The PathFlow™ Norovirus Cassette is a rapid chromatographic immunoassay for the qualitative detection of Norovirus in human faeces.

What is the Test?
• The PathFlow™ Norovirus Cassette is a qualitative, lateral flow immunoassay for the detection of norovirus in human faeces.

What is the Disease?
• Noroviruses (NoV) are a genetically diverse group of single stranded RNA, nonenveloped viruses belonging to the Caliciviridae family.
• Three genogroups have been identified with the genus norovirus. Genogroup 1 and genogroup 2, associated with human infections and genogroup 3, associated with bovine and porcine infection.

Symptoms
• Noroviruses are a major cause of acute gastroenteritis worldwide, often causing explosive outbreaks in institutions.
• The symptoms of norovirus illness usually include nausea, vomiting, diarrhoea, and some stomach cramping. Sometimes people additionally have a low-grade fever, chills, headache, muscle aches, and a general sense of tiredness.
• The illness is acute and usually mild, although it has caused fatalities among the frail and elderly. It is also self-limiting, following an incubation period of 24-48 hours although cases can occur within 12 hours of exposure; symptoms typically resolve after 1-2 days.

Mortality/Morbidity – Clinical Implications
• Noroviruses are highly contagious, with an inoculum of as few as ten particles being able to cause infection.
• Transmission occurs through ingesting contaminated food/water and by person-to-person spread; predominantly faecal-oral but may be airborne due to aerosolization of vomitus.
• The ability of noroviruses to cause outbreaks in institutions has become a major public health issue, infection can be associated with restaurants and institutions as diverse as nursing homes, hospitals and elite sporting camps.
• Infections in infants, elderly or frail patients can be fatal if left untreated.

• Complete system, no additional reagents required.
• Simple and easy to use.
• Rapid result offered. Available after 15 minutes or within 20 minutes.
• In-built procedural control.
• Can be used with both solid and liquid faecal specimens.
• Simultaneous testing for genogroups 1 & 2.
• Point-of-care ICD test.

www.microgenbioproducts.com
Why use PathFlow™

- The PathFlow™ Norovirus Cassette provides rapid test results allowing for improved decision-making abilities; improving patient management and outcomes.
- Swift norovirus identification and detection is pivotal for the prevention and management of outbreaks; especially in a clinical/healthcare environment.

Performance – Tested vs. RT-PCR

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sensitivity</td>
<td>95.7%</td>
</tr>
<tr>
<td>Specificity</td>
<td>91.7%</td>
</tr>
<tr>
<td>Accuracy</td>
<td>94.3%</td>
</tr>
</tbody>
</table>

Ordering Information

- Code – M596CE
- Description – PathFlow™ Norovirus
- Size – 25 Test Kits
- Storage – 2°C-30°C

Procedure

1. Collect the faeces
2. Place the applicator into the dilution buffer and mix well
3. Leave the tube alone for 2 minutes
4. Read the result after 15 minutes, do not read after 20 minutes.

Step 1. Collect sufficient quantity of faeces (1-2ml/g). Optimum results will be obtained if the assay is performed within 6 hours.

Step 2. Solid Specimens – Unscrew the cap on the sample collection tube and collect approximately 50mg of faeces. Liquid Specimens – Hold the dropper vertically, aspirate faecal specimens and then transfer 2 drops (approximately 50µl) into specimen collection tube. Tighten the cap on the specimen collection tube and shake vigorously, leave for 2 minutes. Bring the pouch to room temperature before opening it, remove the cassette and use within one hour.

Step 3. Hold the specimen collection tube upright and open the cap onto the specimen collection tube. Invert the collection tube and transfer 2 full drops of extracted specimen (approximately 80µl) to the specimen well on the test cassette and start the timer.

Step 4. Read the result after 15 minutes, do not read after 20 minutes.

Distributed by: