



100 Rxns | T00325-T00325  
250 Rxns | T00324-T00324  
500 Rxns | T00329-T00329  
1000 Rxns | T00326-T00326



## BioeXsen SARS-CoV-2 Variant Plus V2 Package Insert

### 1. Reagents and Materials Provided

Table 1 Kit Content

Component	Amount				Intended Use
	100 Rxns	250 Rxns	500 Rxns	1000 Rxns	
2X Prime Script Mix	1 x 500 µL	1 x 1250 µL	2 x 1250 µL	4 x 1250 µL	One-Step RT-qPCR
Emerging Oligo Mix	1 x 250 µL	1 x 625 µL	1 x 1250 µL	2 x 1250 µL	Specific amplification of the target region in the SARS-CoV-2 and human genomes: ORF1ab and N ( <b>FAM</b> ), RNase P ( <b>HEX</b> ), <i>S_E484K</i> ( <b>ROX</b> ) mutation, <i>N_D3L</i> ( <b>CY5</b> ) mutation and <i>S_L452R</i> ( <b>CY5.5</b> ) mutation
NTC	1 x 1000 µL	No Template (Negative) Control			
PC-Emerging	1 x 250 µL	1 x 250 µL	1 x 500 µL	2 x 500 µL	Positive Control

Table 2 Storage Requirements and Shelf Life

Component	Transport Conditions	Storage Conditions	Shelf Life
2X Prime Script Mix	+2 - +8 °C	-20 °C	12 months
Emerging Oligo Mix	+2 - +8 °C	-20 °C	
NTC	+2 - +8 °C	+2 - +8 °C / -20 °C	
PC-Emerging	+2 - +8 °C	before opening -20 °C, after opening +2 - +8 °C	

Each reagent stored at storage temperature, can be used until the expiration date indicated on the tube. The expiration date of the kit is determined by the expiration date of the reagents.

### 2. Materials Required but Not Provided

Table 3 Components required but not included with the test

Components required but not included with the test	
1. qPCR Cycler 2. Adjustable micropipettes and compatible tips 3. Centrifuge 4. Vortex machine 5. 1.5 or 2 mL microcentrifuge tubes, nuclease-free 6. Swabs for nasopharyngeal, oropharyngeal, and nasal swab samples	7. Reaction tubes and their caps/seals compatible with the qPCR instrument and the reaction volume. <b>Extra components recommended to use:</b> 8. UV Cabinet for PCR Setup 9. Cold Tube Rack (for microcentrifuge tubes and PCR tubes/strips) 10. PPE (Personal Protective Equipment)

### 3. Intended Use and Test Principle

The **BioeXsen SARS-CoV-2 Variant Plus V2** tests and distinguishes SARS-CoV-2, the Alpha variant and the E484K and L452R mutations in a single multiplex rRT-PCR reaction in less than 30 minutes. The kit is applied to the nasopharyngeal swab, oropharyngeal swab, and nasal swab samples from patients suspected of COVID-19 or for screening of individuals without symptoms or other reasons to suspect COVID-19.

The **BioeXsen SARS-CoV-2 Variant Plus V2**, besides targeting the ORF1ab and N gene regions which are common in all SARS-CoV-2 variants, targets the N\_D3L mutation for the detection of the Alpha Variant, targets the L452R mutation for Delta, Epsilon and Kappa variant detection and targets the E484K mutation for Beta, Gamma, Zeta, Eta, Theta, and Iota variant detection. The human RNase P oligo set in the kit targets exome-exome junction in the mRNA and does not target the human genome. Hence it is used for controlling the sampling, integrity of RNA, nucleic acid extraction, and inhibition of both reverse transcription and qPCR. The kit also contains negative and positive control templates for testing the contamination and the rRT-PCR reactive stability, respectively.

### 4. Performance Evaluation

LoD of the **BioeXsen SARS-CoV-2 Variant Plus V2** for the nasopharyngeal swab, nasal swab and oropharyngeal swab samples in the BioeXsen **vNAT®** Transfer Tube is 500 SARS-CoV-2/mL for the ORF1ab/N target, 10000 SARS-CoV-2/mL for the N\_D3L, S\_E484K, and S\_L452R targets.

