WHO Prequalification of In Vitro Diagnostics PUBLIC REPORT

Product: ONE STEP Anti - HIV (1&2) Test WHO reference number: PQDx 0372-017-00

ONE STEP Anti - HIV (1&2) Test with product codes ITPW02152-TC40, ITPW02152-TC25, ITPW02153-TC40, ITPW02153-TC40SA, ITPW02154-TC40, ITPW02231 - TC25, ITPW02231 - TC40 and ITPW02232 - TC40, manufactured by InTec PRODUCTS, INC, Restof-World regulatory version was accepted for the WHO list of prequalified in vitro diagnostics and was listed on 17 May 2019.

Summary of WHO prequalification assessment for ONE STEP Anti - HIV (1&2) Test.

	Date	Outcome
Prequalification listing	17 May 2019	Listed
Dossier review	N/A	N/A
Site inspection(s) of the	11 to 13 October 2023	MR
quality management system		
Product performance	4 th quarter of 2018	MR
evaluation		

MR: Meet Requirements N/A: Not Applicable

Report amendments and product changes

This public report has since been amended. Amendments may have arisen because of changes to the prequalified product for which WHO has been notified and has undertaken a review. Amendments to the report are summarized in the following table, and details of each amendment are provided below.

Version	Summary of amendment	Date of report
		amendment
2.0	Addition of a new product code (ITPW02153-TC40SA) for the	12 February
	South African tender RT41-2020, resulting in modification on	2020
	the Prequalified HIV product labelling and dropper provided.	
3.0	Addition of one product code, ITPW02154-TC40, which is	30 October 2023
	almost identical to the existing configuration ITPW02153-	

	TC40, except the new code is provided with a new safety	
	lancet of a different brand (new lancet is also CE marked as	
	the used lancet in existing code ITPW02153-TC40.	
4.0	Introduction of additional product codes ITPW02231-TC25,	18 February
	ITPW02231-TC40 and ITPW02232-TC40 for the combination	2025
	of the new narrow cassette with/without the lancet and	
	alcohol swab.	
5.0	Updated accessory labels for disposable safety lancets and	9 May 2025
	alcohol swabs for the ONE STEP Anti-HIV (1&2) Test to the	
	new regulatory version.	

Intended use:

According to the claim of InTec PRODUCTS, INC, "The ONE STEP Anti-HIV (1&2) Test is a colloidal gold enhanced, rapid immunochromatographic assay for qualitative detection of antibodies to Human Immunodeficiency Virus (HIV) in human whole blood (venous and fingerstick), serum or plasma. This test is intended for healthcare professionals and trained healthcare workers to use as an aid in HIV infection diagnosis of adult healthcare patients".

Assay Description:

According to the claim of InTec PRODUCTS, INC, "The test band region on the nitrocellulose membrane is pre-coated with recombinant HIV antigen (containing predominant epitope of gp41, gp120 of HIV-1 and predominant epitope of gp36 of HIV-2), and the control band region on the nitrocellulose membrane is pre-coated with sheep anti-rabbit IgG. The fiberglass is pre-coated with recombinant HIV antigen (containing predominant epitope of gp41, gp120 of HIV-1 and predominant epitope of gp36 of HIV-2) conjugated with colloidal gold and rabbit IgG conjugated with colloidal gold.

For positive specimens, HIV antigen conjugated with colloidal gold reacts with HIV antibody in whole blood, serum or plasma, forming a colloidal gold conjugate/HIV antibody complex. The complex migrates through the test strip and is captured by the recombinant HIV antigen immobilized in the test band region, forming a test band.

A negative specimen will not produce a test band due to the absence of colloidal gold conjugate/HIV antibody complex. To ensure assay validity, a purplish red control band in the control region will appear regardless of the test result. The assay is only valid when the control band appears".

Test kit contents:

Component	25 Tests/kit (T/k) (ITPW02152- TC25)	40 T/k (ITPW02152- TC40)	40 T/k (ITPW02153- TC40/ ITPW02153- TC40SA)	40 T/k (ITPW02154- TC40)	25 T/k (ITPW02231- TC25)	40 T/k (ITPW02231- TC40)	40 T/k (ITPW02232- TC40)
Test cassette	1×25 pieces	1×40 pieces	1×40 pieces	1×40 pieces	1×25 pieces	1×40 pieces	1×40 pieces
Dropper	1×25 pieces	1×40 pieces	1×40 pieces	1×40 pieces	1×25 pieces	1×40 pieces	1×40 pieces
Sample diluent	2mL×3 bottles	2mL×4 bottles	2mL×4 bottles	2mL×4 bottles	2mL×3 bottles	2mL×4 bottles	2mL×4 bottles
Sterile Safety lancet	Not provided	Not provided	1×40 pieces (05-062122)	1×40 pieces (21G)	Not provided	Not provided	1×40 pieces (21G)
Alcohol swab	Not provided	Not provided	1×40 pieces	1×40 pieces	Not provided	Not provided	1×40 pieces
Package insert	1×1 piece	1×1 piece	1×1 piece	1×1 piece	1×1 piece	1×1 piece	1×1 piece

Items required but not provided:

- Timer or stopwatch
- Blood sampling tools (sterile gauze pad, venous puncture device, collection tube with EDTA/heparin sodium/sodium citrate for whole blood or plasma, collection tube with no anticoagulant for serum.)
- Biohazard waste container
- Disposable gloves

Storage:

The test kit should be stored at 2-30°C.

Shelf-life upon manufacture:

24months.

Warnings/limitations:

Refer to the latest version of the manufacturer's Instructions For Use attached to this public report.

Prioritization for prequalification

Based on the established eligibility criteria, the **ONE STEP Anti - HIV (1&2) Test** was given priority for the WHO prequalification assessment.

Product dossier assessment

In accordance with the WHO procedure for abridged prequalification assessment, InTec PRODUCTS was not required to submit a product dossier for the ONE STEP Anti - HIV (1&2) Test as per the "Instructions for compilation of a product dossier" (PQDx_018 version 3). Notwithstanding, certain aspects of the product dossier previously submitted for stringent regulatory review were reviewed by an assessor during the site inspection.

Manufacturing site inspection

An onsite inspection of InTec Products, Inc. at 332 Xinguang Rd, Xinyang IND AREA, Haicang, Xiamen 361011, China, was conducted from 11 to 13 October 2023. At the time of considering the product application for Prequalification, the Manufacturer of the product had a well-established quality management system and manufacturing practices in place that would support the manufacture of a product of consistent quality. Routine inspections of the Manufacturing site will be conducted with copies of the WHO Public Inspection Report (WHOPIR) published on the WHO Prequalification web page as per Resolution WHA57.14 of the World Health Assembly. Note that a WHOPIR reflects the information on the most current assessment performed at a manufacturing site for in vitro diagnostic products and summarises the assessment findings.

https://extranet.who.int/pqweb/vitro-diagnostics/who-public-inspection-reports

All published WHOPIRs are with the agreement of the manufacturer.

The onsite inspection was accepted on 23 February 2024.

Based on the site inspection and corrective action plan review, the quality management system for ONE STEP Anti - HIV (1&2) meets WHO prequalification requirements.

Product performance evaluation

ONE STEP Anti-HIV (1&2) Test is a rapid diagnostic test (RDT) assay for the qualitative detection of HIV-1/2 antibodies in human whole blood, serum or plasma. A volume of 30 μ L of specimen is needed to perform the assay. This type of assay requires no sophisticated equipment and can, therefore, be performed in laboratories with limited facilities and non-laboratory settings. Reading of the results can be done visually, i.e. subjectively read.

ONE STEP Anti-HIV (1&2) Test was evaluated by WHO in the 4th quarter of 2018 at the National Health Laboratory Quality Assurance and Training Centre, Dar el Salaam, Tanzania, using serum specimens. From this evaluation, we drew the following conclusions:

In this limited evaluation on a panel of 1196 clinically-derived serum specimens, compared to the reference diagnostic algorithm (Murex HIV Ag/Ab Combination, DiaSorin S.p.A, UK, and Genscreen ULTRA HIV Ag-Ab, Biorad Laboratories; followed by INNO-LIA HIV I/II Score (Fujirebio)), the following performance characteristics were obtained:

Performance characteristics in comparison with an agreed reference standard				
	Initial (95% CI)	Final (95% CI)		
Sensitivity % (N=470)	100% (99.2% - 100%)	100% (99.2% - 100%)		
Specificity % (N=726)	100% (99.5% - 100%)	100% (99.5% - 100%)		
Invalid rate %	0			
Inter-reader variability %	0			

In addition, analytical performance characteristics were assessed using commercially available and locally-made panels and the following results were obtained:

Additional performance characteris	tics
Sensitivity during seroconversion	Seroconversion sensitivity index of +0.7. Therefore,
on 7 seroconversion panels in	detection is 0.7 specimens later than the benchmark
comparison with a benchmark	assay.
assay (Murex HIV Ag/Ab, DiaSorin,	
S.p.A)	
Analytical sensitivity on a mixed	17 of 17 specimens were correctly classified.
titer panel in comparison with an	
agreed reference standard	
HIV subtype detection using the	All specimens were correctly classified
WHO reference panel for anti-HIV	
Lot to lot variation on a dilution	Acceptable
panel	

Key operational characteristics	
Validated specimen types	Serum, plasma (EDTA, heparin sodium or sodium
(according to the IFU)	citrate), venous whole blood, capillary whole blood
Number of steps	2 without precision pipetting required
Time to result	15 minutes
Endpoint stability	5 minutes (the test should be read between 15 and 20 minutes after addition of sample diluent)
Internal QC	Yes, the control line on the test device (reagent control).
In-use stability of reagents	Sample diluent shall be used within 8 weeks after
	the first opening.

Limitations of the performance evaluation:

- 1. All specimens used in the performance evaluation were from the same geographical area.
- 2. All positive specimens in the performance evaluation were positive for HIV-1, so the sensitivity of the ONE STEP Anti-HIV (1&2) Test for the detection of HIV-2 could not be assessed.

