

Manual

MutaPLEX® RespiraScreen 1 Real-Time-RT-PCR-Kit

For the simultaneous in vitro detection and differentiation of RNA of Influenza Virus (Flu A and Flu B),
Respiratory Syncytial Virus (RSV A and RSV B) and
SARS-CoV-2 (E gene and RdRP gene),
extracted from biological specimens.

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Table of Contents

1	INTENDED USE	2
2	PATHOGEN INFORMATION	2
3	PRINCIPLE OF THE TEST	3
4	PACKAGE CONTENTS	3
5	EQUIPMENT AND REAGENTS TO BE SUPPLIED BY USER	4
6	TRANSPORT, STORAGE AND STABILITY	4
7	WARNINGS AND PRECAUTIONS	4
8	SAMPLE MATERIAL	
9	SAMPLE PREPARATION	5
10	CONTROL RNA	6
11	REAL-TIME-RT-PCR	6
	11.1 Important points before starting	6
	11.2 Procedure	
	11.3 Instrument settings	8
12	DATA ANALYSIS	9
13	ASSAY VALIDATION	13
14	LIMITATIONS OF THE METHOD	14
15	TROUBLESHOOTING	14
16	KIT PERFORMANCE	16
	16.1 Analytical sensitivity	16
	16.2 Analytical specificity	
	16.3 Clinical samples	19
	16.4 Linear range	
	16.5 Precision	
	16.6 Diagnostic Sensitivity	
17	ABBREVIATIONS AND SYMBOLS	24
18	LITERATURE	25

1 INTENDED USE

The MutaPLEX® RespiraScreen 1 real time RT-PCR Kit is a screening assay for the simultaneous detection of three groups of different respiratory viruses. The design allows the differentiation of Influenza Virus (Flu A, Flu B) and Respiratory Syncytial Virus (RSV A, RSV B) from the pandemic coronavirus SARS-CoV-2 (E gene and RdRP gene), extracted from biological specimens.

2 PATHOGEN INFORMATION

Influenza viruses belong to the family of Orthomyxoviridae and are the causative agent of 'the flu'. Influenza A and B viruses have a single stranded RNA genome, consisting of 8 RNA segments. The genome of Influenza A viruses is characterised by a high mutation frequency, the so-called "antigenic drift". Numerous subtypes of Influenza A viruses are known. They can be categorised by their surface antigens H (haemagglutinin) and N (neuraminidase): Influenza A (H1N1) Virus, Influenza A (H5N1) Virus etc. Therefore, yearly in silico analysis of the sequences of newly emerged subtypes is done, to prevent false negative results caused by primer and/or probe mismatches. Influenza B viruses show a 2–3 times slower mutation rate then type A.

Respiratory syncytial viruses are enveloped negative-sense, single stranded RNA viruses of the Pneumoviridae family, genus *Orthopneumovirus*. RSV are divided into subgroups A and B. RSV is a virus that causes infections of the lungs and respiratory tract. It is so common that most children have been infected with the virus at the age of 2. RSV can also infect adults.

In adults and older, healthy children, the symptoms of RSV infections are mild and typically mimic the common cold. Self-care measures are usually all that is needed to relieve any discomfort. Infection with RSV can be severe in some cases, especially in premature babies and infants with underlying health conditions. RSV can also become serious in older adults, adults with heart and lung diseases, or anyone with a very weak immune system (immunocompromised).

Coronaviruses (CoV) are a large family of viruses that cause illness ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). The novel Coronavirus (SARS-CoV-2) is a new strain within the Sarbecoviruses that has been previously identified in humans and causes the pulmonary disease COVID-19.

Coronaviruses are zoonotic, meaning they are transmitted between animals and people. Detailed investigations found that SARS-CoV was transmitted from civet cats to humans and MERS-CoV from dromedary camels to humans. Several known Coronaviruses are circulating in animals that have not yet infected humans.

Common signs of infection include respiratory symptoms, fever, cough, shortness of breath and breathing difficulties. In more severe cases, infection can cause pneumonia, severe acute respiratory syndrome, kidney failure and even death.

Standard recommendations to prevent infection spread include regular hand washing, covering mouth and nose when coughing and sneezing, thoroughly cooking meat and eggs. Avoid close contact with anyone showing symptoms of respiratory illness such as coughing and sneezing.

3 PRINCIPLE OF THE TEST

The MutaPLEX® RespiraScreen 1 real time RT-PCR Kit contains specific primers and dual-labelled probes for the amplification of RNA (cDNA) of Influenza A (M gene), Influenza B (NEP gene), RSV A (G gene), RSV B (G gene) and SARS-CoV-2 (E gene and RdRP gene) extracted from biological specimen.

