**Antibody Index Interpretation**

- **<0.9**  No detectable antibody to CMV IgG by ELISA.
- **0.9-1.1** Borderline positive. Follow-up testing is recommended if indicated.
- **>1.1** Detectable antibody to CMV IgG by ELISA.

**LIMITATIONS OF THE TEST**

1. Lipemic or hemolyzed samples may cause erroneous results.

**REFERENCES**

5. Schmidt CA; Oettle H; Peng R; Neuhaus P; Blumhardt G; Lohmann R; Wilborn F; Osthoff K; Oertel J; Timm H; et al. Comparison of polymerase chain reaction from plasma and buffy coat with antigen detection and occurrence of immunoglobulin M for the demonstration of cytomegalovirus infection after liver transplantation. Transplantation 1995;59(8):1133-8.

**INTENDED USE**

The CMV IgG ELISA Kit is intended for the detection of IgG antibody to Cytomegalovirus (CMV) in human serum or plasma. For research use only. Not for diagnostic purposes.

**SUMMARY AND EXPLANATION**

Cytomegalovirus (CMV) is a member of the herpes group of viruses. Most adults and children who catch CMV have no symptoms and are not harmed by the virus. CMV infection is of clinical significance primarily in pregnant women, newborn infants with possible congenital infection, immunosuppressed transplant patients and individuals with AIDS. CMV is so prevalent as over 60% of people catch the infection at some time in their lives. Significant increases in CMV IgG antibody by ELISA suggest recent infection or reactivation of a latent CMV infection. ELISA can detect CMV IgM antibody in both primary CMV infections (93-100%) and in reactivated infection (40%). An IgM response may be reduced or absent in immunocompromised subjects with active infection. In transplant subjects the CMV infection can be associated with higher morbidity and mortality.

**PRINCIPLE OF THE TEST**

Diluted serum is added to wells coated with purified antigen. IgG specific antibody, if present, binds to the antigen. All unbound materials are washed away and the enzyme conjugate is added to bind to the antibody-antigen complex, if present. Excess enzyme conjugate is washed off and substrate is added. The plate is incubated to allow the oxidation of the substrate by the enzyme. The intensity of the color generated is proportional to the amount of IgG specific antibody in the sample.

### MATERIALS PROVIDED

<table>
<thead>
<tr>
<th>Item</th>
<th>96 Tests</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Microwells coated with CMV antigen</td>
<td>12x8x1</td>
</tr>
<tr>
<td>2. Sample Diluent: 1 bottle (ready to use)</td>
<td>22 ml</td>
</tr>
<tr>
<td>3. Calibrator: 1 Vial (ready to use)</td>
<td>1 ml</td>
</tr>
<tr>
<td>4. Positive Control: 1 vial (ready to use)</td>
<td>1 ml</td>
</tr>
<tr>
<td>5. Negative Control: 1 vial (ready to use)</td>
<td>1 ml</td>
</tr>
<tr>
<td>6. Enzyme conjugate: 1 bottle (ready to use)</td>
<td>12 ml</td>
</tr>
<tr>
<td>7. TMB Substrate: 1 bottle (ready to use)</td>
<td>12 ml</td>
</tr>
<tr>
<td>8. Stop Solution: 1 bottle (ready to use)</td>
<td>12 ml</td>
</tr>
<tr>
<td>9. Wash concentrate 20X: 1 bottle</td>
<td>25 ml</td>
</tr>
</tbody>
</table>
MATERIALS NOT PROVIDED
1. Distilled or deionized water
2. Precision pipettes
3. Disposable pipette tips
4. ELISA reader capable of reading absorbance at 450 nm
5. Absorbance paper or paper towel
6. Graph paper

STORAGE AND STABILITY
1. Store the kit at 2-8°C.
2. Keep microwells sealed in a dry bag with desiccants.
3. The reagents are stable until expiration of the kit.
4. Do not expose test reagents to heat, sun or strong light.

WARNINGS AND PRECAUTIONS
1. Potential biohazardous materials:
   - The calibrator and controls contain human source components which have been tested and found non-reactive for hepatitis B surface antigen as well as HIV antibody with FDA licensed reagents. However, there is no test method that can offer complete assurance that HIV, Hepatitis B virus or other infectious agents are absent. These reagents should be handled at the Biosafety Level 2, as recommended in the Centers for Disease Control/National Institutes of Health manual, “Biosafety in Microbiological and Biomedical Laboratories.”

2. This kit is designed for research use only.
3. Optimal results will be obtained by strict adherence to the test protocol. Precise pipetting as well as following the exact time and temperature requirements is essential.
4. Do not pipette by mouth. Do not smoke, eat, or drink in the areas in which specimens or kit reagents are handled.
5. The components in this kit are intended for use as an integral unit. The components of different lots should not be mixed.
6. Control sera and sample diluent contain preserved with sodium azide. Sodium azide may react with lead and copper plumbing to form explosive metal azide. On disposal, flush with a large volume of water.

SPECIMEN COLLECTION AND HANDLING
1. Collect blood specimens and separate the serum.
2. Specimens may be refrigerated at 2-8°C for up to seven days or frozen for up to six months. Avoid repetitive freezing and thawing.

REAGENT PREPARATION
Prepare 1X Wash buffer by adding the contents of the bottle (25 ml, 20X) to 475 ml of distilled or deionized water. Store at room temperature (18-26 °C).

ASSAY PROCEDURE
Bring all specimens and kit reagents to room temperature (18-26 °C) and gently mix.
1. Place the desired number of coated strips into the holder

CALCULATION OF RESULTS
1. Check Calibrator Factor (CF) value on the calibrator bottle. This value might vary from lot to lot. Make sure you check the value on every kit.
2. Calculate the cut-off value: Calibrator OD x Calibrator Factor (CF).
3. Calculate the Ab (Antibody) Index of each determination by dividing the O.D. value of each sample by cut-off value.

Example of typical results:
Calibrator mean OD = 0.8
Calibrator Factor (CF) = 0.5
Cut-off Value = 0.8 x 0.5 = 0.400
Positive control O.D. = 1.2
Ab Index = 1.2 / 0.4 = 3
Sample O.D. = 1.6
Ab Index = 1.6 / 0.4 = 4.0

QUALITY CONTROL
The test run may be considered valid provided the following criteria are met:
1. The O.D. of the Calibrator should be greater than 0.250.
2. The Ab index for Negative control should be less than 0.9.
3. The Ab Index for Positive control should be greater than 1.2.

INTERPRETATION
The following is intended as a guide to interpretation of CMV IgG test results; each laboratory is encouraged to establish its own criteria for test interpretation based on sample populations encountered. For research use only. Not for diagnostic purposes.