Labelling

- 1. Labels
- 2. Instructions for use

1.0 Labels

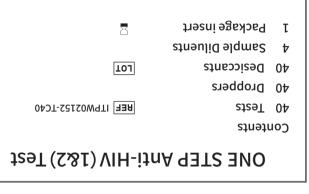
1.1 Product code ITPW02152-TC40 Labels



ADVANCED QUALITY IN MEDICAL DIAGNOSTICS



ITPW02152-TC40

















Tel: +86 592 6807188 Website: www.intecasi.com Email: intecproducts@asintec.com

01.05.11.073-250303

ONE STEP Anti-HIV (1&2) Test

1.2 Product code and ITPW02152-TC25





ITPW02152-TC25

S Sample Diluents E Package insert 🗵

25 Desiccants LoT

ITPW02152-TC25

Contents 25 Tests

Jest (1&2) Test

















Tel: +86 592 6807188 Website: www.intecasi.com Email: intecproducts@asintec.com

01.05.11.072-250303

ONE STEP Anti-HIV (1&2) Test

1.3 Product code ITPW02153-TC40 and ITPW02154-TC40



ADVANCED QUALITY IN MEDICAL DIAGNOSTICS

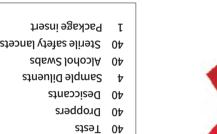


Colloidal Gold (Whole Blood/Serum/Plasma)

ADVANCED QUALITY

ADVANCED QUALITY

ITPW02153-TC40 ITPW02154-TC40



BEL ITPW02153-TC40 sts∋T 0₽ Contents

Jest (1&2) Test





ONE STEP Anti-HIV (1&2) Test





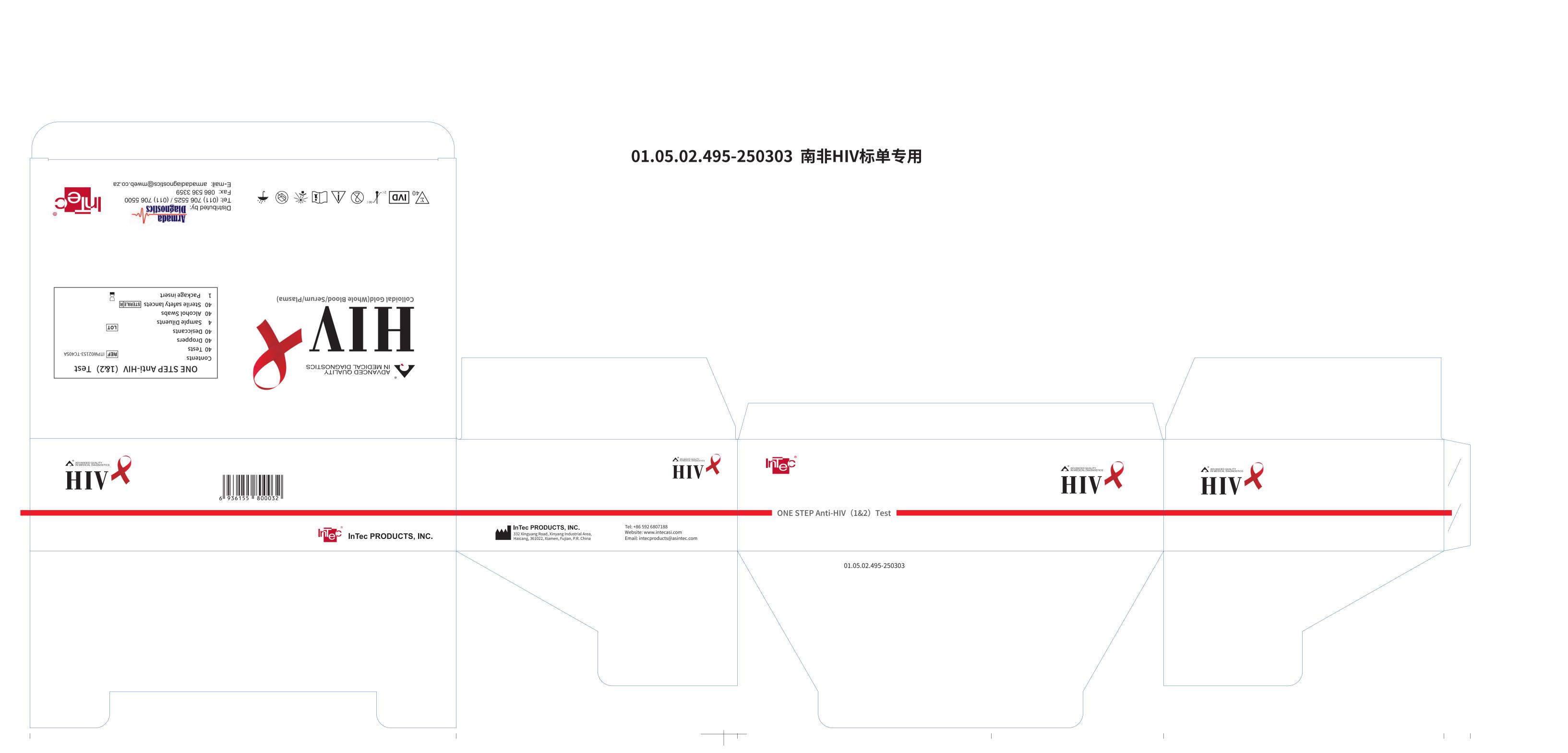


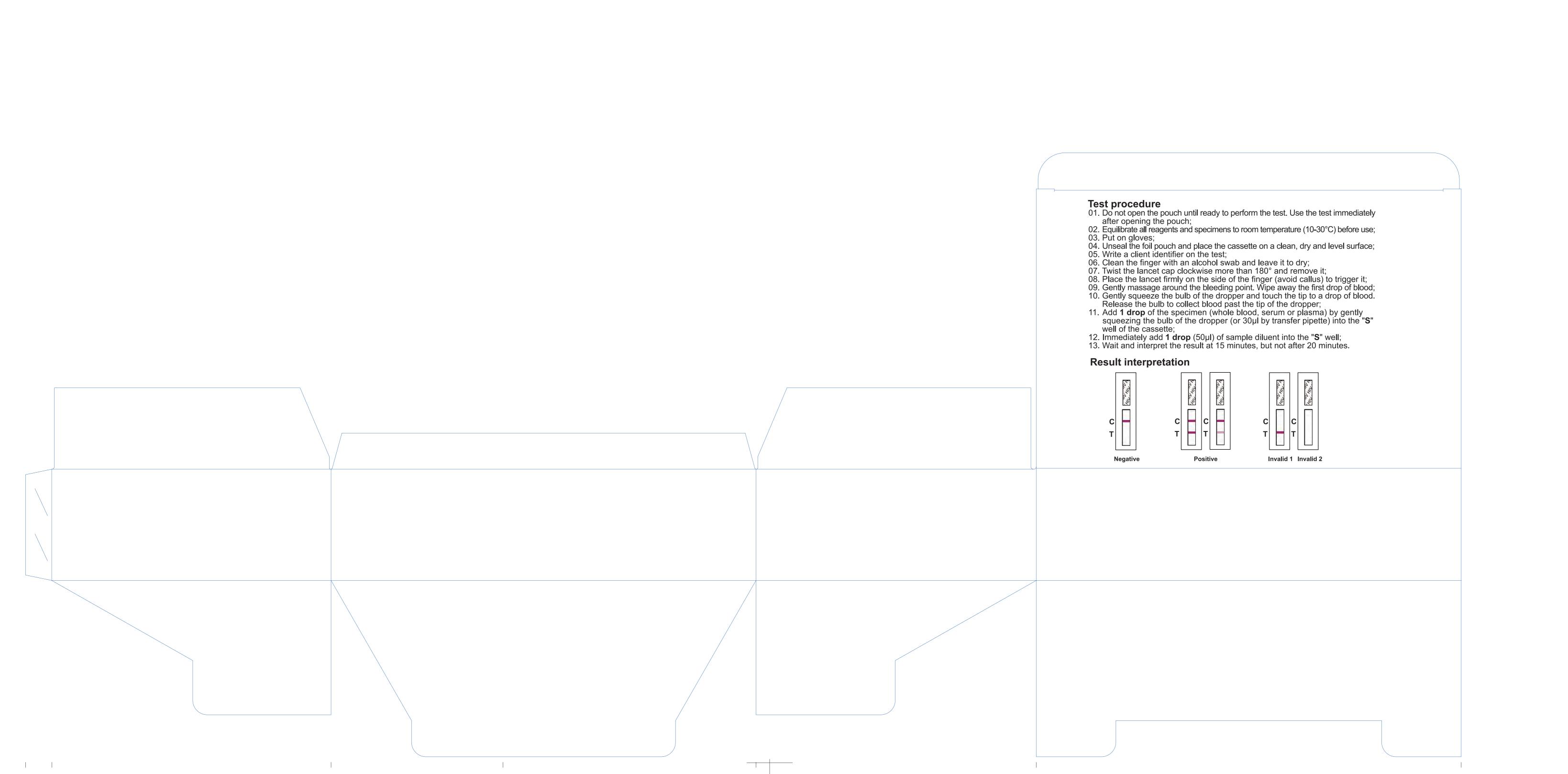


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1.4 Product code ITPW02153-TC40SA labels





1.5 Product code ITPW02231-TC25 labels





ITPW02231-TC25

1 Package insert 3 Sample Diluents 72 Droppers

25 Tests **BEE** ITPW02231-TC25 Contents

ONE STEP Anti-HIV(1&2) Test

















Tel: +86 592 6807188

01.05.11.158-250302

ONE STEP Anti-HIV(1&2) Test

1.6 Product code ITPW02231-TC40 labels





ITPW02231-TC40

40 Desiccants Lor 4 Sample Diluents 1 Package insert 🖫

40 Desiccants Lo

BEE ITPW02231-TC40

Contents 40 Tests

ONE STEP Anti-HIV (1&2) Test















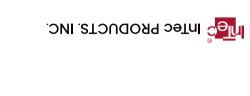


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01.05.11.157-250302

ONE STEP Anti-HIV (1&2) Test

1.7 Product code ITPW02232-TC40 labels





ITPW02232-TC40

040 Sterile safety lancets **STERILER** stneulid eldmed 4 40 Desiccants 40 Droppers

BEE ILbM05535-1C40 sts9T 04 Contents

ONE STEP Anti-HIV(1&2) Test









ONE STEP Anti-HIV (1&2) Test









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01.05.11.159-250302

PQDx 0372-017-00

1.8 Component labels



Sample Diluent

ONE STEP Anti-HIV (1&2) TEST

Vol: 2ml



Storage: 2-30°C



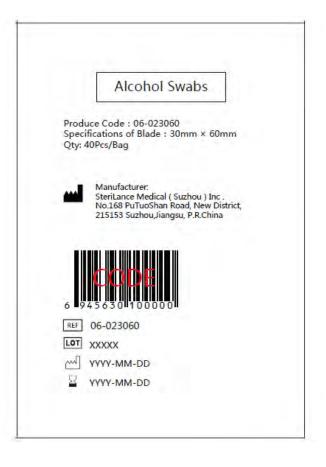
Alcohol swab label- SteriLance Medical (Suzhou) Inc.