Furthermore, MutaPLEX® RespiraScreen 1 real time RT-PCR Kit contains a Control RNA (Internal Process Control, IPC), which is added during RNA extraction and detected in the same reaction by a HEX-labelled probe.

The Control RNA allows the detection of RT-PCR inhibition and acts as control that the nucleic acid was isolated from the biological specimen.

4 PACKAGE CONTENTS

The reagents supplied are sufficient for 96 (KG192796) or 384 (KG1927-384) reactions, respectively.

Label	Lid Colour	Content		
Labei	Lia Colour	96	384	
Reaction Mix	yellow	1 x 1325 μl	4x 1325 μl	
Enzyme	blue	1 x 19.2 μl	1 x 76.8 μl	
Positive Control	red	1 x 150 μl	1 x 150 μl	
Negative Control	green	1 x 150 μl	1 x 150 μl	
Control RNA	colourless	1 x 480 μl	2 x 960 µl	

Table 1: Components of the MutaPLEX® RespiraScreen 1 Real-Time-RT-PCR Kit.

5 EQUIPMENT AND REAGENTS TO BE SUPPLIED BY USER

- RNA isolation kit (e.g. MutaCLEAN® Mag RNA/DNA, KG1023/KG1024)
- · PCR grade water
- Sterile microtubes
- Pipets (adjustable volume)
- Sterile pipet tips with filter
- Table centrifuge
- Vortex
- · Real time PCR instrument
- Optical PCR reaction tubes with lid or optical PCR reaction plate with optical foil
- Optional: Liquid handling system for automation
 - * Immundiagnostik AG recommends the use of ultrapure water (water type 1; ISO 3696), which is free of undissolved and colloidal ions and organic molecules (free of particles > 0.2 μ m) with an electrical conductivity of 0.055 μ S/cm at 25 °C (\geq 18.2 M Ω cm).

6 TRANSPORT, STORAGE AND STABILITY

The MutaPLEX® RespiraScreen 1 Real-Time-RT-PCR kit is shipped on dry ice or cool packs. All components must be stored at maximum -20°C in the dark immediately after receipt. Up to 20 freeze and thaw cycles are possible. Do not use reagents after the date of expiry printed on the package. Up to 20 freeze and thaw cycles are possible.

For convenience, opened reagents can be stored at 2–8 °C for up to 6 months.

Protect kit components from direct sunlight during the complete test run.

7 WARNINGS AND PRECAUTIONS

- Stick to the protocol described in the instructions for use.
- The MutaPLEX® RespiraScreen 1 Real-Time-RT-PCR must be performed by qualified personnel only.
- Specimens should always be treated as infectious and/or biohazardous in accordance with safe laboratory procedures.
- Avoid microbial and nuclease (DNase/RNase) contamination of the eluates and the components of the kit.
- Always use DNase/RNase-free disposable pipette tips with aerosol barriers.
- Always wear protective disposable powder-free gloves when handling kit components.

- Use separated and segregated working areas for (1) sample preparation, (2) reaction setup and (3) amplification/detection activities. The workflow in the laboratory should proceed in unidirectional manner. Always wear disposable gloves in each area and change them before entering a different area.
- Dedicate supplies and equipment to the separate working areas and do not move them from one area to another.
- Store positive and/or potentially positive material separated from all other components of the kit.
- Do not open the reaction tubes/plates post amplification, to avoid contamination with amplicons.
- Additional controls may be tested according to guidelines or requirements of local, state and/or federal regulations or accrediting organisations.
- Do not autoclave reaction tubes after the PCR, since this will not degrade the amplified nucleic acid and will bear the risk to contaminate the laboratory area.
- Discard sample and assay waste according to your local safety regulations.

8 SAMPLE MATERIAL

Starting material for MutaPLEX® RespiraScreen 1 RT-PCR Kit is RNA isolated from biological specimens (respiratory samples).

9 SAMPLE PREPARATION

Commercial kits for RNA isolation such as MutaCLEAN® Mag RNA/DNA (KG1023/ KG1024) are recommended.

Important: In addition to the samples, always run a water control in your extraction. Treat this water control analogous to a sample.

Comparing the amplification of the control RNA in the samples to the amplification of the internal control in the water control will give insights on possible inhibitions of the Real-Time-RT-PCR. Furthermore, possible contaminations during nucleic acid extraction will be detectable.

Please note chapter 10 "Control RNA".

If the Real-Time-RT-PCR is not performed immediately, store extracted nucleic acids according to the instructions given by the extraction kit's manufacturer.

