )
- Negative control (Non-viable Strep C; 0.1%  $\text{NaN}_3$ )
- Package insert
- Workstation

### Material Required but not Provided

- Timer

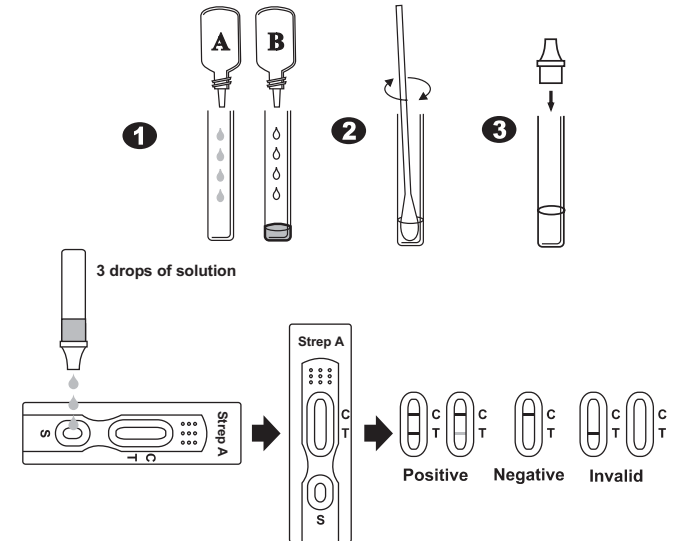
## DIRECTIONS FOR USE

Allow the test device, reagents, and/or controls to reach room temperature (15-30°C) prior to testing.

1. In order to obtain accurate results, the test should be performed

immediately after opening the pouch. Remove the test device from the sealed foil pouch and use it as soon as possible.

2. Hold the Reagent A bottle vertically and add 4 full drops (approximately 240  $\mu\text{L}$ ) to an extraction test tube. Reagent A is red in color. Hold the Reagent B bottle vertically and add 4 full drops (approximately 160  $\mu\text{L}$ ) to the tube. Reagent B is colorless. Mix the solution by gently swirling the extraction test tube. The addition of Reagent B to Reagent A changes the color of the solution from red to yellow. See illustration (1).
3. Immediately add the throat swab into the extraction test tube of pale yellow solution. Agitate the swab 10 times in the tube. Leave the swab in the tube for 1 minute. Then press the swab against the side of the tube and squeeze the bottom of the tube as the swab is withdrawn. Discard the swab. See illustration (2).
4. Fit the dropper tip on top of the extraction test tube. Place the test device on a clean and level surface. Add 3 full drops of solution (approx. 100  $\mu\text{L}$ ) into the Specimen well (S) and then start the timer. See illustration (3).
5. Wait for the red line(s) to appear. Read the result at 5 minutes. Do not read the result after 10 minutes.



## INTERPRETATION OF RESULTS

(Please refer to the illustration above)

**POSITIVE:** \* **Two distinct red lines appear.** One line should be in the control region (C) and another line should be in the test region (T). A positive result indicates that Strep A was detected in the sample.

\* **NOTE:** The intensity of the red color in the test line region (T) will vary depending on the concentration of Strep A present in the sample. Therefore, any shade of red in the test region (T) should be considered positive.

**NEGATIVE:** **One red line appears in the control region (C).** No apparent red or pink line appears in the test region (T).

A negative result indicates that Strep A antigen is not present in the sample, or is present below the detectable level of the test. The patient's sample should be cultured to confirm the absence of Strep A infection. If clinical symptoms are not consistent with results, obtain another sample for culture.

**INVALID: Control line fails to appear.** Insufficient sample volume or incorrect procedural techniques are the most likely reasons for control line failure. Review the procedure and repeat the test with a new test device. If the problem persists, discontinue using the test kit immediately and contact your local distributor.

### QUALITY CONTROL

#### Internal Quality Control

Internal procedural controls are included in the test. A red line appearing in the control region (C) is an internal positive procedural control. It confirms sufficient specimen volume and correct procedural technique. A clear background is an internal negative procedural control. If the test is working properly, the background in the result area should be white to light pink and not interfere with the ability to read the test result.

#### External Quality Control

It is recommended that a positive and negative external control be run every 25 tests, and as deemed necessary by your internal laboratory procedures. External positive and negative controls are supplied in the kit. Alternatively, other Group A and non-Group A *Streptococcus* ATCC reference strains may be used as external controls. Some commercial controls may contain interfering preservatives; therefore, other commercial controls are not recommended.

#### Procedure for External Quality Control Testing

1. Add 4 full drops of Reagent A and 4 full drops of Reagent B into an extraction test tube. Tap the bottom of the tube gently to mix the liquid.
2. Add 1 full drop of positive or negative control solution into the tube, holding the bottle upright.
3. Place a clean swab into the tube. Rotate the swab 10 times in the tube. Leave the swab in the tube for 1 minute. Then press the swab against the side of the tube and squeeze the bottom of the tube while removing the swab so that most of the liquid stays in the tube. Discard the swab.
4. Continue with Step 4 of Directions For Use.