(primary package)





(secondary package)



Intended use: It's used for skin disinfection before blood sampling, injection and infusion.

Instructions for Use:

- 1. Open the package and take out the alcohol swab;
- 2. Use the alcohol swab to wipe the skin;
- 3. After the alcohol on the surface is dried, the disinfection is completed;
- 4. Discard the used alcohol swab in the special container.

Contraindications:

- 1. Do not use if there is skin infection or skin damage on the
- 2. It should be used with caution or follow the doctor's advice for the user allergic to alcohol.

Caution :

- This product is not suitable for trauma or burns. Stop the use and consult your doctor if you have symptoms of redness, allergies, swelling, pain or inflammation.
- · Do not use the product if the package of alcohol swab is damaged.
- · Alcohol swab is for external use only, not for eyes or mucous membrane. Please consult your doctor if it touches the wound.
- · Do not use if there is skin infection or skin damage on the wiping part.
- The alcohol swab is for single use and shall be kept away from naked fire.
- · Keep the alcohol swab away from children.
- · Do not use beyond the use-by date.

Symbolic interpretation:













m

Foil Bag (card)

01.05.13.033-220502



ONE STEP Anti-HIV (1&2) Test

Colloidal Gold (Whole Blood/Serum/Plasma)





ONE STEP Anti-HIV (1&2) Test

REF

Contents

LOT

1 Test

Dropper



1 Desiccant



InTec PRODUCTS, INC.

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Website: www.intecasi.com Email: intecproducts@asintec.com















Disposable safety lancet label- Suzhou Kyuan Medical Apparatus Co., Ltd.



Lancet label from Suzhou Sterilance

STER/LADCE[™] Press 2

Safety Lancets

Reorder No.: 05-062122 Specification: 21G 2.2mm

Qty: 20Pcs/Bag

Manufactured for InTec PRODUCTS, INC.



European Authorized Representative Emergo Europe B.V. Westervoortsedijk 60, 6827 AT Arnhem, The Netherlands



Manufacturer: SteriLance Medical (Suzhou) Inc. No.168 PuTuoShan Road, New District, 215153 Suzhou, Jiangsu, PEOPLE'S REPUBLIC OF CHINA



(01)16945630119955

(11)220901 (17)270831

(10) ABC 123

05-062122



XXXXX

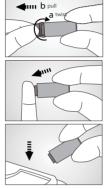


YYYY-MM-DD



YYYY-MM-DD

Instructions for Use:



1.Carefully twist off the protective cap until it is separated from the device.

2. Place the lancet firmly against the puncture site to activate. Do not remove the device until an audible click is heard.

3. Discard the used lancet into a suitable sharps container.

Intended use:

The safety lancet is used for capillary blood collection.

Contraindications: Unknown.

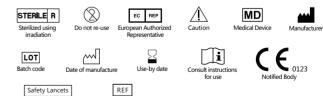
Caution:

- 1.Do not use if lancet cap has been previously removed from lancet.
- 2.Check the use-by date on the packaging, and do not use the lancet beyond the use-by date.
- 3. The safety lancet is for disposable use and do not reuse the lancet.
- 4. Discard the used lancet into a suitable sharps container.

Catalogue number

Symbolic interpretation:

Disposable safety lancets



Revised date: June 19, 2023 (Version 03)

2.0 Instructions for Use¹

-

 $^{^{1}}$ English version of the IFU was the one that was assessed by WHO. It is the responsibility of the manufacturer to ensure correct translation into other languages.





ITPW02231-TC25 ITPW02231-TC40 ITPW02232-TC40

01 05 14 051-250302 date: 2025.03.05

ONE STEP Anti-HIV (1&2) Test

For in vitro diagnostic use only. IVD

Please read this package insert carefully prior to use and strictly follow the instructions.

Reliability of the assay cannot be guaranteed if there are any deviations from the instructions in this package insert

The ONE STEP Anti-HIV (182) Test is a colloidal gold enhanced, rapid immunochromatographic assay for qualitative detection of antibodies to Human Immunodeficiency Virus (HIV) in human whole blood (venous and fingerstick), serum or plasma specimens in adults. This test is intended for use by healthcare professionals and trained healthcare workers as an aid in the diagnosis of HIV infection.

Human immunodeficiency virus is the pathogen of Acquired Immunodeficiency Syndrome (AIDS) ¹⁻². The ONE STEP Anti-HIV (1&2) Test is a simple, visual qualitative test that detects antibodies in human whole blood, serum or plasma and presents the result at 15 minutes, but not after 20 minutes.

Test Principle

Test Principle
The test band region on the nitrocellulose membrane is pre-coated with recombinant HIV antigen (containing predominant epitope of gp41, gp120 of HIV-1 and predominant epitope of gp36 of HIV-2), and the control band region on the nitrocellulose membrane is pre-coated with sheep anti-rabbit IgG. The fiberglass is pre-coated with recombinant HIV antigen (containing predominant epitope of gp41, gp120 of HIV-1 and predominant epitope of gp36 of HIV-2) conjugated with colloidal gold and rabbit IgG conjugated with colloidal gold and rabbit IgG conjugated with colloidal gold conjugated with colloidal gold reacts with HIV antibody in whole blood, serum or plasma, forming a colloidal gold conjugated with colloidal gold conjugated with colloidal gold conjugates through the test strip and is captured by the recombinant HIV antigne immobilized in the test band region, forming a test band. A negative specimen will not produce a test band due to the absence of colloidal gold conjugate/HIV antibody complex. To ensure assay validity, a purplish red control band in the control region will appear regardless of the test result.

result.

The assay is only valid when the control band appears.

Storage conditions and stability
The shelf life of the ONE STEP Anti-HIV (1&2) Test, including the sample diluent, is 24 months from date of manufacture. Product shall be stored at 2-30°C. Test cassette should be used immediately upon opening the foil pouch. Sample diluent should be stored capped at 2-30°C and used within 8 weeks after opening.

Warnings and precautions³⁻⁴
The warnings and precautions are included, but not limited to the following

[Warnings]

- duct is for in vitro diagnosis of the infection of HIV only, other diseases cannot be analyzed with any component
- All specimens with positive results must be confirmed using an appropriate test such as immunoblot assay or equivalent. Sample diluents contain sodium azide. Sodium azide can react with copper and lead used in certain plumbing systems to form metal salts which are explosive. The quantity used in this kit is small, however, when disposing sodium azide containing materials, flush with relatively large quantities of water to prevent metal azide build up in plumbing systems

[Precautions]

- [Precautions]

 Wear gloves during the entire testing process.

 Do not use expired reagents or test cassettes.

 Do not use expired reagents or test cassettes.

 Do not use accessories if the seal or package is broken.
 □

 Do not use test cassette if the foil pouch is damaged or the seal is broken.
 □

 Do not use the provided sterile safety lancets if the cap is already pulled off before use.
 □

 Do not reuse the accessories. All the accessories are for single use.
 □

 Do not reuse the cassette. Each cassette enclosed in a foil pouch is only for single use.
 □

 Do not pipette by mouth.

 Do not eat or smoke while handling specimens.

- Do not store the specimen in dropper, it is only used for specimen collection
- Do not use pooled specimen in dropper, it is only used for specimen collection.
 Do not use pooled specimens or specimens other than specified (i.e. saliva,urine).
 Do not interchange reagents among kits of different batch number or even products.
 Do not perform the test in an environment which leads to rapid evaporation (e.g. >40°C and <40% relative humidity, close to a running fan or air conditioner).
 Ensure the specimen is added correctly prior to the addition of sample diluent.
- Avoid contact between the "S" well of the cassette and diluent bottle to prevent contamination of the diluent.
- Clean and disinfect all the are as that may be contaminated by spills of specimens or reagents with appropriate
- obsiniescaria.

 Decontaminate and dispose of all specimens, reagents, accessories and other potentially contaminated materials as infectious wastes in a biohazard container. Used lancet should be disposed of in a sharps bin.

Reagent and materials provided

Table 1 Reagent and materials provide

Component	25 tests ITPW02231-TC25	40 tests ITPW02231-TC40	40 tests ITPW02232-TC40
Test cassette	1×25 pieces	1×40 pieces	1×40 pieces
Dropper	1×25 pieces	1×40 pieces	1×40 pieces
Desiccant	1×25 pieces	1×40 pieces	1×40 pieces
Sample diluent	2mL×3 bottles	2mL×4 bottles	2mL×4 bottles
Sterile safety lancet	Not provided	Not provided	1×40 pieces (21G)
Alcohol swab	Not provided	Not provided	1×40 pieces
Package insert	1×1 piece	1×1 piece	1×1 piece

Preparation

1a. Open the foil pouch and look for the following components as below, if the product code is ITPW02232-TC40



1b. Open the foil pouch and look for the following components as below, if the product code is ITPW02231-TC25



2. Put on gloves. 3. Write a client identifier





I. Fingerstick whole blood

4. Clean the finger with an alcohol swab and leave it to dry

8. Gently squeeze the

bulb of the dropper and

touch the tip to a drop of blood. Release the bulb to collect blood past the tip of the dropper.



5. Twist the lancet cap

clockwise, more than

180° and remove it

9. Add 1 drop (30µL) of whole blood by





firmly on the side of the finger (avoid callus) Push lancet to trigger it.



7. Gently massage

around the bleeding

point. Wipe away the

11. Wait and interpret the result at 15 min but not after 20 mir



10. Immediately add

1 drop (50µL) of sample diluent in the "S" Well.



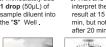
II. Venous whole blood

4a. Add **1 drop** (30μL) of whole blood by gently squeezing the bulb of the provided dropper into the "S" Well.

1 drop (30µL)







Immediately add

(50µL)

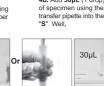


6. Wait and

III. Serum/plasma

4a. Add **1 drop** (30μL) of specimen by gently squeezing the bulb of the provided dropper into the "S" Well.