10 CONTROL RNA

A control RNA is supplied and can be used as extraction control. This allows the user to control the RNA isolation procedure and to check for possible Real-Time-RT-PCR inhibition

Control RNA used as extraction control

MutaPLEX® RespiraScreen 1 control RNA is added to the RNA extraction.

Add 5 μ l control RNA per extraction (5 μ l x (N+1)). Mix well. Perform the RNA isolation according to the manufacturer's instructions.

The control RNA must be added to the lysis buffer of the extraction kit.

11 REAL-TIME-RT-PCR

11.1 Important points before starting

- Please pay attention to chapter 7 "Warnings and precautions".
- Before setting up the Real-Time-RT-PCR familiarise yourself with the real time PCR instrument and read the user manual supplied with the instrument.
- The programming of the thermal profile should take place before the RT-PCR set up.
- In every RT-PCR run, one positive control and one negative control should be included.
- Before each use, all reagents should be thawed completely at room temperature, thoroughly mixed and centrifuged very briefly.
- Due to the high viscosity of the enzyme (blue lid), prewarming at room temperature for 15 min is recommended.

11.2 Procedure

The master mix contains all of the components needed for Real-Time-RT-PCR except the sample. Prepare a volume of master mix for at least one sample more than required, in order to compensate for pipetting inaccuracy.

Table 2: Preparation of the master mix (control RNA was added during RNA extraction)

Volume per reaction	Volume master mix	
13.8 µl Reaction Mix	13.8 μl x (N+1)	
0.2 μl Enzyme	0.2 μl x (N+1)	

Real-Time-RT-PCR set up

- Place the number of optical PCR reaction tubes needed into the respective tray of the real time PCR instrument / take an optical PCR reaction plate.
- Pipet $14\,\mu l$ of master mix into each optical PCR reaction tube / the optical PCR reaction plate.
- Add 6 μl of the eluates from the RNA isolation (including the eluate of the water control), the respective positive control, and the negative control the corresponding optical PCR reaction tube / the optical PCR reaction plate (table 3).
- Close the optical PCR reaction tubes / the optical PCR reaction plate immediately after filling in order to reduce the risk of contamination.

Table 3: Preparation of the Real-Time-RT-PCR

Component	Volume
Master mix	14.0 µl
Sample	6.0 µl
Total volume	20.0 μl

11.3 Instrument settings

For the Real-Time-RT-PCR use the thermal profile shown in table 4.

Table 4: Real-Time-RT-PCR thermal profile

Description	Time	Temperature	No of cycles	
Reverse Transcription	10 min	45°C	1	
Initial Denaturation	5 min	95°C	1	
Amplification of cDNA				
Denaturation	10 s	95°C	45	
Annealing and	40 s 60 °C		7 45	
extension	Aquisition a	t the end of this step		

Dependent on the real time instrument used, further instrument settings have to be adjusted according to table 5.

Table 5: Overview of the instrument settings required for the MutaPLEX® RespiraScreen 1 Real-Time-RT-PCR.

Real-Time-RT- PCR Instrument	Parameter	Detection Channel	Notes	
			Color compensation kit MutaPLEX® CC-1 (KG19-5-CC) required	
1: 1:6 1 40011			Melt Quant Max integra- factor factor tion time (s)	
LightCycler 480II	Flu A / Flu B	465–510	1 10 1	
	Control RNA (IPC)	533–580	1 10 2	
	SARS-CoV-2	533–610	1 10 2	
	RSV A / RSV B	618–660	1 10 3	
<u> </u>	Flu A / Flu B	FAM	Gain 8	
Stratagene Mx3000P/	Control RNA (IPC)	HEX	Gain 1 Reference	
Mx3005P	SARS-CoV-2	ROX	Gain 1 Dye: None	
Wiki Soosi	RSV A / RSV B	Cy5	Gain 4	
	Flu A / Flu B	FAM		
ABI 7500	Control RNA (IPC)	JOE	Deference Due Name	
Quant Studio 5	SARS-CoV-2	ROX	Reference Dye: None	
	RSV A / RSV B	Cy5		

