Coronavirus are enveloped non-segmented positive-sense RNA viruses and belong to Coronaviridae family. Human-to-human transmission of the SARS-CoV-2 has been confirmed, even in the incubation period without symptoms, and the virus could cause severe respiratory illness like those SARS-CoV produced. Although the pneumonia is the principal illness associated, a few patients have developed severe pneumonia, pulmonary edema, acute respiratory distress syndrome, or multiple organ failure and death. Centers of Disease Control and Prevention (CDC) believes that symptoms of SARS-CoV-2 may appear in as few as 2 days or as long as 14 days after exposure, being the most common fever or chills, cough, fatigue, anorexia, myalgia and dyspnea.

Influenza viruses belong to the Orthomyxoviridae family and cause the majority of viral lower respiratory tract infections. Influenza A and B are a significant cause of morbidity and mortality worldwide, considering that elderly and immunocompromised individuals are especially at risk of developing severe illness and complications such as pneumonia.

Human respiratory syncytial viruses (RSV) belong to the Paramyxoviridae family and are the most important viral agents of acute respiratory infections. RSV is an enveloped, nonsegmented, negative, single stranded linear RNA genome virus. Respiratory syncytial virus is a common contributor of respiratory infections causing bronchitis, pneumonia, and chronic obstructive pulmonary infections in people of all ages.

The SARS-CoV-2, Influenza and RSV viruses can affect the entire population in a wide age range, although it is true that the elderly and immunocompromised people are especially at risk of developing serious diseases and complications.

These viruses may rise very similar symptoms, such as fever, cough and headache. For this reason, it is essential to obtain an adequate diagnosis as soon as possible, since in the case of SARS-CoV-2, as it's an emerging pathogen, it is vital to take containment measures and prevent its spread in the population.

“Ready & Easy-to-use” kits.
Lyophilised product
Transport and storage at room temperature.
Shell-life: 24 months
Validated according to ISO 13485 and CE marked
VIASURE SARS-CoV-2, Flu & RSV Real Time PCR Detection Kit

VIASURE SARS-CoV-2, Flu & RSV Real Time PCR Detection Kit is designed for the identification of SARS-CoV-2, Influenza A/B (Flu A/B) and/or Human Respiratory Syncytial Virus A/B (RSV A/B) in respiratory samples.

The detection is done in one step real time RT format where the reverse transcription and the subsequent amplification of specific target sequence occur in the same reaction well. The isolated RNA target is transcribed generating complementary DNA by reverse transcriptase which is followed by the amplification of two conserved regions of N gene (N1 and N2) for SARS-CoV-2, a conserved region of the M1 gene for Flu A/B and a conserved region of the N gene for RSV A/B using specifics primers and a fluorescent-labeled probe.

VIASURE SARS-CoV-2, Flu & RSV Real Time PCR Detection Kit has a detection limit of 20 genome copies/rxn for SARS-CoV-2, 5 genome copies/rxn for Flu A, 20 genome copies/rxn for Flu B and 10 genome copies/rxn for RSV (Figures 1, 2, 3, 4 and 5 run on the Bio-Rad CFX96™ Real-Time PCR Detection System).

References - VIASURE SARS-CoV-2, Flu & RSV Real Time PCR Detection Kit -

6 x 8-well strips, low profile________VS-CFR106L
12 x 8-well strips, low profile________VS-CFR112L
96-well plate, low profile________VS-CFR113L
2ml Tube (4 tubes x 24rxn)________VS-CFR196T
6 x 8-well strips, high profile________VS-CFR106H
12 x 8-well strips, high profile________VS-CFR112H
96-well plate, high profile________VS-CFR113H

For more information and use procedure, read the instructions for use included in this product.