(30µL)





4b. Add 30uL (1 drop)



5. Immediately add

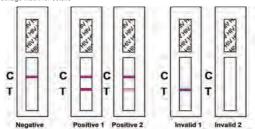
6. Wait and after 20 min





Result interpretation

See package insert for details



Materials required but not provided

- Slood sampling tools (sterile gauze pad, venous puncture device, collection tube with EDTA/heparin sodium/sodium citrate for whole blood or plasma, collection tube with no anticoagulant for serum.)
 Slohazard waste container and sharps bin
 Sterile safety lancet and alcohol swab (product code ITPW02231-TC25 and ITPW02231-TC40)

- Disposable gloves

Specimen collection and storage⁵

Fingerstick whole blood

Rub the target finger to stimulate blood flow. Clean the finger with an alcohol swab (Figure I.4) and leave it to dry. Pierce the skin of target finger with a sterile safety lancet. For the provided sterile safety lancet: a. Twist the protective cap more than 180° clockwise and remove it (see Figure I.5 for details); b. Place the lancet firmly on the side of the finger (avoid callus) to trigger it (see Figure 1.6 for details). Gently press around the site of puncture to obtain a drop of blood (avoid excessive bleeding). Wipe away the first drop of blood with a sterile gauze pad (see Figure 1.7 for details) and allow a new drop of blood to form. Collect the blood specimen with the dropper provided. Gently squeeze the bulb of the dropper and touch the tip to a drop of blood. Gently release the bulb to draw up the blood past the tip of the dropper (see Figure 1a and I.8 for details).

Venous whole blood

Collect whole blood specimen into a collection tube (with specified anticoagulant, namely EDTA, heparin sodium or sodium citrate) according to standard venous blood sampling process. Other anticoagulants may lead to incorrect results. Store whole blood specimen at 2-8°C for up to 3 days if it is not used immediately after being sampled. Do not freeze whole blood specimen. Before testing, gently shake the collection tube to obtain a homogeneous

Serum

Collect whole blood specimen into a collection tube which contains no anti- coagulant according to standard venous blood sampling process. Leave it to settle for 30 minutes for blood coagulation, then centrifuge at 3000rpm for at least 5 minutes to obtain the serum supernatant.

Plasma

Collect whole blood specimen into a collection tube (with specified anticoagulant, namely EDTA, heparin sodium or sodium citrate) according to standard venous blood sampling process. Gently invert the collection tube several times and leave it to settle for 30 minutes for blood coagulation, then centrifuge at 3000rpm for at least 5 minutes to obtain the plasma supernatant.

- Serum or plasma specimens must be stored at 2-8°C for up to 7 days from time of draw. Store at -18°C or below for long time storage. Multiple freeze- thaw cycles should be avoided (3 times at most). Frozen specimens must be equilibrated to room temperature (10-30°C) before testing.

 Serum or plasma specimen containing precipitate may lead to invalid results. Centrifuge the specimen and use
- the supernatant for the test.

Test procedure

- 01. Do not open the pouch until ready to perform the test. Use the test immediately after opening the pouch; 02. Equilibrate all reagents and specimens to room temperature (10-30°C) before use; 03. Put on gloves; 04. Unse

- 05. Write a client identifier on the test;
 06. Clean the finger with an alcohol swab and leave it to dry;

- On: Twist the lancet cap clockwise more than 180° and remove it;

 Replace the lancet firmly on the side of the finger (avoid callus) to trigger it;

 On: Gently massage around the bleeding point. Wipe away the first drop of blood;

 On: Gently squeeze the bulb of the dropper and touch the tip to a drop of blood. Release the bulb to collect blood
- past the tip of the dropper;
- past the up of the dropper (or 30µL). It Add 1 drop of the specimen (whole blood, serum or plasma) by gently squeezing the bulb of the dropper (or 30µL) by transfer pipette) into the "S" well of the cassette; Iz. Immediately add 1 drop (50µL) of sample diluent into the "S" well; Iz. Immediately add 1 drop (50µL) of sample diluent into the "S" well; Iz. Wait and interpret the result at 15 minutes, but not after 20 minutes.

⚠ Caution:

- Always apply specimen with a new and clean dropper or pipette tip to avoid cross contamination. Negative results cannot rule out the possibility of exposure to or infection with HIV-1 or HIV-2 viruses

Result interpretation

Negative: If a purplish red band appears on the "C" area only, it indicates a negative result

Positive: If purplish red bands appear at both the "T" area (even though very weak) and the "C" area, it indicates a positive result;

Invalid 1: If a purplish red band appears at the "T" area only, it indicates an invalid result. Repeat the test.

Contact the supplier if the control band remains invisible at the "C" area;

Invalid 2: If a purplish red band does not appear at either the "C" area or the "T" area, it indicates an invalid result. Repeat the test.

Contact the supplier if the control band remains invisible at the "C" area

Performance characteristics

The performance of ONE STEP Anti-HIV (1&2) Test has been evaluated by testing specimens from blood donors, hospitalized patients and commercial seroconversion panels.

Performance on HIV positive specimens
A study was performed using specimens with confirmed HIV positive status and tested by The ONE STEP Anti-HIV (182) Test.

Table 2 Performance on HIV positive specimens

Specimen Types	Positive by ONE STEP Anti-HIV (1&2) Test	Total number of tested specimens	Sensitivity
HIV-1 positive plasma specimens	260	260	100% 95%CI (98.59%-100.00%)
HIV-1 positive plasma of different subtypes (non-B) specimens	ent 40	40	100% 95%CI (91.19%-100.00%)
Paired HIV-1 positive venous whole blood specimens	100	100	100% 95%CI (96.38%-100.00%)
Paired HIV-1 positive plasma specimens	100	100	100% 95%CI (96.38%-100.00%)
HIV-2 positive plasma specime	ns 100	100	100% 95%CI (96.38%-100.00%)

40 plasma specimens with known HIV-1 non-B subtypes were tested with The ONE STEP Anti-HIV (1&2) Test. All specimens show positive results with clear test bands.

Table 3 Test results on specimens with known HIV-1 non-B subtypes

HIV substype	n	ONE STEP Ar	nti-HIV (1&2) Test
The substype	"	Positive	Negative
Α	5	5	0
С	5	5	0
D	5	5	0
F	5	5	0
G	4	4	0
Н	3	3	0
J	3	3	0
K	3	3	0
0	3	3	0
CRF01 AE	4	4	0
Total	40	40	0

Performance on commercial seroconversion panels 6

The ONE STEP Anti-HIV (1&2) Test shows good sensitivity in early infection on available commercial seroconversion

Specificity

Table 4 Performance on HIV negative specimens

Specimens Types		ONE STEP An	ti-HIV (1&2)	Test
оресписта турез	Negative	Positive	Total	Specificity
Venous whole blood specimen	500	0	500	100% 95%CI (99.26%-100.00%)
HIV negative EDTA plasma specimens	1000	0	1000	100% 95%CI (99.63%-100.00%)
Hospitalized patient specimens	200	0	200	100% 95%CI (98.17%-100.00%)
Pregnant women specimens	200	0	200	100% 95%CI (98.17%-100.00%)

Table 5 Performance on cross-reactive specimens

Interferent specimens	ONE STEP	Anti-HIV (1&2) Test	
meneral specimens	Negative	Positive	Total
Rheumatoid factor positive	10	0	10
Anti-HCV positive	18	0	18
Anti-HBs positive	18	0	18
Anti-HBc positive	18	0	18
Anti-HTLV 1/2 positive	18	0	18
Anti-HEV positive	18	0	18
Total	100	0	100

Precision

3 lots of ONE STEP Anti-HIV (1&2) Test were tested at three different labs by both professional and non-professional

3 lots of ONE STEP Anti-HIV (182) lest were tested at three different labs by both professional and non-professional operators to analyze the reproducibility and repeatability of the product.

All HIV negative specimens were non-reactive in the test; the difference between results of each medium/weak positive specimen obtained during the 5-day reproducibility study or the 20-day repeatability study was no greater than 2 intensity degrees according to the 11-degree internal Cc system. The ONE STEP Anti-HIV (182) Test showed good reproducibility and repeatability in the precision studies.

Specimen type

Sensitivity obtained from paired whole blood/plasma specimens obtained from 100 anti-HIV positive patients was 100% (see Table 2).

Specificity obtained from 500 whole blood specimens of blood donors was 100% (see Table 4).

Table 6 Serum and plasma comparison (HIV negative specimens)

	EDTA plasma	Heparin plasma	Citrate plasma	serum	
Negative	25	25	25	25	
Positive	0	0	0	0	
Specificity	100%	100%	100%	100%	

Table 7 Serum and plasma comparison (HIV positive specimens)

	EDTA plasma	Heparin plasma	Citrate plasma	serum
Negative	0	0	0	0
Positive	25	25	25	25
Specificity	100%	100%	100%	100%

The test results showed consistency between plasma (EDTA, Heparin and Citrate) and serum specimens

Table 8 Venous and fingerstick whole blood comparison

Specimens Types	HIV positive s	pecimens	HIV negative specimens	
	Venous whole blood	Fingerstick whole blood	Venous whole blood	Fingerstick whole blood
Negative	0	0	25	25
Positive	26	26	0	0
Concordance rate	100%	100%	100%	100%

According to Table 6, Table 7 and Table 8. The ONE STEP Anti-HIV (1&2) Test can give consistent test results on rum, plasma, venous whole blood and fingerstick whole blood specime

Limitations ⚠

- The kit is designed to detect antibodies against HIV-1 and HIV-2 in human serum, plasma, and whole blood. Specimens other than those specified may not supply accurate results and the device will not notify this kind of misuse to the user.
 The intensity of the test band does not necessarily correlate to the titer of antibody in the specimer

- The presence of the control band only indicates the flow of the conjugate.
 When a specimen containing high concentration of antibodies to HIV-1 or HIV-2 is tested on the device, the control band could be absent due to the test principle. In this case, please perform further analysis according to the section
- Tessult interpretation.

 Result interpretation.

 As this product is intended to detect antibodies against HIV from individuals, clinical diagnosis of HIV infection or AIDS should not be made only based on the results of the product.