Real-Time-RT- PCR Instrument	Parameter	Detection Channel	Notes
	Flu A / Flu B	FAM	
AriaMx	Control RNA (IPC)	HEX	Poforonco Duo, Nono
Bio-Rad CFX96	SARS-CoV-2	ROX	Reference Dye: None
	RSV A / RSV B	Cy5	
	Flu A / Flu B	Green	Gain 5
Rotor-Gene Q, Rotor-Gene 3000	Control RNA (IPC)	Yellow	Gain 5
Rotor-Gene 6000	SARS-CoV-2	Orange	Gain 5
	RSV A / RSV B	Red	Gain 5
	Flu A / Flu B	FAM	
NEOS gPCR 48	Control RNA (IPC)	HEX	
NLO3 GFCN 46	SARS-CoV-2	ROX	
	RSV A / RSV B	Cy5	
	Flu A / Flu B	FAM	
NEOS qPCR 96	Control RNA (IPC)	HEX	
NEO3 GPCN 90	SARS-CoV-2	ROX	
	RSV A / RSV B	Cy5	
	Flu A / Flu B	Green	Gain 8
Mic aDCD Cyclor	Control RNA (IPC)	Yellow	Gain 10
Mic qPCR Cycler	SARS-CoV-2	Orange	Gain 10
	RSV A / RSV B	Red	Gain 10

12 DATA ANALYSIS

The following results can occur:

Signal/C _T Values				
FAM channel	ROX channel	Cy5 channel	HEX channel	Interpretation
Flu A / Flu B	SARS-CoV-2	RSV A / RSV B	Control RNA (IPC)	
positive ³	positive	positive	positive or negative ¹	Positive result. The sample contains RNA of Flu A and/ or Flu B, RSV A and/or RSV B and SARS-CoV-2.
positive ³	positive	negative	positive or negative ¹	Positive result. The sample contains RNA of Flu A and/ or Flu B and SARS-CoV-2.
positive ³	negative	negative	positive or negative ¹	Positive result. The sample contains RNA of Flu A and/ or Flu B.
negative	positive	positive	positive or negative ¹	Positive result. The sample contains RNA of RSV A and/ or RSV B and SARS-CoV-2.
negative	positive	negative	positive or negative ¹	Positive result. The sample contains RNA of SARS-CoV-2.
negative	negative	positive	positive or negative ¹	Positive result. The sample contains RNA of RSV A and/ or RSV B.
negative	negative	negative	≤ 34	Negative result. The sample contains no RNA of Flu A and/or Flu B, RSV A and/or RSV B or SARS-CoV-2.
negative	negative	negative	negative or > 34 ²	Caution! The real time RT-PCR is either inhibited or errors occurred while RNA/DNA extraction.

 $^{^{\}rm 1}$ A strong positive signal in the FAM, Cy5 or ROX channel can inhibit the IPC. In such cases the result for the Control RNA can be neglected.

³ A differentiation between Flu A and Flu B is possible with a second PCR (e.g. MutaPLEX® RespiraSys1, KG198496).

Figure 1, 2, 3 and **4** show examples for positive and negative real time RT-PCR results.

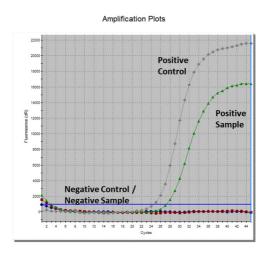


Figure 1: The positive sample shows pathogen specific amplification in the FAM channel (positive FLU sample and positive control), whereas no fluorescence signal is detected in the negative sample or the negative control (Mx3005P qPCR System).

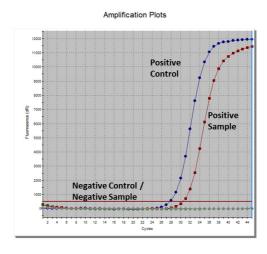


Figure 2: The positive sample shows pathogen specific amplification in the ROX channel (positive SARS-CoV-2 sample and Positive Control), whereas no fluorescence signal is detected in the negative sample and the Negative Control (Mx3005P qPCR System).

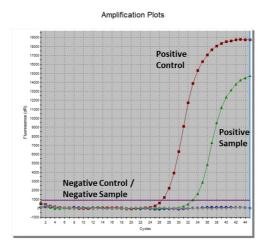


Figure 3: Figure 3: The positive sample shows pathogen specific amplification in the Cy5 channel (positive RSV sample and Positive Control), whereas no fluorescence signal is detected in the negative sample and the Negative Control (Mx3005P qPCR System).

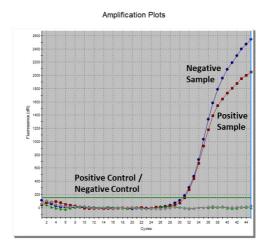


Figure 4: The positive sample and the negative sample show an amplification curve, whereas the Positive Control and the Negative Control don't show a signal in the Control RNA specific HEX channel (Mx3005P qPCR System).

13 ASSAY VALIDATION

Negative control

The negative control must show no C_{τ} in the FAM, HEX, ROX and Cy5 channel.