The exclusivity was tested with Coronavirus 229E/OC43/NL63/HKU1, MERS, SARS-CoV strain Frankfurt 1, Influenza A H1/H3, Influenza B, Parainfluenza 1/2/3/4, Metapneumovirus, Rhinovirus, Respiratory syncytial virus (RSV) A/B, Bocavirus (BoV), Enterovirus, Adenovirus, Legionella pneumophila, Chlamydia pneumoniae, Mycobacterium tuberculosis, Haemophilus influenzae, Streptococcus pneumoniae, Mycoplasma pneumoniae, Streptococcus pyogenes, Bordetella pertussis, Pneumocystis jirovecii, Candida albicans, Legionella bozemani, Legionella micdadei, Corynebacterium diphtheriae, Bacillus anthracis, Moraxella catarrhalis, Neisseria meningitidis, Pseudomonas aeruginosa, Staphylococcus epidermidis, Coxiella burnetii, Staphylococcus aureus, Streptococcus salivarius, Leptospira interrogans, Chlamydia psittaci and a pooled nasal wash from 20 different people (healthy donors) combined with the negative clinical swab sample pool was also used in the exclusivity study to test diverse microbial flora in the human respiratory tract.

**Table 4 and 5: Clinical Performance**

Nasopharyngeal swab samples from individuals without symptoms or other reasons to suspect COVID-19		FDA authorized RT-PCR (BioeXsen SARS-CoV-2 RTPCR)			All the respiratory specimens from patients suspected of COVID-19		FDA authorized RT-PCR comparator test		
		Positive	Negative	Total			Positive	Negative	Total
BioeXsen SARS-CoV-2 Variant Plus V2	Positive	32	0	32	BioeXsen SARS-CoV-2 Variant Plus V2	Positive	129	0	129
	Negative	0	368	368		Negative	0	371	371
	Total	32	368	400		Total	129	371	500
Positive Percent Agreement		$(32/32) \times 100 = 100\%$			Positive Percent Agreement		$(129/129) \times 100 = 100\%$		
Negative Percent Agreement		$(368/368) \times 100 = 100\%$			Negative Percent Agreement		$(371/371) \times 100 = 100\%$		

## 5. Collection, Storage and Shipment of Clinical Specimens

Swab samples should be collected by a healthcare provider in accordance with the updated version of CDC Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens for COVID-19. The swab samples should be placed immediately into the BioeXsen vNAT® Transfer Tube or into a sterile transport tube containing 2-3 mL of viral transport medium (VTM) (Preparation of viral transport medium, Centers for Disease Control and Prevention, SOP#: DSR-052-01). Other sample types should be transferred into sterile containers containing VTM. Specimens must be packaged, shipped, and transported according to the current edition of the International Air Transport Association (IATA) Dangerous Goods Regulation. Specimens can be stored at +2 - +8 °C for up to 3 days (72 h) after collection. If a delay in extraction is expected, store specimens at -70 °C or lower in accordance with the CDC Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens for COVID-19. Clinical specimens in BioeXsen vNAT® Transfer Tube can be stored at +2 - +8 °C for 3 months. For long term storage extracted nucleic acid should be stored at -70 °C or lower. It is important to avoid repeated freezing and thawing of specimens.

## 6. Warnings

1. Store the kit away from nucleic acid sources and qPCR amplicons.
2. Do not mix the kit components with different lot numbers or chemicals of the same name but from different manufacturers.
3. Keep the master stock reagents on the cold block during the PCR setup.
4. If it is possible, setup PCR on the cold block.
5. Mix the kit components gently before use.
6. Use separate micropipettes for pipetting qPCR mixes and template nucleic acids.
7. Always keep the template nucleic acid and positive control tubes closed, except for the fluid transfers.
8. Regularly clean the wipeable surfaces of the rooms, benches, and devices where the test is performed with 10% NaOCl.
9. Disposed of the qPCR completed reaction tubes before opening in the laboratory.

In the RT PCR protocol, fluorescence readings are not made in the first 5 cycles. Therefore, 5 cycles have to be added to Ct values detected by the software when reporting results.

## 7. RT-qPCR Application Protocol

Before starting the assay, please consider the following:

1. The kit was validated only for the template nucleic acid volume that is 25% of the total qPCR volume.
2. The kit cannot be used with real-time PCR instruments without the periodic maintenance records.
3. It is recommended to use validated qPCR plate/strip with the kit!
4. **For testing the contamination, setup negative control reaction with addition of NTC.**

Program the qPCR device as follows and add the reagents to the qPCR tubes, close the tubes, place them into the qPCR instrument and start the run (Table 6).