 A negative result should not exclude the possibility of infection caused by HIV-1 or HIV-2. A negative result can also
- A negative result should not exclude the possibility of infection caused by HIV-1 of HIV-2. A negative result can occur in the following circumstances:

 Recently acquired HIV infection.

 Low antibody levels (e.g., early seroconversion specimens) which are below the detection limit of the test.

 HIV antibodies in the patient that do not react with specific antigens utilized in the assay configuration. In exceptional cases this may lead to an observation of negative results.

- Specimens are not properly stored.

- High concentrations of a particular analyte.
 Recently discovered type or subtype of HIV.
 For reasons above, care should be taken in interpreting negative results. Other clinical data (e.g., symptoms or risk factors) should be used in conjunction with the test results.
- Positive specimens should be retested using another method and the results should be evaluated considering the Positive specimens should be retested using another method and the results should be evaluated considerily overall clinical evaluation before a diagnosis is made.
 The product is not validated on specimens from infants, children, or patients on antiviral treatment.
 Use of hemolytic specimens, heumatoid factors-containing specimens, hyperlipemia specimens or icteric specimens may lead to impairment to the test result.
 Only specimens with good fluidity and without hemolysis can be used with this test.

References

- 1. Blattner, W., Gallo, R.C. and Temin. H.M. HIV causes AIDS. Science. 241:515, 1988.
 2. Curran, J.W., Morgan. W.M., Hardy, A.M., et al. The epidemiology of AIDS: Current status and future prospects. Science 1985; 229: 1352-7.
- 3. World Health Organization. Laboratory biosafety manual. Geneva. World Health Organization, 2004.

 4. National Committee for Clinical Laboratory Standards. Protection of laboratory workers from infectious disease transmitted by blood, body fluids, and tissue: Tentative guideline. NCCLS Document M29-T. Villanova, PA.: NCCLS, 1989.

 5. Clinical and Laboratory Standards in Court of the Court o
- 5. Clinical and Laboratory Standards Institute. Procedures and Devices for collection of Diagnostic Capillary Blood Specimens, Approved Standard-Sixth Edition H4-A6.
- 6. Evaluation report, German Red Cross. July 2015.

Key to symbols used

Key to symbols use					
Â	CAUTION	1	TEMPERATURE LIMIT	8	BIOLOGICAL RISKS
*	KEEP AWA SUNLI			KEEP DRY	
***	MANUFACTURER		IVD	IN VITRO DIAGNOSTIC MEDICAL DEVICE	
LOT	BATCH CODE		REF	CATALOGUE NUMBER	
[]i	CONSULT INSTRUCTIONS FOR USE		\boxtimes	USE	E-BY DATE
2	DO NOT REUSE				ISE IF PACKAGE DAMAGED
Σ	CONTAINS SUFFICIENT FOR (N) TESTS		STERILE R		IZED USING ADIATION



332 Xinguang Road, Xinyang Industrial Area, Haicang, 361022, Xiamen, Fujian, P.R. China Email: intecproducts@asintec.com



01.05.03.1307-250302

Release date: 20250305

ONE STEP Anti-HIV (1&2) Test

Colloidal Gold (Whole blood/serum/plasma)

Key to symbols used

<u> </u>	CAUTION		TEMPERATURE LIMIT
类	KEEP AWAY FROM SUNLIGHT		KEEP DRY
	MANUFACTURER	IVD	IN VITRO DIAGNOSTIC MEDICAL DEVICE
LOT	BATCH CODE	REF	CATALOGUE NUMBER
[]i	CONSULT INSTRUCTIONS FOR USE		USE-BY DATE
8	DO NOT REUSE		DO NOT USE IF PACKAGE IS DAMAGED
Σ	CONTAINS SUFFICIENT FOR ⟨N⟩ TESTS	STERILE R	STERILIZED USING IRRADIATION



ITPW02152-TC25 ITPW02152-TC40 ITPW02153-TC40 ITPW02153-TC40SA

ONE STEP Anti-HIV (1&2) Test

For in vitro diagnostic use only. IVD

Please read this package insert carefully prior to use and strictly follow the instructions.

Reliability of the assay cannot be guaranteed if there are any deviations from the instructions in this package insert.

Intended use

The ONE STEP Anti-HIV (1&2) Test is a colloidal gold enhanced, rapid immunochromatographic assay for qualitative detection of antibodies to Human Immunodeficiency Virus (HIV) in human whole blood (venous and fingerstick), serum or plasma specimens in adults. This test is intended for use by healthcare professionals and trained healthcare workers as an aid in the diagnosis of HIV infection.

Summary

Human immunodeficiency virus is the pathogen of Acquired Immunodeficiency Syndrome (AIDS)¹⁻². The *ONE STEP Anti-HIV (1&2) Test* is a simple, visual qualitative test that detects antibodies in human whole blood, serum or plasma and presents the result at 15 minutes, but not after 20 minutes.

Test Principle

The test band region on the nitrocellulose membrane is pre-coated with recombinant HIV antigen (containing predominant epitope of gp41, gp120 of HIV-1 and predominant epitope of gp36 of HIV-2), and the control band region on the nitrocellulose membrane is pre-coated with sheep anti-rabbit IgG. The fiberglass is pre-coated with recombinant HIV antigen (containing predominant epitope of gp41, gp120 of HIV-1 and predominant epitope of gp36 of HIV-2) conjugated with colloidal gold and rabbit IgG conjugated with colloidal gold. For positive specimens, HIV antigen conjugated with colloidal gold reacts with HIV antibody in whole blood, serum or plasma, forming a colloidal gold conjugate/ HIV antibody complex. The complex migrates through the test strip and is

captured by the recombinant HIV antigen immobilized in the test band region, forming a test band.

A negative specimen will not produce a test band due to the absence of colloidal gold conjugate/HIV antibody complex. To ensure assay validity, a purplish red

gold conjugate/HIV antibody complex. To ensure assay validity, a purplish red control band in the control region will appear regardless of the test result. The assay is only valid when the control band appears.

Storage conditions and stability

The shelf life of the ONE STEP Anti-HIV (1&2) Test, including the sample diluent, is 24 months from date of manufacture. Product shall be stored at 2-30°C. Test cassette should be used immediately upon opening the foil pouch. Sample diluent should be stored capped at 2-30°C and used within 8 weeks after opening.

Warnings and precautions³-4

The warnings and precautions are included, but not limited to the following:

[Warnings]

- This product is for in vitro diagnosis of the infection of HIV only, other diseases cannot be analyzed with any component of this kit.
- All specimens with positive results must be confirmed using an appropriate test such as immunoblot assay or equivalent.
- Sample diluents contain sodium azide. Sodium azide can react with copper and lead used in certain plumbing systems to form metal salts which are explosive. The quantity used in this kit is small, however, when disposing sodium azide containing materials, flush with relatively large quantities of water to prevent metal azide build up in plumbing systems.

[Precautions]

- Wear gloves during the entire testing process.
- Do not use expired reagents or test cassettes.
- Do not use accessories if the seal or package is broken.
- Do not use test cassette if the foil pouch is damaged or the seal is broken.
- Do not use the provided sterile safety lancets if the cap is already pulled off before use.
- Do not reuse the accessories. All the accessories are for single use.
- Do not reuse the cassette. Each cassette enclosed in a foil pouch is only for single use.
- · Do not pipette by mouth.
- Do not eat or smoke while handling specimens.
- Do not store the specimen in dropper, it is only used for specimen collection.
- Do not use pooled specimens or specimens other than specified (i.e. saliva, urine).
- Do not interchange reagents among kits of different batch number or even products.
- Do not perform the test in an environment which leads to rapid evaporation (e.g. >40°C and <40% relative humidity, close to a running fan or air conditioner).
- Ensure the specimen is added correctly prior to the addition of sample diluent.
- Avoid contact between the "S" well of the cassette and diluent bottle to prevent contamination of the diluent.
- Clean and disinfect all the areas that may be contaminated by spills of specimens or reagents with appropriate disinfectant.
- Decontaminate and dispose of all specimens, reagents, accessories and other
 potentially contaminated materials as infectious wastes in a biohazard container.
 Used lancet should be disposed of in a sharps bin.

Reagent and materials provided

Table 1 Reagent and materials provided

	Table I Reagont a	na matemate provided	
Component	25 tests	40 tests	40 tests
	(ITPW02152-TC25)	(ITPW02152-TC40)	(ITPW02153-TC40/ ITPW02153-TC40SA)
Test cassette	1×25 pieces	1×40 pieces	1×40 pieces
Dropper	1×25 pieces	1×40 pieces	1×40 pieces
Desiccant	1×25 pieces	1×40 pieces	1×40 pieces
Sample diluent	2mL×3 bottles	2mL×4 bottles	2mL×4 bottles
Sterile safety lancet	Not provided	Not provided	2×20 pieces
Alcohol swab	Not provided	Not provided	1×40 pieces
Package insert	1×1 piece	1×1 piece	1×1 piece

Preparation

1a. Unseal the foil pouch. The components provided with products of ITPW02153-TC40 and ITPW02153-TC40SA are as below.





Desiccant







Alcohol swab

Safety lancet

Sample diluent

1b. Unseal the foil pouch. The components provided with products of ITPW02152-TC25 and ITPW02152-TC40 are as below.









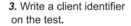
Dropper

Cassette

Desiccant

Sample diluent









I. Fingerstick whole blood

4. Clean the finger with an alcohol swab and leave it to dry.



5. Twist the lancet cap clockwise, more than 180° and remove it.



6. Place the lancet firmly on the side of the finger (avoid callus) to trigger it.



7. Gently massage around the bleeding point. Wipe away the first drop of blood.



8. Gently squeeze the bulb of the dropper and touch the tip to a drop of blood. Release the bulb to collect blood past the tip of the dropper.



9. Add 1 drop (30µl) of whole blood by aently squeezing the bulb of the provided dropper into the "S" Well.



10. Immediately add 1 drop (50µl) of sample diluent into the **"S"** Well



11. Wait and interpret the result at 15 min. but not after 20 min.



II. Venous whole blood

4a. Add 1 drop (30µl) of whole blood by gently squeezing the bulb of the provided dropper into the "S" Well.

4b. Add 30µl (1 drop) of whole blood using the transfer pipette into the "S" Well.

5. Immediately add 1 drop (50µl) of sample diluent into the "S" Well.

6. Wait and interpret the result at 15 min, but not after 20 min.













III. Serum/plasma

4a. Add 1 drop (30µl) of specimen by gently squeezing the bulb of the provided dropper into the "S" Well.