Positive controls

All parameters in the positive control must show a positive (i.e. exponential) amplification curve in the different channels FAM, Cy5 and ROX. The positive controls must fall below a C_{τ} of 30.

Internal controls

The following values for the amplification of the internal controls are valid using nucleic acid extraction kits MutaCLEAN® Mag RNA/DNA or MutaCLEAN® Universal RNA/DNA. The control RNA (IPC) must show a positive (i.e. exponential) amplification curve and fall below a C_{τ} of 34. If the control RNA is above C_{τ} 34 this points to a purification problem or a strong positive sample that can inhibit the IPC. In the latter case, the assay is valid. It is recommended to perform the extraction of a water control in each run. The IPC in the water control must fall below a C_{τ} of 34.

If other nucleic acid extraction kits are used, the customer must define own cut-offs. In this case the $C_{\scriptscriptstyle T}$ value of the control RNA (IPC) in an eluate from a sample should not be delayed for more than 4 $C_{\scriptscriptstyle T}$ in comparison to an eluate from an extracted water control.

14 LIMITATIONS OF THE METHOD

- Strict compliance with the instructions for use is required for optimal results.
- Use of this product is limited to personnel specially instructed and trained in the techniques of real time PCR and in vitro diagnostic procedures.
- Good laboratory practice is essential for proper performance of this assay.
- All reagents should be closely monitored for impurity and contamination. Any suspicious reagents should be discarded.
- This assay must not be used on a biological specimen directly. Appropriate nucleic acid extraction methods have to be conducted prior to using this assay.
- The presence of RT-PCR inhibitors may cause false negative or invalid results.
- Potential mutations within the target regions of the Flu A, Flu B, RSV A, RSV B and SARS-CoV-2 genomes covered by the primers and/or probes used in the kit may result in failure to detect the respective RNA.
- As with any diagnostic test, results of the MutaPLEX® RespiraScreen 1 realtime RT-PCR kit need to be interpreted in consideration of all clinical and laboratory findings.

15 TROUBLESHOOTING

The following troubleshooting guide is included to help you with possible problems that may arise when performing a Real-Time-RT-PCR.

If you have further questions, please do not hesitate to contact our scientists on info@immundiagnostik.com.

No fluorescence signal in the FAM and/or ROX and/or Cy5 channel of the positive controls

The selected channel for analysis does not comply with the protocol

Select the FAM channel for analysis of the Flu specific amplification, the ROX channel for analysis of the SARS-CoV-2 specific amplification, the HEX channel for the amplification of the control RNA and the Cy5 channel for the amplification of the RSV.

Incorrect preparation of the master mix

Make sure the enzyme is added to the master mix (chapter 11).

Incorrect configuration of the real-time RT-PCR

Check your work steps and compare with chapter "Procedure".

The programming of the thermal profile is incorrect

Compare the thermal profile with the protocol (tables 4 and 5).

Incorrect storage conditions for one or more kit components or kit expired

Check the storage conditions and the date of expiry printed on the kit label. If necessary, use a new kit and make sure kit components are stored as described in chapter "Transport, storage and stability".

Weak or no signal of the control RNA and simultaneous absence of a signal in the FAM and/or ROX and/or Cy5 channel

Real-Time-RT-PCR conditions do not comply with the protocol

Check the Real-Time-RT-PCR conditions (tables 4 and 5).

Real-Time-RT-PCR inhibited

Make sure that you use an appropriate isolation method (see chapter "Sample preparation") and follow the manufacturer's instructions. Make sure that the ethanol-containing buffers have been completely removed.

Sample material not sufficient

Make sure enough sample material has been applied to the extraction. Use an appropriate isolation method (see chapter "Sample preparation") and follow the manufacturer's instructions

RNA loss during isolation process

Lack of an amplification signal in the HEX channel can indicate that the RNA isolation was not successful. Make sure that you use an appropriate isolation method (commercial kits are recommended) and stick to the manufacturer's protocol.

Incorrect storage conditions for one or more components or kit expired

Check the storage conditions and the date of expiry printed on the kit label. If necessary, use a new kit and make sure kit components are stored as described in chapter "Transport, storage and stability".

Detection of a fluorescence signal in the FAM and/or ROX and/or Cy5 and/or HEX channel of the negative control

Contamination during preparation of the real-time RT-PCR

Repeat the Real-Time-RT-PCR in replicates. If the result is negative in the repetition, the contamination occurred when the samples were pipetted into the optical PCR reaction tubes. Make sure to pipet the positive control last and close the optical PCR reaction tube immediately after adding the sample. If the same result occurs, one or more of the kit components might be contaminated. Make sure that work space and instruments are decontaminated regularly. Use a new kit and repeat the Real-Time-RT-PCR.

