Rapid Foot-and-Mouth Disease Virus Antigen Test Kit

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For Veterinary Use Only

READ ALL INSTRUCTIONS BEFORE BEGINNING THE TEST

RIDX™ FMDV 7 Ag Test Kit

[CAT No.: LGM-VFG-72, LGM-VFG-74]

Introduction

Foot-and-mouth disease is an acute, systemic disease of domestic and wild cloven-hooved animal species and is caused by Foot-and-mouth disease virus (FMDV), the prototype member of the genus *Aphthovirus* of the family Picornaviridae[1]. FMDV occurs as seven distinct serotypes (Euroasiatic serotypes O, A, C, and Asia1 and South African Territories (SAT) serotypes SAT1, SAT2, and SAT3) and multiple subtypes reflecting significant genetic variability[1].

The disease is characterized by fever and vesicles in the mouth and on the muzzle, teats, and feet and is spread through direct contact or aerosolized virus via respiratory secretions, milk, semen, and ingestion of feed from infected animals[2]. In a susceptible population, morbidities reach 100% and mortalities are rare except in young animals[3, 4].

Principle

The RIDX™ FMDV 7 Ag Test Kit is a lateral flow chromatographic immunoassay for the qualitative detections of all seven serotypes antigens of FMDV in bovine or porcine specimens.

This kit shows two letters which are the test (T) line and the control (C) line on the surface of the device. If the FMDV antigens exist in the samples, that bind to the gold-conjugated FMDV antibody. The complexes move through the membrane by capillary force and respond to the FMDV antibody on the test line, resulting in a red line. The control line indicates that the test is performed correctly and should appear when the test is complete.

The highly selective and sensitive monoclonal antibody to FMDV is used as capture and detector in the RIDX™ FMDV 7 Ag Test Kit. The antibody in this kit is capable of detecting all seven (7) serotypes (type O, type A, type C, type Asia1, type SAT1, type SAT2, and type SAT3) of FMDV in bovine and porcine samples with high accuracy.

Performances

1. Clinical Sensitivity & Clinical Specificity

1) FMDV serotype O

		Disease Status		
		+	−	Total
RIDX™ FMDV 7 Ag Test	+	68	2	70
	−	0	490	490
	Total	68	492	560

Clinical Sensitivity: 100% (68/68, 95% CI*: 94.65% ~ 100%)
Clinical Specificity: 99.59% (490/492, 95% CI: 98.53% ~ 99.89%)
Diagnostic Accuracy: 99.64% (558/560, 95% CI: 98.71% ~ 99.90%)

* CI: Confidence Interval

2) FMDV serotype A

		Disease Status		
		+	−	Total
RIDX™ FMDV 7 Ag Test	+	70	2	72
	−	0	490	490
	Total	70	492	562

Clinical Sensitivity: 100% (70/70, 95% CI: 94.80% ~ 100%)
Clinical Specificity: 99.59% (490/492, 95% CI: 98.53% ~ 99.89%)
Diagnostic Accuracy: 99.64% (560/562, 95% CI: 98.71% ~ 99.90%)

3) FMDV serotype C

		Disease Status		
		+	−	Total
RIDX™ FMDV 7 Ag Test	+	20	2	22
	−	0	490	490
	Total	20	492	512

Clinical Sensitivity: 100% (20/20, 95% CI: 83.89% ~ 100%)
Clinical Specificity: 99.59% (490/492, 95% CI: 98.53% ~ 99.89%)
Diagnostic Accuracy: 99.61% (510/512, 95% CI: 98.59% ~ 99.89%)

4) FMDV serotype Asia1

		Disease Status		
		+	−	Total
RIDX™ FMDV 7 Ag Test	+	60	2	62
	−	0	490	490
	Total	60	492	552

Clinical Sensitivity: 100% (60/60, 95% CI: 93.98% ~ 100%)
Clinical Specificity: 99.59% (490/492, 95% CI: 98.53% ~ 99.89%)
Diagnostic Accuracy: 99.64% (550/552, 95% CI: 98.69% ~ 99.90%)