**Table 6 Reaction set-up and RT-qPCR program details**

Reaction Setup		Reaction volume: 10 µL					
Reagent	Volume/ Rxns	Cycle No.	Step	Temperature		Duration	
2X Prime Script Mix	5 µL	1	Reverse Transcription	52 °C		3 min	
		1	Hold	95 °C		10 sec	
Emerging Oligo Mix	2.5 µL	5	Denature	95 °C		1 sec	
			Anneal/Extend	60 °C		12 sec	
		35	Denature	85 °C		1 sec	
			Anneal/Extend	60 °C		1 sec	
Template Nucleic Acid	2.5 µL	Detection (Reading) / CFX96 Touch™	ORF1ab/N (FAM)	RNase P (HEX)	S_E484K (ROX)	N_D3L (CY5)	S_L452R (CY5.5)

## 8. Interpretation of the Assay Results

The threshold level should be set to 200 RFU and all other default analysis settings in the Bio-Rad CFX Maestro™ software should not be changed. Shape of the amplification curves obtained in the FAM/HEX/ROX/CY5/CY5.5 channels should be examined for all reaction wells returning with Ct values. Ct values should be used in the further interpretation steps if their amplification curve shapes are sigmoidal. Non-sigmoidal curves should be recorded as negative.

- The result is recorded as positive if  $Ct \leq 33$ . The analysis is repeated with the same nucleic acid extract if  $Ct > 33$ , if the result is  $Ct > 33$  again, a new sample from the patient is taken.
- In the RT PCR protocol, fluorescence readings are not made in the first 5 cycles. Therefore, 5 cycles have to be added to Ct values detected by the software when reporting results.

**Table 7 Expected performance of the kit controls**

Control Type	Control Name	Purpose	Expected Results and Ct Values				
			ORF1ab/N (FAM)	RNase P (HEX)	S_E484K (ROX)	N_D3L (CY5)	S_L452R (CY5.5)
No Template (Negative) Control	NTC	Contamination control during RT-PCR	<b>Negative</b> (No Ct)				
Positive Control	PC	Reagent integrity	<b>Positive</b> ( $Ct \leq 33$ )				
Internal/ Extraction Control	IC	To monitor the integrity of nucleic acid extraction and RT-PCR from each human respiratory tract specimen	*Not applicable	*Positive ( $Ct \leq 33$ )	*Not applicable	*Not applicable	*Not applicable

\* If one of the ORF1ab/N, S\_E484K, N\_D3L and S\_L452R targets is positive with a Ct value  $\leq 33$  and with a negative RNase P result, it is considered that there is no inhibition, extraction or sampling problem and the run is valid.

- Invalid PC:** It is recommended to contact the manufacturer, renew the reagents, and repeat the reaction.
- Invalid NTC:** Repeat the analysis by paying attention to the "Warnings" section.
- Invalid IC:** Repeat the analysis. If residual specimen is available, test is performed again. If the re-tested sample does not give a positive result in the HEX channel, a new specimen should be collected from the patient.

Assessment of clinical specimen test results should be performed after the positive and negative controls have been examined and determined to be valid and acceptable. If the controls are not valid, the patient results cannot be interpreted. If all the controls are valid, proceed to the interpretation of the Ct results. Check Ct of the targets in FAM, HEX, ROX, CY5 and CY5.5 channels. If  $Ct \leq 33$ , conclude the channel result as positive, otherwise conclude as negative.

After the interpretation of the Ct results, interpret the lineage results as described in Table 8.