16 KIT PERFORMANCE

16.1 Analytical sensitivity

The limit of detection (LoD) of MutaPLEX® RespiraScreen 1 real-time RT-PCR kit was determined testing serial dilutions of synthetic RNA-fragments containing the specific gene target sequence on a Stratagene Mx3005P real time PCR instrument. The estimated LoD of MutaPLEX® RespiraScreen 1 real time RT-PCR Kit is \leq 10 genome copies per reaction for each parameter (Flu A, Flu B, SARS-CoV-2, RSV A, RSV B).

16.2 Analytical specificity

The specificity of the MutaPLEX® RespiraScreen 1 real time RT-PCR kit was evaluated with different other relevant viruses and bacteria found in clinical samples and basing on in silico analyses.

The results for the wet analysis are shown in table 6, the results for the insilico analysis are shown in table 7.

The primers and probes for SARS-CoV-2 may detect SARS-CoV-1 as well, but since there is no report on SARS-CoV-1 cases since 2004, it is very unlikely to happen [5].

Table 6: Eluted RNA from bacterial and viral pathogens tested for the determination of the analytical specificity of MutaPLEX® RespiraScreen 1 real time RT-PCR kit.

specificity of Mid	lar LEA nespirascre	en 1 real time RT-PCR I		
Eluates with known status	Result Flu A/ Flu B	Result SARS-CoV-2	Result RSV A/ RSV B	Result IPC
status	FAM channel	ROX channel	Cy5 chan- nel	HEX chan- nel
Parainfluenzavirus 1	negative	negative	negative	positive
Parainfluenzavirus 2	negative	negative	negative	positive
Parainfluenzavirus 3	negative	negative	negative	positive
Parainfluenzavirus 4	negative	negative	negative	positive
Metapneumovirus	negative	negative	negative	positive
Adenovirus	negative	negative	negative	positive
Rhinovirus	negative	negative	negative	positive
Enterovirus	negative	negative	negative	positive
Human Bocavirus	negative	negative	negative	positive
Legionella pneu- mophila	negative	negative	negative	positive
Mycoplasma pneu- mophila	negative	negative	negative	positive
Mycobacterium tu- berculosis complex	negative	negative	negative	positive
Bordetella pertussis	negative	negative	negative	positive
Bordetella paraper- tussis	negative	negative	negative	positive
Staphylococcus aureus	negative	negative	negative	positive
MRSA	negative	negative	negative	positive
MSSA	negative	negative	negative	positive
Streptococcus spp.	negative	negative	negative	positive
SARS-CoV-1	negative	positive	negative	positive
MERS-CoV	negative	negative	negative	positive
SARS-CoV-2	negative	positive	negative	positive

Eluates with known	Result Flu A/ Flu B	Result SARS-CoV-2	Result RSV A/ RSV B	Result IPC
Status	FAM channel	ROX channel	Cy5 chan- nel	HEX chan- nel
Influenzavirus A H1N1	positive	negative	negative	positive
Influenzavirus A H3N3	positive	negative	negative	positive
Influenzavirus A H5N1	positive	negative	negative	positive
Influenzavirus B	positive	negative	negative	positive
Respiratory Syncytial Virus A	negative	negative	positive	positive
Respiratory Syncytial Virus B	negative	negative	positive	positive

Table 7: Inclusivity of the MutaPLEX® RespiraScreen 1 real time RT-PCR kit primers and probes (in silico analysis).

12-5	12–5000 whole genome sequences		Homology	Comment
		Forward primer	1000 sequences: 100%	no mismatch
NCBI Flu B	Reverse primer	1000 sequences: 100%	no mismatch	
	Probe	998 sequences: 100%	2 sequences: 96 % (1 mismatch)	
		Forward primer	5000 sequences: 100 %	no mismatch
NCBI Flu A	Reverse primer	5000 sequences: 100%	no mismatch	
		Probe	5000 sequences: 100 %	no mismatch

