

Anti-Swine fever virus antibody Rapid Test Kit

Catalog No: LT11002AYSL

PRINCIPLE

The Classical swine fever virus (CSF) antibody rapid test kit uses a rapid immunochromatographic detection technique for detecting classical swine fever antibody in whole blood and serum. After the sample is added to the well, it moves along the chromatographic membrane with the colloidal gold-labeled CSF antigen. If CSF antibody is present in the sample, it will bind to the antigen on the test line to display wine red. If the CSF antibody is not present in the sample, no color reaction occurs.

MATERIALS SUPPLIED WITH THIS KIT

1	Test Device	50 pieces
2	Disposable Dropper	50 pieces
3	Gloves	4 pieces
4	Manual	1piece

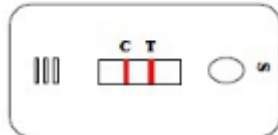
TEST PROCEDURE

1. Collect whole blood, separate serum (centrifuge at 2000-3000 r/min for 5-15min or separate out at 4°C overnight). Alternatively, take whole blood without anticoagulants as sample but such sample must be fresh.
2. Peel the aluminum foil bag, remove the test device and place it on a flat, clean surface.
3. Absorb the test sample with a matching pipette, and slowly add 2 drops to the well with the “S” mark.
4. Leave at room temperature for 10-20 minutes to judge the result. The result will

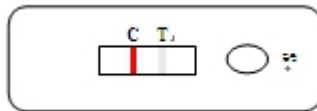
be invalid after 20 minutes.

INTERPRETATION OF THE TEST

1. Positive: Both on T Line and C line develop wine-red color reaction. The more antibody exist, the thicker the color appears.



2. Negative: no color reaction on Test Line (T Line), only Control Line (C Line) develops wine-red color reaction



3. Invalid: No color reaction on C Line.



DIAGNOSTIC REFERENCE

1. If the pig has not been vaccinated with the swine fever virus vaccine:

a) When there is no obvious ribbon at the test sample line (T), it indicates that there is no CSFV antibody in the sample to be tested. If the herd is healthy, it means that there is no swine fever virus infection, and the swine fever virus vaccination should be carried out in time. If the corresponding acute symptoms appear, it is not possible to rule out a swine fever virus infection.

b) When there is a clear ribbon appearing at the test sample line (T), the animal has infection or a previous infection, which should be further, observed and verified.

2. If the pig has been vaccinated with the swine fever virus vaccine:

c) When the color of the strip of the test sample (T) is $\geq 1:32$ titer in the control card, it indicates that the titer of the swine fever virus antibody is high, and the protection level against infection has been reached. It is less likely to be infected.

d) When the color of the strip of the test sample (T) is $< 1:32$ titer in the control card, it indicates that the antibody titer of the swine fever virus antibody has not reached the minimum protection titer against the swine fever virus wild-type attack, and there is an infection. Animal is recommended for re-vaccination.

PRECAUTIONS

1. If the device is expired or the aluminum foil bag is damaged, it can't be used.

2. Pure water, tap water, and saline can't be used as negative controls.

3. This product can be stored in a cool place at room temperature (less than 30°C).

If it is stored in cold storage, first bring the test device to room temperature, then open the foil bag to prevent the chromatographic membrane from moisture absorption. After the test device is removed from the foil pouch, it should be used as soon as possible.

4. Please do not touch the chromatographic membrane at the “sample hole” and “observation window” on the test device.

5. If the sample has a large amount of blood lipids, it will interfere with the detection. For this, after centrifugation, avoid the lipid layer and take the serum part for detection. When the blood or serum is abnormally thick or insufficient, it can be diluted with physiological saline and then detected.

6. If the collected serum sample cannot be detected immediately, it should be placed at 4°C for short-term storage (48 hours) and below -20°C for long-term storage.
7. Whole blood specimens without anticoagulant should be tested immediately; if partial coagulation has occurred, separate the serum for testing. Whole blood samples with anticoagulant should be tested within 24 hours, and should not be frozen; freeze-thaw will cause red blood cells to rupture and hemolysis, which seriously affects the detection effect.
8. When dropping the sample, keep the front end of the straw and the sample hole at a distance of about 1 cm to ensure accurate sample loading; if the distance is too close, the droplet volume may be reduced or the incorrect amount of sample may be added due to the wrong judgment of the number of drops. Inaccurate amounts affect the test results.
9. When the sample is added to the “well”, foaming should be avoided. The amount of sample to be applied needs to be controlled at about 100 µl (about 2 drops of sample). Excessive sample addition does not increase detection sensitivity. In particular, an excess of whole blood samples will cause red blood cells to accumulate in the "display pores", resulting in a too deep red background of the chromatographic membrane, which seriously affects the judgment of the results.
10. The used test device and samples must be disposed according to relevant local regulations.



PACKAGING

50 tests/kit

STORAGE

The kit can be stored at room temperature (2~30°C) or refrigerated. The test kit is stable through the expiration date marked on the package label.

DO NOT FREEZE. Do not store the test kit in direct sunlight.

**FOR RESEARCH USE ONLY.
NOT FOR USE IN DIAGNOSTIC PROCEDURES.**