**Table 8 Interpretation of Patient Samples**

Case	ORF1ab/N FAM	S_E484K ROX	N_D3L CY5	S_L452R CY5.5	Result
1	-	-	-	-	<b>1) SARS-CoV-2 is negative.</b>
2	+	-	-	-	<b>1) SARS-CoV-2 is positive.</b> 2) Alpha variant and the variants containing the E484K mutation (Beta, Gamma, Zeta, Eta, Theta, Iota) and the L452R mutation (Delta, Epsilon, Kappa) are negative.
3	+	+	-	-	<b>1) SARS-CoV-2 is positive.</b> 2) One of the variants containing the E484K mutation (Beta, Gamma, Zeta, Eta, Theta, Iota) is positive. 3) Alpha variant and the variants containing the L452R mutation (Delta, Epsilon, Kappa) are negative.
4	+	+	+	-	<b>1) SARS-CoV-2 is positive</b> 2) Alpha variant containing the E484K mutation is positive. 3) The variants containing the L452R mutation (Delta, Epsilon, Kappa) are negative.
5	+	+	-	+	<b>1) SARS-CoV-2 is positive.</b> 2) One of the variants containing both the E484K and the L452R mutation is positive (Beta, Gamma, Zeta, Eta, Theta, Iota, Delta, Epsilon, Kappa). 3) Alpha variant is negative.
6	+	-	+	-	<b>1) SARS-CoV-2 is positive.</b> 2) Alpha variant is positive. 3) The variants containing the E484K mutation (Beta, Gamma, Zeta, Eta, Theta, Iota) and the L452R mutation (Delta, Epsilon, Kappa) are negative.
7	+	-	-	+	<b>1) SARS-CoV-2 is positive.</b> 2) One of the variants containing the L452R mutation (Delta, Epsilon, Kappa) is positive. 3) Alpha variant and the variants containing the E484K (Beta, Gamma, Zeta, Eta, Theta, Iota) are negative.
8	+	-	+	+	<b>1) SARS-CoV-2 is positive.</b> 2) Alpha variant containing the L452R mutation is positive. 3) The variants containing the E484K mutation (Beta, Gamma, Zeta, Eta, Theta, Iota) are negative.

## 9. Limitations

- **BioeXsen SARS-CoV-2 Variant Plus V2** is intended for use in a laboratory environment by qualified clinical laboratory personnel specifically instructed and trained in the techniques of real-time PCR and *in vitro* diagnostic procedures.
- The clinical specimens shall be collected by a healthcare provider in accordance with the updated version of CDC Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens for COVID-19 (<https://www.cdc.gov/coronavirus/2019-ncov/lab/guidelines-clinical-specimens.html>).
- A false negative result may occur if a specimen is improperly collected, transported or handled.
- Performance of the **BioeXsen SARS-CoV-2 Variant Plus V2** has only been established in nasopharyngeal, oropharyngeal and nasal swab samples. Combined nasopharyngeal/ oropharyngeal swabs and mid-turbinate nasal swabs are also considered acceptable specimen types but performance has not been established.
- The use of cotton or calcium alginate swabs or swabs with wooden sticks can lead to false negative results since they may contain substances that inactivate some viruses and inhibit PCR. Flocked (polyester) or dacron swabs are recommended for collection of nasopharyngeal/ oropharyngeal swab samples. Performance of the **BioeXsen SARS-CoV-2 Variant Plus V2** has only been evaluated using dacron and polyester flocked swabs.
- Mutations within the target regions of the **BioeXsen SARS-CoV-2 Variant Plus V2** could affect primer and/or probe binding resulting in failure to detect the presence of virus.
- Inhibitors or other types of interference may produce a false negative result. Mucin at 50% (w/v), blood at 50% (v/v), nasal spray at 10% (v/v), nasal corticosteroids and gels at 10% (w/v), throat lozenges at 10% (w/v), anti-viral at 1% (v/v), antibiotics at 0.1% (w/v) may interfere with the **BioeXsen SARS-CoV-2 Variant Plus V2**. False negative results may also occur if inadequate numbers of organisms are present in the specimen.
- Detection of SARS-CoV-2 RNA may be affected by patient factors (e.g., presence of symptoms), and/or stage of infection.
- Based on the *in silico* analysis, other SARS-like coronaviruses in the same subgenus (Sarbecovirus) as SARS-CoV-2 may cross-react with the **BioeXsen SARS-CoV-2 Variant Plus V2**. Other SARS-like coronaviruses in the same subgenus (Sarbecovirus) as SARS-CoV-2 are not known to be currently circulating in the human population, therefore are highly unlikely to be present in patient specimens.
- The clinical performance has not been established in all circulating variants but is anticipated to be reflective of the prevalent variants in circulation at the time and location of the clinical evaluation. Performance at the time of testing may vary depending on the variants circulating, including newly emerging strains of SARS-CoV-2 and their prevalence, which change over time.

## 10. Manufacturer and Technical Support



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Symbol	Meaning	Symbol	Meaning
	European Conformity		Temperature limit (Store temperature)
	For In vitro Diagnostic Use		Keep away from light
	Catalog Number		Keep away from water/moisture
	Lot Number (Batch Code)		Non-Sterile
	Manufacturer		Keep it upright
	Use-by Date (Expiration Date)		Consult Instructions for Use