4b. Add 30µl (1 drop) of specimen using the transfer pipette into the "S" Well.

5. Immediately add 1 drop (50µl) of sample diluent into the "S" Well.

6. Wait and interpret the result at 15 min, but not after 20 min.







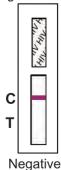


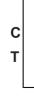




Result interpretation

See package insert for details

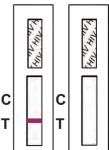












Invalid 1 Invalid 2

Materials required but not provided

- Timer or stopwatch
- Blood sampling tools (sterile gauze pad, venous puncture device, collection tube with EDTA/heparin sodium/sodium citrate for whole blood or plasma, collection tube with no anticoagulant for serum.)
- Biohazard waste container and sharps bin
- Sterile safety lancet and alcohol swab (product code ITPW02152-TC25 and ITPW02152-TC40)
- Disposable gloves

Specimen collection and storage⁵

Fingerstick whole blood

Rub the target finger to stimulate blood flow. Clean the finger with an alcohol swab (Figure I.4) and leave it to dry. Pierce the skin of target finger with a sterile safety lancet. For the provided sterile safety lancet: a. Twist the protective cap more than 180° clockwise and remove it (see Figure I.5 for details); b. Place the lancet firmly on the side of the finger (avoid callus) to trigger it (see Figure I.6 for details). Gently press around the site of puncture to obtain a drop of blood (avoid excessive bleeding). Wipe away the first drop of blood with a sterile gauze pad (see Figure I.7 for details) and allow a new drop of blood to form. Collect the blood specimen with the dropper provided. Gently squeeze the bulb of the dropper and touch the tip to a drop of blood. Gently release the bulb to draw up the blood past the tip of the dropper (see Figure 1a and I.8 for details).

Venous whole blood

Collect whole blood specimen into a collection tube (with specified anticoagulant, namely EDTA, heparin sodium or sodium citrate) according to standard venous blood sampling process. Other anticoagulants may lead to incorrect results. Store whole blood specimen at 2-8°C for up to 3 days if it is not used immediately after being sampled. Do not freeze whole blood specimen. Before testing, gently shake the collection tube to obtain a homogeneous specimen.

Serum

Collect whole blood specimen into a collection tube which contains no anticoagulant according to standard venous blood sampling process. Leave it to settle for 30 minutes for blood coagulation, then centrifuge at 3000rpm for at least 5 minutes to obtain the serum supernatant.

Plasma

Collect whole blood specimen into a collection tube (with specified anticoagulant, namely EDTA, heparin sodium or sodium citrate) according to standard venous blood sampling process. Gently invert the collection tube several times and leave it to settle for 30 minutes for blood coagulation, then centrifuge at 3000rpm for at least 5 minutes to obtain the plasma supernatant.

Notes:

- Serum or plasma specimens must be stored at 2-8°C for up to 7 days from time of draw. Store at -18°C or below for long time storage. Multiple freezethaw cycles should be avoided (3 times at most). Frozen specimens must be equilibrated to room temperature (10-30°C) before testing.
- Serum or plasma specimen containing precipitate may lead to invalid results.
 Centrifuge the specimen and use the supernatant for the test.

Test procedure

- 01. Do not open the pouch until ready to perform the test. Use the test immediately after opening the pouch;
- 02. Equilibrate all reagents and specimens to room temperature (10-30°C) before use;
- 03. Put on gloves:
- 04. Unseal the foil pouch and place the cassette on a clean, dry and level surface;
- 05. Write a client identifier on the test;
- 06. Clean the finger with an alcohol swab and leave it to dry:
- 07. Twist the lancet cap clockwise more than 180° and remove it:
- 08. Place the lancet firmly on the side of the finger (avoid callus) to trigger it;
- 09. Gently massage around the bleeding point. Wipe away the first drop of blood;
- 10. Gently squeeze the bulb of the dropper and touch the tip to a drop of blood. Release the bulb to collect blood past the tip of the dropper;
- 11. Add **1 drop** of the specimen (whole blood, serum or plasma) by gently squeezing the bulb of the dropper (or 30µl by transfer pipette) into the "S" well of the cassette:
- 12. Immediately add **1 drop** (50µI) of sample diluent into the "**S**" well;
- 13. Wait and interpret the result at 15 minutes, but not after 20 minutes.

♠ Caution:

- Always apply specimen with a new and clean dropper or pipette tip to avoid cross contamination.
- Negative results cannot rule out the possibility of exposure to or infection with HIV-1 or HIV-2 viruses.

Result interpretation

Negative: If a purplish red band appears on the "C" area only, it indicates a negative result.

Positive: If purplish red bands appear at both the "T" area (even though very weak) and the "C" area, it indicates a positive result;

Invalid 1: If a purplish red band appears at the "T" area only, it indicates an invalid result. Repeat the test.

Contact the supplier if the control band remains invisible at the "C" area;

Invalid 2: If a purplish red band does not appear at either the "C" area or the "T" area, it indicates an invalid result. Repeat the test.

Contact the supplier if the control band remains invisible at the "C" area.

Performance characteristics

The performance of *ONE STEP Anti-HIV* (1&2) Test has been evaluated by testing specimens from blood donors, hospitalized patients and commercial seroconversion panels.

Sensitivity

Performance on HIV positive specimens

A study was performed using specimens with confirmed HIV positive status and tested by ONE STEP Anti-HIV (1&2) Test.

Table 2 Performance on HIV positive specimens

Table 2 i	chomiance on the	positive specimen	13
Specimen Types	Positive by ONE STEP	Total number of	Sensitivity
	Anti-HIV (1&2) Test	tested specimens	
HIV-1 positive plasma specimens	260	260	100% 95%CI (98.59-100.00)
HIV-1 positive plasma of d subtypes (non-B) specime	ifferent ns 40	40	100% 95%CI (91.19-100.00)

Paired HIV-1 positive venous whole blood specimens	100	100	100% 95%CI (96,38-100,00)
Paired HIV-1 positive plasma specimens	100	100	100%
HIV-2 positive plasma specimens	100	100	95%CI (96.38-100.00) 100% 95%CI (96.38-100.00)

40 plasma specimens with known HIV-1 non-B subtypes were tested with the *ONE STEP Anti-HIV (1&2) Test*. All specimens show positive results with clear test bands.

Table 3 Test results on specimens with known HIV-1 non-B subtypes.

HIV subtype	n	ONE STEP Anti-HIV (1&2) Test		
		Positive	Negative	
Α	5	5	0	
С	5	5	0	
D	5	5	0	
F	5	5	0	
G	4	4	0	
Н	3	3	0	
J	3	3	0	
K	3	3	0	
0	3	3	0	
CRF01_AE	4	4	0	
Total	40	40	0	

Performance on commercial seroconversion panels ⁶ *ONE STEP Anti-HIV (1&2) Test* shows good sensitivity in early infection on available commercial seroconversion panels.

Specificity

Table 4 Performance on HIV negative specimens

Specimens Types		ONE STEP Anti-HIV (1&2) Test			
	Negative	Positive	Total	Specificity	
Venous whole blood specimens	500	0	500	100% 95%CI (99.26-100.00)	
HIV negative EDTA plasma specimens	1000	0	1000	100% 95%C I (99.63-100.00)	
Hospitalized patient specimens	200	0	200	100% 95%CI (98.17-100.00)	
Pregnant women specimens	200	0	200	100% 95%C I (98.17-100.00)	

Table 5 Performance on cross-reactive specimens

Interferent specimens	ONE STEP Anti-HIV (1&2) Test			
	Negative	Positive	Total	
Rheumatoid factor positive	10	0	10	
anti-HCV positive	18	0	18	
anti-HBs positive	18	0	18	
anti-HBc positive	18	0	18	
Anti-HTLV 1/2 positive	18	0	18	
anti-HEV positive	18	0	18	
Total	100	0	100	

Precision

3 lots of *ONE STEP Anti-HIV (1&2) Test* were tested at three different labs by both professional and non-professional operators to analyze the reproducibility and repeatability of the product.

All HIV negative specimens were non-reactive in the test; the difference between results of each medium/weak positive specimen obtained during the 5-day reproducibility study or the 20-day repeatability study was no greater than 2 intensity degrees according to the 11-degree internal QC system. *ONE STEP Anti-HIV (1&2) Test* showed good reproducibility and repeatability in the precision studies.

Specimen type

Sensitivity obtained from paired whole blood/plasma specimens obtained from 100 anti-HIV positive patients was 100% (see Table 2).

Specificity obtained from 500 whole blood specimens of blood donors was 100% (see Table 4).

Table 6 Serum and plasma comparison (HIV negative specimens)

		• •	-	•
	EDTA plasma	Heparin plasma	Citrate plasma	serum
Negative	25	25	25	25
Positive	0	0	0	0
Specificity	100%	100%	100%	100%

Table 7 Serum and plasma comparison (HIV positive specimens)

	EDTA plasma	Heparin plasma	Citrate plasma	serum
Negative	0	0	0	0
Positive	25	25	25	25
Sensitivity	100%	100%	100%	100%

The test results showed consistency between plasma (EDTA, Heparin and Citrate) and serum specimens.

Table 8 Venous and fingerstick whole blood comparison

	H I V positive sp	pecimens	HIV negative	specimens
-	Venous whole blood	Fingerstick whole blood	Venous whole blood	Fingerstick whole blood
Negative	0	0	25	25
Positive	26	26	0	0
Concordance rate	100%	100%	100%	100%

According to Table 6, Table 7 and Table 8, ONE STEP Anti-HIV (1&2) Test can give consistent test results on serum, plasma, venous whole blood and fingerstick whole blood specimens.