### LIMITATIONS

1. The Strep A Rapid Test Device is for *in vitro* diagnostic use only. The test should be used for the detection of Strep A antigen in throat swab specimens only. Neither the quantitative value nor the rate of increase in Strep A antigen concentration can be determined by this qualitative test.
2. This test will only indicate the presence of Strep A antigen in the specimen from both viable and non-viable Group A *Streptococcus* bacteria.
3. A negative result obtained from this kit should be confirmed by culture. A negative result may be obtained if the concentration of the Strep A antigen present in the throat swab is not adequate or is below the detectable level of the test.

4. The sterile swabs provided with this test must be used for specimen collection. Other swabs have not been validated with this test.
5. Excess blood or mucus on the swab specimen may interfere with test performance and may yield a false positive result. Avoid touching the tongue, cheeks, and teeth<sup>5</sup> and any bleeding areas of the mouth with the swab when collecting specimens.
6. As with all diagnostic tests, all results must be interpreted together with other clinical information available to the physician.

### EXPECTED VALUES

Approximately 15% of pharyngitis in children ages 3 months to 5 years is caused by Group A beta-hemolytic *Streptococcus*.<sup>6</sup> In school-aged children and adults, the incidence of Strep throat infection is about 40%.<sup>7</sup> This disease usually occurs in the winter and early spring in temperate climates.

### PERFORMANCE CHARACTERISTICS

#### Sensitivity and Specificity

Using three medical centers for evaluation, a total of 492 throat swabs were collected from patients exhibiting symptoms of pharyngitis. Each swab was rolled onto a Strep A selective blood agar plate, and then tested by the Strep A Rapid Test Device. The plates were further streaked for isolation, and then incubated at 37°C with 5-10% CO<sub>2</sub> and a Bacitracin disk for 18-24 hours. The negative culture plates were incubated for an additional 18-24 hours. Possible GAS colonies were subcultured and confirmed with a commercially available latex agglutination grouping kit. Of the 492 total specimens, 384 were found to be negative by culture and 108 were found to be positive by culture.

#### Pediatric Population:

		Culture	
		+	-
Strep A Test Device	+	91	6
	-	5	300

Sensitivity: 91/96 = 95% (88%-98%)\*

Specificity: 300/306 = 98% (96%-99%)\*

Accuracy: 391/402 = 97% (95%-99%)\*

#### Adult Population:

		Culture	
		+	-
Strep A Test Device	+	11	1
	-	1	77

Sensitivity: 11/12 = 92% (62%-100%)\*

Specificity: 77/78 = 99% (93%-100%)\*

Accuracy: 88/90 = 98% (92%-100%)\*

#### Combined Population:

		Culture	
		+	-
Strep A Test Device	+	102	7
	-	6	377

Sensitivity: 102/108 = 94% (88% - 98%)\*

Specificity: 377/384 = 98% (96% - 99%)\*

Accuracy: 479/492 = 97% (96% - 98%)\*

\* Denotes a 95% Confidence Interval

Positive Culture Classification	Strep A Test Device/ Culture	% Correct
Rare	2/3	67
1+	9/9	100
2+	24/27	89
3+	18/20	90
4+	49/49	100

### Cross-Reactivity

The following organisms were tested at 1.0 x 10<sup>7</sup> organisms per test and were all found to be negative when tested with the Strep A Rapid Test Device. No mucoid-producing strains were tested.

<i>Bordetella pertussis</i>	<i>Neisseria sicca</i>
<i>Branhamella catarrhalis</i>	<i>Neisseria subflava</i>
<i>Candida albicans</i>	<i>Pseudomonas aeruginosa</i>
<i>Corynebacterium diphtheriae</i>	<i>Serratia marcescens</i>
<i>Enterococcus faecalis</i>	<i>Staphylococcus aureus</i>
<i>Escherichia coli</i>	<i>Staphylococcus epidermidis</i>
<i>Group B Streptococcus</i>	<i>Streptococcus anginosus</i>
<i>Group C Streptococcus</i>	<i>Streptococcus intermedius</i>
<i>Group F Streptococcus</i>	<i>Streptococcus mitis</i>
<i>Group G Streptococcus</i>	<i>Streptococcus mutans</i>
<i>Hemophilus influenzae</i>	<i>Streptococcus oralis</i>
<i>Klebsiella pneumoniae</i>	<i>Streptococcus pneumoniae</i>
<i>Neisseria gonorrhoea</i>	<i>Streptococcus sanguinis</i>
<i>Neisseria meningitidis</i>	

### POL Studies

Three physicians' offices were used to conduct an evaluation of the Strep A Rapid Test Device. Personnel with various educational backgrounds performed the testing. Each physician's office tested a randomly coded panel of samples consisting of negative (20), low positive (20), and medium positive (20) for three days. The results obtained had a 100% correlation with the expected results.

### BIBLIOGRAPHY

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### CLIA Category

### Moderately Complex