5) FMDV serotype SAT1

		Disease Status		
		+	−	Total
RIDX™ FMDV 7 Ag Test	+	20	2	22
	−	0	490	490
	Total	20	492	512

Clinical Sensitivity: 100% (20/20, 95% CI: 83.89% ~ 100%)
Clinical Specificity: 99.59% (490/492, 95% CI: 98.53% ~ 99.89%)
Diagnostic Accuracy: 99.61% (510/512, 95% CI: 98.59% ~ 99.89%)

6) FMDV serotype SAT2

		Disease Status		
		+	−	Total
RIDX™ FMDV 7 Ag Test	+	20	2	22
	−	0	490	490
	Total	20	492	512

Clinical Sensitivity: 100% (20/20, 95% CI: 83.89% ~ 100%)
Clinical Specificity: 99.59% (490/492, 95% CI: 98.53% ~ 99.89%)
Diagnostic Accuracy: 99.61% (510/512, 95% CI: 98.59% ~ 99.89%)

7) FMDV serotype SAT3

		Disease Status		
		+	−	Total
RIDX™ FMDV 7 Ag Test	+	20	2	22
	−	0	490	490
	Total	20	492	512

Clinical Sensitivity: 100% (20/20, 95% CI: 83.89% ~ 100%)
Clinical Specificity: 99.59% (490/492, 95% CI: 98.53% ~ 99.89%)
Diagnostic Accuracy: 99.61% (510/512, 95% CI: 98.59% ~ 99.89%)

2. Limit of Detection (LOD)

FMDV serotype	LOD ($TCID_{50}$/mL)
O	0.56×10^4
A	0.56×10^4
C	0.56×10^4
Asia1	4.22×10^4
SAT1	4.22×10^5
SAT2	0.75×10^5
SAT3	3.69×10^4

3. Cross-Reactivity

There is no cross-reactivity with classical swine fever virus, porcine reproductive and respiratory syndrome virus, seneca valley virus, swine vesicular disease virus, and vesicular stomatitis virus.

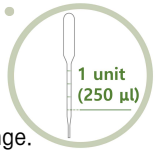
Kit Components

	Component	Quantity/kit by CAT No.	
		LGM-VFG-72	LGM-VFG-74
1	FMDV 7 Ag test device	10	2
2	Sample dilution buffer	1	1
3	Disposable swab	10	2
4	Disposable dropper	10	2
5	Sample tube	10	2
6	Instructions for use	1	1

Storage & Stability

1. Store the test kit at 2~30℃ (35.6~86.0℉). Do not freeze.
2. Do not store the test kit in direct sunlight.
3. The test kit is stable within the expiration date marked on the package label.

Sample Preparation



[Vesicular fluid]

1. Collect sample from intact blister with a syringe
1) Transfer 1 unit (approximately 250 µL) of the sample dilution buffer to the sample tube using dropper or syringe.
2) Add 250 µL of vesicular fluid to the sample tube and mix gently with the sample dilution buffer.
2. Collect sample from burst blister with a disposable swab
1) Transfer 2 units (approximately 500 µL) of the sample dilution buffer to the sample tube using a dropper.
2) Put sample-soaked swab into the dilution buffer and swirling gently.
3) Press the cotton swab against the wall of the tube to extract the sample.
4) Remove the swab from the test tube after extraction.

[Saliva]

1. Sample collection
• Bovine: Collect saliva from bovine's tongue directly.
• Porcine: Use a chewing rope or other oral fluid collect kits.
2. Use the impurities free saliva sample. Centrifuge the saliva samples (6,000rpm, 10min), if the samples have impurities (The separate container for centrifugation is not provided in this kit).
3. Transfer 2 units (approximately 500 µL) of sample dilution buffer to the sample tube using a dropper.
4. Soak a swab with supernatant of the centrifuged saliva.
5. Put sample-soaked swab into the dilution buffer and swirl gently.
6. Press the cotton swab against the wall of the tube to extract the sample.
7. Remove the swab from the test tube after extraction.