Limitations 1

- The kit is designed to detect antibodies against HIV-1 and HIV-2 in human serum, plasma, and whole blood. Specimens other than those specified may not supply accurate results and the device will not notify this kind of misuse to the user.
- The intensity of the test band does not necessarily correlate to the titer of antibody in the specimen.
- The presence of the control band only indicates the flow of the conjugate.
- When a specimen containing high concentration of antibodies to HIV-1 or HIV-2 is tested on the device, the control band could be absent due to the test principle. In this case, please perform further analysis according to the section "Result interpretation".
- As this product is intended to detect antibodies against HIV from individuals, clinical diagnosis of HIV infection or AIDS should not be made only based on the results of the product.
- A negative result should not exclude the possibility of infection caused by HIV-1 or HIV-2. A negative result can also occur in the following circumstances:
 - Recently acquired HIV infection.
 - Low antibody levels (e.g., early seroconversion specimens) which are below the detection limit of the test.
 - HIV antibodies in the patient that do not react with specific antigens utilized in the assay configuration. In exceptional cases this may lead to an observation of negative results.
 - Specimens are not properly stored.
 - High concentrations of a particular analyte.
 - Recently discovered type or subtype of HIV.
- For reasons above, care should be taken in interpreting negative results.
 Other clinical data (e.g., symptoms or risk factors) should be used in conjunction with the test results.
- Positive specimens should be retested using another method and the results should be evaluated considering the overall clinical evaluation before a diagnosis is made.
- The product is not validated on specimens from infants, children, or patients on antiviral treatment.
- Use of hemolytic specimens, rheumatoid factors-containing specimens,

hyperlipemia specimens or icteric specimens may lead to impairment to the test result.

 Only specimens with good fluidity and without hemolysis can be used with this test.

References

- 1. Blattner, W., Gallo, R.C. and Temin. H.M. HIV causes AIDS. Science. 241: 515, 1988.
- 2. Curran, J.W., Morgan. W.M., Hardy, A.M., et al. The epidemiology of AIDS: Current status and future prospects. Science 1985; 229: 1352-7.
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- Clinical and Laboratory Standards Institute. Procedures and Devices for collection of Diagnostic Capillary Blood Specimens, Approved Standard-Sixth Edition H4-A6.
- 6. Evaluation report, German Red Cross. July 2015.

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REF ITPW02152-TC25 ITPW02152-TC40 ITPW02153-TC40

> 01 05 14 076-250307 date: 2025.03.05

ONE STEP Anti-HIV (1&2) Test

For in vitro diagnostic use only. IVD

Please read this package insert carefully prior to use and strictly follow the instructions.

Reliability of the assay cannot be guaranteed if there are any deviations from the instructions in this package inse

The ONE STEP Anti-HIV (182) Test is a colloidal gold enhanced, rapid immunochromatographic assay for qualitative detection of antibodies to Human Immunodeficiency Virus (HIV) in human whole blood (venous and fingerstick), serum or plasma specimens in adults. This test is intended for use by healthcare professionals and trained healthcare workers as an aid in the diagnosis of HIV infection.

Human immunodeficiency virus is the pathogen of Acquired Immunodeficiency Syndrome (AIDS)¹⁻². The ONE STEP Anti-HIV (182) Test is a simple, visual qualitative test that detects antibodies in human whole blood, serum or plasma and presents the result at 15 minutes, but not after 20 minutes.

Test Principle

Test Principle
The test band region on the nitrocellulose membrane is pre-coated with recombinant HIV antigen (containing predominant epitope of gp41, gp120 of HIV-1 and predominant epitope of gp36 of HIV-2), and the control band region on the nitrocellulose membrane is pre-coated with sheep anti-rabbit IgG. The fiberglass is pre-coated with recombinant HIV antigen (containing predominant epitope of gp41, gp120 of HIV-1 and predominant epitope of gp36 of HIV-2) conjugated with colloidal gold and rabbit IgG conjugated with colloidal gold and rabbit IgG conjugated with colloidal gold conjugated with colloidal gold reacts with HIV antibody in whole blood, serum or plasma, forming a colloidal gold conjugated with colloidal gold conjugated with colloidal gold conjugates through the test strip and is captured by the recombinant HIV antigne immobilized in the test band region, forming a test band. A negative specimen will not produce a test band due to the absence of colloidal gold conjugate/HIV antibody complex. To ensure assay validity, a purplish red control band in the control region will appear regardless of the test result.

result.

The assay is only valid when the control band appears.

Storage conditions and stability
The shelf life of the ONE STEP Anti-HIV (182) Test, including the sample diluent, is 24 months from date of
manufacture. Product shall be stored at 2-30°C. Test cassette should be used immediately upon opening the foil
pouch. Sample diluent should be stored capped at 2-30°C and used within 8 weeks after opening.

Warnings and precautions³⁴
The warnings and precautions are included, but not limited to the following:

[Warnings]

- This product is for in vitro diagnosis of the infection of HIV only, other diseases cannot be analyzed with any component of this kit.
- All specimens with positive results must be confirmed using an appropriate test such as immunoblot assay or equivalent Sample diluents contain sodium azide. Sodium azide can react with copper and lead used in certain plumbing systems to form metal salts which are explosive. The quantity used in this kit is small, however, when disposing sodium azide containing materials, flush with relatively large quantities of water to prevent metal azide build up in plumbing systems

[Precautions]

- [Precautions]

 Wear gloves during the entire testing process.

 Do not use expired reagents or test cassettes.

 Do not use accessories if the seal or package is broken.

 Do not use test cassette if the foil pouch is damaged or the seal is broken.

 Do not use test cassette if the foil pouch is damaged or the seal is broken.

 Do not use the provided sterile safety lancets if the cap is already pulled off before use.

 Do not reuse the accessories. All the accessories are for single use.

 Do not reuse the cassette. Each cassette enclosed in a foil pouch is only for single use.

 Do not supplied by mouth.

 Do not eat or smoke while handling specimens.

- Do not store the specimen in dropper, it is only used for specimen collection
- Do not use pooled specimen in dropper, it is only used to respect merit conceiton.
 Do not use pooled specimens or specimens other than specified (i.e. saliva,urine).
 Do not interchange reagents among kits of different batch number or even products.
 Do not perform the test in an environment which leads to rapid evaporation(e.g. >40°C and <40% relative humidity, close to a running fan or air conditioner).
 Ensure the specimen is added correctly prior to the addition of sample diluent.

- Avoid contact between the "S" well of the cassette and diluent bottle to prevent contamination of the diluent.

 Clean and disinfect all the areas that may be contaminated by spills of specimens or reagents with appropriate disinfectant.

 Decontaminate and dispose of all specimens, reagents, accessories and other potentially contaminated materials as infectious wastes in a biohazard container. Used lancet should be disposed of in a sharps bin.

Reagent and materials provided

Table 1 Reagent and materials provided

Component	25 tests	40 tests	40 tests	40 tests
	ITPW02152-TC25	ITPW02152-TC40	ITPW02153-TC40	ITPW02154-TC40
Test cassette	1×25 pieces	1×40 pieces	1×40 pieces	1×40 pieces
Dropper	1×25 pieces	1×40 pieces	1×40 pieces	1×40 pieces
Desiccant	1×25 pieces	1×40 pieces	1×40 pieces	1×40 pieces
Sample diluent	2mL×3 bottles	2mL×4 bottles	2mL×4 bottles	2mL×4 bottles
Sterile safety	Not provided	Not provided	1×40 pieces	1×40 pieces
lancet			(05-062122)	(21G)
Alcohol swab	Not provided	Not provided	1×40 pieces	1×40 pieces
Package insert	1×1 piece	1×1 piece	1×1 piece	1×1 piece

Preparation

1a. Open the foil pouch and look for the following components as below, if the product code is ITPW02153-TC40 or ITPW02154-TC40



1b. Open the foil pouch and look for the following components as below, if the product code is ITPW02152-TC25 or ITPW02152-TC40



2. Put on gloves. 3. Write a client identifier





I. Fingerstick whole blood

4. Clean the finger with an alcohol swab and leave it to dry



9. Add 1 drop (30µL) of whole blood by

5. Twist the lancet cap

clockwise, more than

180° and remove it



8. Gently squeeze the

bulb of the dropper and

gently squeezing the bulb of the provided dropper into the "S" Well



firmly on the side of the finger (avoid callus) Push lancet to trigger it.



10. Immediately add

1 drop (50µL) of

11. Wait and interpret but not after 20 mir

7. Gently massage

around the bleeding

point. Wipe away the

first drop of blood





4b. Add 30μL (1 drop) of whole blood using the transfer pipette into the "S" Well.





6. Wait and

II. Venous whole blood

4a. Add **1 drop** (30μL) of whole blood by gently squeezing the bulb of the provided dropper into the "S" Well.











III. Serum/plasma

4a. Add 1 drop (30µL) of specimen by gently squeezing the bulb of the provided dropper into the "S" Well.





4b. Add 30uL (1 drop)





1 drop

(50µL)

Immediately add

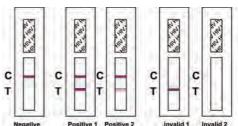


6. Wait and



Result interpretation

See package insert for details



Materials required but not provided

- Slibod sampling tools (sterile gauze pad, venous puncture device, collection tube with EDTA/heparin sodium/sodium citrate for whole blood or plasma, collection tube with no anticoagulant for serum.)
 Slibhazard waste container and sharps bin
 Sterile safety lancet and alcohol swab (product code ITPW02152-TC25 and ITPW02152-TC40)

- · Disposable gloves

Specimen collection and storage⁵

Fingerstick whole blood

Rub the target finger to stimulate blood flow. Clean the finger with an alcohol swab (Figure I.4) and leave it to dry. Pierce the skin of target finger with a sterile safety lancet. For the provided sterile safety lancet: a. Twist the protective cap more than 180° clockwise and remove it (see Figure I.5 for details); b. Place the lancet firmly on the side of the finger (avoid callus) to trigger it (see Figure 1.6 for details). Gently press around the site of puncture to obtain a drop of blood (avoid excessive bleeding). Wipe away the first drop of blood with a sterile gauze pad (see Figure 1.7 for details) and allow a new drop of blood to form. Collect the blood specimen with the dropper provided. Gently squeeze the bulb of the dropper and touch the tip to a drop of blood. Gently release the bulb to draw up the blood past the tip of the dropper (see Figure 1a and I.8 for details).

Venous whole blood

Collect whole blood specimen into a collection tube (with specified anticoagulant, namely EDTA, heparin sodium or sodium citrate) according to standard venous blood sampling process. Other anticoagulants may lead to incorrect results. Store whole blood specimen at 2-8°C for up to 3 days if it is not used immediately after being sampled. Do not freeze whole blood specimen. Before testing, gently shake the collection tube to obtain a homogeneous

Collect whole blood specimen into a collection tube which contains no anti- coagulant according to standard venous blood sampling process. Leave it to settle for 30 minutes for blood coagulation, then centrifuge at 3000rpm for at least 5 minutes to obtain the serum supernatant.