12-5	12–5000 whole genome sequences		Homology	Comment	
AID	/-2 ne)	Forward primer	2313 sequences: 100%	7 sequences: 95 % (1 mismatch)	
NCBI / GISAID	SARS-CoV-2 (RdRP gene)	Reverse primer	2320 sequences: 100%	no mismatch	
NCB SAF	SA (Rc	Probe	2318 sequences: 100%	2 sequences: 95 % (1 mismatch)	
AID	BI / GISAID \RS-CoV-2 (E gene)	/-2)	Forward primer	2319 sequences: 100%	1 sequence: 96 % (1 mismatch)
NCBI / GISAID SARS-CoV-2		Reverse primer	2318 sequences: 100%	2 sequences: 95 % (1 mismatch)	
	SA)	Probe	2317 sequences: 100%	3 sequences: 96 % (1 mismatch)	
	NCBI RSV A / RSV B	A B	Forward primer	12 sequences: 100%	no mismatch
NCBI		Reverse primer	2 sequences: 100%	10 sequences: 96 % (1 mismatch)	
RSV		Probe	10 sequences: 100%	2 sequences: 96 % (1 mismatch)	

16.3 Clinical samples

Positive (35) and negative (172) confirmed samples (oral and nasal swabs) from the pandemic COVID-19 outbreak 2020 in Europe were tested.

The RNA was extracted by using the MutaCLEAN® Mag RNA/DNA (KG1023) extraction kit on a KingFisher Prime Duo Instrument.

The PCR experiments were performed on a Mx3005P Stratagene Cycler. The testing of the confirmed samples with MutaPLEX® RespiraScreen 1 real time RT-PCR kit showed a sensitivity of 100% and a specificity of 100%. None of the samples were inhibited in the real time RT-PCR. For the validation of the MutaPLEX® RespiraScreen 1 real time RT-PCR kit the eluates of all samples were retested and showed the same results.

	SARS-CoV-2 positive samples	SARS-CoV-2 negative samples
MutaPLEX® RespiraScreen 1 positive SARS-CoV-2	35	0
MutaPLEX® RespiraScreen 1 negative SARS-CoV-2	0	172
	Sensitivity [%]	Specificity [%]
	100	100

16.4 Linear range

The linear range of the MutaPLEX® RespiraScreen 1 real-time RT-PCR kit was evaluated by analysing logarithmic dilution series of in vitro transcripts and synthetic DNA fragments.

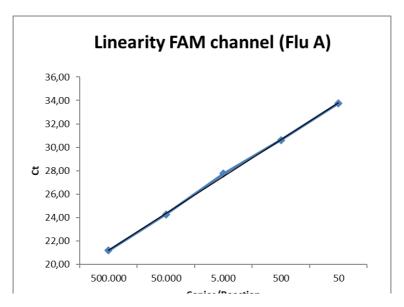


Figure 5: Determination of the linear range of MutaPLEX® RespiraScreen 1 real time RT-PCR Kit for Flu A in the FAM channel.

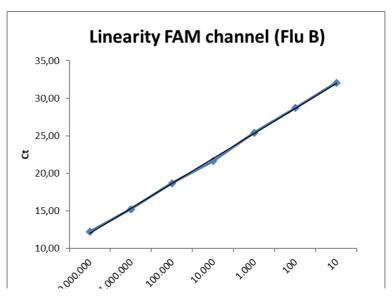


Figure 6: Determination of the linear range of MutaPLEX® RespiraScreen 1 real time RT-PCR kit for Flu B in the FAM channel.

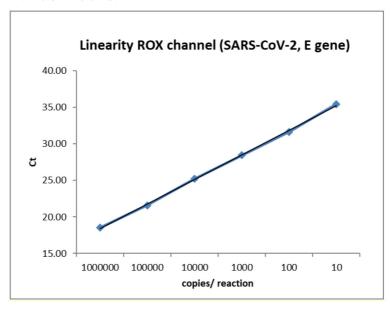


Figure 7: Determination of the linear range of MutaPLEX® RespiraScreen 1 real time RT-PCR kit for SARS-CoV-2 (E gene) in the ROX channel.

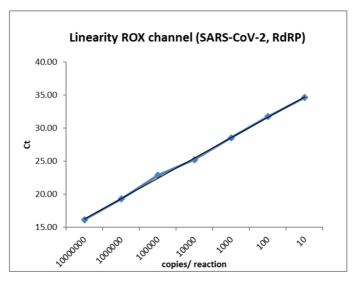


Figure 8: Determination of the linear range of MutaPLEX® RespiraScreen 1 real time RT-PCR kit for SARS-CoV-2 (RdRP gene) in the ROX channel.

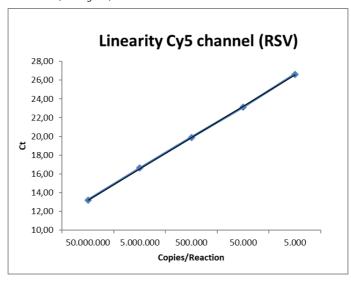


Figure 9: Determination of the linear range of MutaPLEX® RespiraScreen 1 real time RT-PCR Kit for RSV A and RSV B in the Cy5 channel.