[Cultured virus]

1. Transfer 200 µL of the sample dilution buffer to the sample tube, Eppendorf tube or microplates.
2. Collect and add 200 µL of virus-cultured media by using the micropipette to the sample tube and swirl the tube several times to mix.

[Sample storage]

The samples should be tested immediately after collection. If samples cannot be tested immediately, they should be stored at −20°C (−4℉). After mixing with the sample dilution buffer, do not store under any conditions, and do not use this mixed and stored sample for testing.

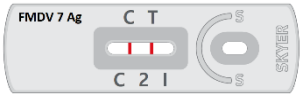
Test Procedure

1. All reagents and samples must be at room temperature before use.
2. Take the supernatant of the prepared sample solution by using a dropper.
3. Apply 4 drops (approximately 100 µL) of the sample solution into the sample hole on the test device slowly and vertically.
4. Read test result at 15 minutes.

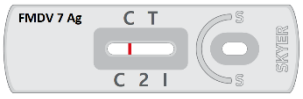
[Summary of Test Procedure]

Interpretation of Results

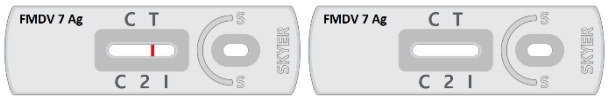
1. Positive results
Test (T) line and control (C) line within the result window indicate the presence of FMDV antigens.



2. Negative result
Only control (C) line appears in the result window.



3. Invalid results
If the control (C) line does not appear, the result might be considered invalid. The sample should be retested.



Precautions

1. This test kit is for veterinary *in vitro* diagnostic use only for cattle and pigs. Do not use this test kit for other animals.
2. The test device is sensitive to humidity and heat. Use the test device within 10 minutes after removing the foil pouch.
3. Do not touch the membrane of the test device.
4. Do not use the test device if the foil pouch is damaged.
5. Do not use an expired test kit.
6. Do not reuse the test components (device, dropper, swab, and sample tube).
7. Do not mix components from different lot numbers because the components in this kit have been quality control tested as a standard batch unit.
8. Decontaminate and dispose of all samples, used kits, and potentially contaminated materials following national and local regulations.
9. All samples should be handled as being potentially infectious. Wear protective gloves while handling samples. Wash hands thoroughly afterward.

References

1. Carrillo C, Tulman ER, Delhon G, Lu Z, Carreno A, Vagnozzi A, Kutish GF, Rock DL. Comparative genomics of foot-and-mouth disease virus. *J Virol*. 2005; 79(10): 6487-6504.
2. Arzt J, Baxt B, Grubman MJ, Jackson T, Juleff N, Rhyan J, Waters R, Rodriguez LL. The pathogenesis of foot-and-mouth disease II: viral pathways in swine, small ruminants, and wildlife; myotropism, chronic syndromes, and molecular virus-host interactions. *Transbound Emerg Dis*. 2011; 58(4): 305-326.
3. Kitching RP. Clinical variation in foot and mouth disease: cattle. *Rev Sci Tech Off Int Epiz*. 2002; 21(3): 499-504.
4. Kitching RP, Alexandersen S. Clinical variation in foot and mouth disease: pigs. *Rev Sci Tech Off Int Epiz*. 2002; 21(3): 513-518.

Symbol Descriptions

LIC	License number
CAT	Catalogue number
LOT	Batch code, Lot number
	Consult instructions for use
Σn	Contains sufficient for ⟨n⟩ tests
	Do not reuse
IVD	*In vitro* diagnostic medical device
	Temperature limitation
	Do not use, if the package is damaged
	Upper side
	Manufacturer

SKYER, INC.
#532, 416, Hwagok-ro, Gangseo-gu, Seoul, 07548, Republic of Korea
TEL: +82-2-706-6801, FAX: +82-50-4096-6988
Technical support: marketing@skyer.co.kr
www.skyerdiagnostics.com
Korean Veterinary Diagnostics Manufacturer License No. 300