Plasma

Collect whole blood specimen into a collection tube (with specified anticoagulant, namely EDTA, heparin sodium or sodium citrate) according to standard venous blood sampling process. Gently invert the collection tube several times and leave it to settle for 30 minutes for blood coagulation, then centrifuge at 3000rpm for at least 5 minutes to obtain the plasma supernatant.

- Serum or plasma specimens must be stored at 2-8°C for up to 7 days from time of draw. Store at -18°C or below for long time storage. Multiple freeze- thaw cycles should be avoided (3 times at most). Frozen specimens must be equilibrated to room temperature (10-30°C) before testing.

 Serum or plasma specimen containing precipitate may lead to invalid results. Centrifuge the specimen and use
- the supernatant for the test.

Test procedure

- 01. Do not open the pouch until ready to perform the test. Use the test immediately after opening the pouch; 02. Equilibrate all reagents and specimens to room temperature (10-30°C) before use; 03. Put on gloves; 04. Unse

- 05. Write a client identifier on the test;
 06. Clean the finger with an alcohol swab and leave it to dry;

- On Clear the imige with an account swo and releve it our;

 On Thirst the lancet cap clockwise more than 180° and remove it;

 On Place the lancet firmly on the side of the finger (avoid callus) to trigger it;

 On Gently massage around the bleeding point. Wipe away the first drop of blood;

 On Gently squeeze the bulb of the dropper and touch the tip to a drop of blood. Release the bulb to collect blood. past the tip of the dropper;
- past the up of the endergher,

 1. Add 1 drop of the specimen (whole blood, serum or plasma) by gently squeezing the bulb of the dropper (or 30µL by transfer pipette) into the "S" well of the cassette;

 12. Immediately add 1 drop (50µL) of sample diluent into the "S" well;

 13. Wait and interpret the result at 15 minutes, but not after 20 minutes.

⚠Caution:

- Always apply specimen with a new and clean dropper or pipette tip to avoid cross contamination.
 Negative results cannot rule out the possibility of exposure to or infection with HIV-1 or HIV-2 viruses

Result interpretation

Negative: If a purplish red band appears on the "C" area only, it indicates a negative result

Positive: If purplish red bands appear at both the "T" area (even though very weak) and the "C" area, it indicates a positive result;

Invalid 1: If a purplish red band appears at the "T" area only, it indicates an invalid result. Repeat the test.

Contact the supplier if the control band remains invisible at the "C" area;

Invalid 2: If a purplish red band does not appear at either the "C" area or the "T" area, it indicates an invalid result.

Repeat the test.

Contact the supplier if the control band remains invisible at the "C" area

Performance characteristics

The performance of ONE STEP Anti-HIV (1&2) Test has been evaluated by testing specimens from blood donors, hospitalized patients and commercial seroconversion panels.

Performance on HIV positive specimens
A study was performed using specimens with confirmed HIV positive status and tested by ONE STEP Anti-HIV (182) Test.

Table 2 Performance on HIV positive specimens

Specimen Types	Positive by ONE STEP Anti-HIV (1&2) Test	Total number of tested specimens	Sensitivity
HIV-1 positive plasma specimens	260	260	100% 95%CI (98.59-100.00)
HIV-1 positive plasma of different subtypes (non-B) specimens	40	40	100% 95%CI (91.19-100.00)
Paired HIV-1 positive venous whole blood specimens	100	100	100% 95%CI (96.38-100.00)
Paired HIV-1 positive plasma specimens	100	100	100% 95%CI (96.38-100.00)
HIV-2 positive plasma specimens	100	100	95%CI (96.38-100.00)

40 plasma specimens with known HIV-1 non-B subtypes were tested with the ONE STEP Anti-HIV (1&2) Test. All

Table 3 Test results on specimens with known HIV-1 non-B subtypes.

HIV aubtima		ONE STEP Ar	nti-HIV (1&2) Test	
HIV subtype	n	Positive	Negative	
A	5	5	0	
С	5	5	0	
D	5	5	0	
F	5	5	0	
G	4	4	0	
Н	3	3	0	
J	3	3	0	
K	3	3	0	
0	3	3	0	
CRF01_AE	4	4	0	
Total	40	40	0	

Performance on commercial seroconversion panels 6

ONE STEP Anti-HIV (1&2) Test shows good sensitivity in early infection on available commercial seroconversion

Specificity

Table 4 Performance on HIV negative specimens

Specimens Types		ONE STEP An	nti-HIV (1&2)	Test
эресинена турез	Negative	Positive	Total	Specificity
Venous whole blood specimens	500	0	500	100% 95%CI (99.26-100.00)
HIV negative EDTA plasma specimens	1000	0	1000	100% 95%CI (99.63-100.00)
Hospitalized patient specimens	200	0	200	100% 95%CI (98.17-100.00)
Pregnant women specimens	200	0	200	100% 95%CI (98.17-100.00)

Table 5 Performance on cross-reactive specimens

Interferent specimens	ONE STEP	Anti-HIV (1&2) Test	
interiorent aposimena	Negative	Positive	Total
Rheumatoid factor positive	10	0	10
anti-HCV positive	18	0	18
inti-HBs positive	18	0	18
anti-HBc positive	18	0	18
Anti-HTLV 1/2 positive	18	0	18
anti-HEV positive	18	0	18
Total	100	0	100

Precision

3 lots of ONE STEP Anti-HIV (1&2) Test were tested at three different labs by both professional and non-professional

3 lots of ONE STEP Anti-HIV (182) lest were tested at three different labs by both professional and non-professional operators to analyze the reproducibility and repeatability of the product.

All HIV negative specimens were non-reactive in the test; the difference between results of each medium/weak positive specimen obtained during the 5-day reproducibility study or the 20-day repeatability study was no greater than 2 intensity degrees according to the 11-degree internal QC system. ONE STEP Anti-HIV (182) Test showed good reproducibility and repeatability in the precision studies.

Specimen type

Sensitivity obtained from paired whole blood/plasma specimens obtained from 100 anti-HIV positive patients was 100% (see Table 2).

Specificity obtained from 500 whole blood specimens of blood donors was 100% (see Table 4).

Table 6 Serum and plasma comparison (HIV negative specimens)

	EDTA plasma	Heparin plasma	Citrate plasma	serum
Negative	25	25	25	25
Positive	0	0	0	0
Specificity	100%	100%	100%	100%

Table 7 Serum and plasma comparison (HIV positive specimens)

	EDTA plasma	Heparin plasma	Citrate plasma	serum
Negative	0	0	0	0
Positive	25	25	25	25
Specificity	100%	100%	100%	100%

The test results showed consistency between plasma (EDTA, Heparin and Citrate) and serum specimens.

Table 8 Venous and fingerstick whole blood comparison

Specimens Types	HIV positive specimens		HIV negative specimens	
оресинена турез	Venous whole blood	Fingerstick whole blood	Venous whole blood	Fingerstick whole blood
Negative	0	0	25	25
Positive	26	26	0	0
Concordance rate	100%	100%	100%	100%

According to Table 6, Table 7 and Table 8, ONE STEP Anti-HIV (1&2) Test can give consistent test results on serum. venous whole blood and fingerstick whole blood specin

- The kit is designed to detect antibodies against HIV-1 and HIV-2 in human serum, plasma, and whole blood. Specimens other than those specified may not supply accurate results and the device will not notify this kind of misuse to the user.

 The intensity of the test band does not necessarily correlate to the titer of antibody in the specimen

- The presence of the control band only indicates the flow of the conjugate.
 When a specimen containing high concentration of antibodies to HIV-1 or HIV-2 is tested on the device, the control band could be absent due to the test principle. In this case, please perform further analysis according to the section
- Tessult interpretation.

 Result interpretation.

 As this product is intended to detect antibodies against HIV from individuals, clinical diagnosis of HIV infection or AIDS should not be made only based on the results of the product.

 A negative result should not exclude the possibility of infection caused by HIV-1 or HIV-2. A negative result can also
- A negative result should not exclude the possibility of infection caused by HIV-1 of HIV-2. A negative result can occur in the following circumstances:

 Recently acquired HIV infection.

 Low antibody levels (e.g., early seroconversion specimens) which are below the detection limit of the test.

 HIV antibodies in the patient that do not react with specific antigens utilized in the assay configuration. In exceptional cases this may lead to an observation of negative results.

- Specimens are not properly stored.

- High concentrations of a particular analyte.
 Recently discovered type or subtype of HIV.
 For reasons above, care should be taken in interpreting negative results. Other clinical data (e.g., symptoms or risk factors) should be used in conjunction with the test results.
- · Positive specimens should be retested using another method and the results should be evaluated considering the Positive specimens should be retested using another method and the results should be evaluated considerity overall clinical evaluation before a diagnosis is made.
 The product is not validated on specimens from infants, children, or patients on antiviral treatment.
 Use of hemolytic specimens, heumatoid factors-containing specimens, hyperlipemia specimens or icteric specimens may lead to impairment to the test result.
 Only specimens with good fluidity and without hemolysis can be used with this test.

References

- 1. Blattner, W., Gallo, R.C. and Temin. H.M. HIV causes AIDS. Science. 241:515, 1988.
 2. Curran, J.W., Morgan. W.M., Hardy, A.M., et al. The epidemiology of AIDS: Current status and future prospects. Science 1985; 229: 1352-7.
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 5. Clinical and Laboratory Standards Institute. Procedures and Devices for collection of Diagnostic Capillary Blood
- Specimens, Approved Standard-Sixth Edition H4-A6.
- 6. Evaluation report, German Red Cross. July 2015.

Key to symbols used

itey to symbols use	· -		
À	CAUTION	*	TEMPERATURE LIMIT
**	KEEP AWAY FROM SUNLIGHT	*	KEEP DRY
***	MANUFACTURER	IVD	IN VITRO DIAGNOSTIC MEDICAL DEVICE
LOT	BATCH CODE	REF	CATALOGUE NUMBER
[]i	CONSULT INSTRUCTIONS FOR USE	\boxtimes	USE-BY DATE
2	DO NOT REUSE	®	DO NOT USE IF PACKAGE IS DAMAGED
Σ	CONTAINS SUFFICIENT FOR (N) TESTS	STERILE R	STERILIZED USING IRRADIATION



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