16.5 Precision

The precision of the MutaPLEX® RespiraScreen 1 real time RT-PCR Kit was determined as intra-assay variability, inter-assay variability and inter-lot variability.

Variability data are expressed by standard deviation and coefficient of variation. The data are based on quantification analyses of defined concentrations of M gene (Flu A) in vitro transcripts, NEP gene (Flu B) in vitro transcripts, SARS-CoV-2 (E gene and RdRP gene) in vitro transcripts, G gene in vitro transcripts (RSV) and on the threshold cycle of the Control RNA (IPC). The results are shown in table 8.

Table 8: Precision of the MutaPLEX® RespiraScreen 1 real time RT-PCR kit.

Flu A (FAM)	copies/ reaction	Standard Deviation	Coefficient of Variation [%]
Intra-Assay Variability	50	0.30	0.88
Inter-Assay-Variability	50	0.22	0.65
Inter-Lot-Variability	50	0.22	0.65

Flu B (FAM)	copies/ reaction	Standard Deviation	Coefficient of Variation [%]
Intra-Assay Variability	10	0.28	0.89
Inter-Assay-Variability	10	0.26	0.80
Inter-Lot-Variability	10	0.25	0.79

SASR-CoV-2 (ROX)	copies/ reaction	Standard Deviation	Coefficient of Variation [%]
Intra-Assay Variability	10	0.33	0.98
Inter-Assay-Variability	10	0.11	0.34
Inter-Lot-Variability	10	0.04	0.11

RSV A / RSV B (Cy5)	copies/ reaction	Standard Deviation	Coefficient of Variation [%]
Intra-Assay Variability	50	0.31	0.91
Inter-Assay-Variability	50	0.39	1.15
Inter-Lot-Variability	50	0.24	0.71

IPC (HEX)	copies/	Standard	Coefficient of
	reaction	Deviation	Variation [%]
Intra-Assay Variability	1000	0.47	1.60

IPC (HEX)	copies/ reaction	Standard Deviation	Coefficient of Variation [%]
Inter-Assay-Variability	1000	0.48	1.61
Inter-Lot-Variability	1000	0.25	0.86

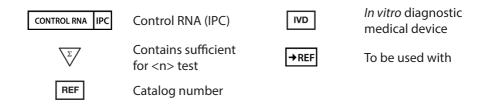
16.6 Diagnostic Sensitivity

The diagnostic sensitivity of real time (RT-)PCR assays is mainly dependent on the DNA/RNA extraction method used to isolate DNA and RNA from various biological specimens. DNA/RNA extraction reagents are not part of the Immundiagnostik real time (RT-)PCR kits. Immundiagnostik real time (RT-) PCR kits include an extraction control and guidelines for the validation criteria of the extraction control in each reaction. The extraction control indicates inhibition of the real time (RT-) PCR and/or inefficient nucleic acid extraction. It cannot be used as a calibrator.

Therefore, Immundiagnostik guarantees the analytical sensitivities and specificities of the real time (RT-) PCR kits, performed with eluted DNA and RNA from reference materials and ring trial samples and with synthetic nucleic acid fragments. Immundiagnostik does not guarantee diagnostic sensitivities. If diagnostic sensitivities are mentioned in manuals of Immundiagnostik real time (RT-) PCR kits, the data are strictly correlated to a specific nucleic acid extraction method that has been used during the validation of the respective kits and cannot be transferred to other extraction methods. It is the responsibility of the user to qualify the extraction methods used for DNA/RNA isolation from biological samples.

17 ABBREVIATIONS AND SYMBOLS

RNA	Ribonucleid acid	¥	Upper limit of temperature
RT-PCR	Reverse transcription-PCR	•••	Manufacturer
REACTION MIX	Reaction mix	\sum	Use by
ENZYME	Enzyme	LOT	Lot number
CONTROL +	Positive control	CONT	Content
CONTROL -	Negative control	i	Consult instruc- tions for use



18 LITERATURE

- 1. www.who.int/health-topics/coronavirus
- 2. Corman et al. Detection of 2019 novel coronavirus (2019-nCoV) by real time RT-PCR. Eurosurveillance, Volume 25, Issue 3, 23/Jan/2020.
- 3. www.nature.com/articles/s41564-020-0695-z, 02/March/2020
- 4. https://www.who.int/publications/i/item/laboratory-testing-for-2019-novel-coronavirus-in-suspected-human-cases-20200117
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