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# **PROTOCOL SYNOPSIS**

## I. Objectives

To evaluate the performance of "Formosa One Sure SARS-CoV-2 Ag Rapid Test Kit" in comparison with RT-PCR for detecting Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2).

# **II.** Executive laboratory

The laboratory must be certified by CLIA or CAP or ISO 17025.

# III. Endpoints

1. Primary endpoint:

To evaluate the overall consistency (positive and negative samples) between Formosa One Sure SARS-CoV-2 Ag Rapid Test Kit and RT-PCR in nasopharyngeal (NP) and oropharyngeal (OP) swab specimens tested individually from subjects

- 2. Secondary endpoints:
- To evaluate the specificity between Formosa One Sure SARS-CoV-2 Ag Rapid Test Kit and RT-PCR in nasopharyngeal (NP) and oropharyngeal (OP) swab specimens tested individually from subjects
- b. To evaluate the sensitivity between Formosa One Sure SARS-CoV-2 Ag Rapid Test Kit and RT-PCR in nasopharyngeal (NP) and oropharyngeal (OP) swab specimens tested individually from subjects

# IV. Selection criteria

1. Inclusion criteria

For subjects who can donate positive specimen:

- Subjects who have been confirmed positive results of SARS-CoV-2 using RT-PCR testing within 7 days prior to enrollment
- (2) Subjects who can understand the requirements of the study and provide informed consent

### For subjects who can donate negative specimen:

- (1) Subjects who DO NOT suffer from Coronavirus disease 2019 (COVID-19)
- (2) Subjects who can understand the requirements of the study and provide informed consent
- 2. Exclusion criteria
- (1) Subjects who refuse to undergo study procedures
- (2) Clinical condition requiring urgent medical assessment

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#### V. Study procedures

This is an open-label study to evaluate the clinical performance of an *in vitro* diagnostic device—Formosa One Sure SARS-CoV-2 Ag Rapid Test Kit for detecting Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2).

We aim to compare the consistency between Formosa One Sure SARS-CoV-2 Ag Rapid Test Kit and RT-PCR, the golden standard for the diagnosis of COVID-19, in detecting the infection of SARS-CoV-2.

Subjects who have been diagnosed with COVID-19 by RT-PCR OR subjects who do not have COVID-19 will be enrolled. For each subject, the specimen can be collected via nasopharyngeal (NP) swab and/or oropharyngeal (OP) swab specimens by investigators or study personnel. For either region (NP or OP), the specimen will be collected twice one for Formosa One Sure SARS-CoV-2 Ag Rapid Test Kit and one for RT-PCR. These specimens will be separately measured using Formosa One Sure SARS-CoV-2 Ag Rapid Test Kit and RT-PCR. The results of Formosa One Sure SARS-CoV-2 Ag Rapid Test Kit will be compared with RT-PCR testing separately for NP and OP specimens

Figure 1 presents the overall study design.



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VI. Statistics			
1. Primary hypothesis:	□superiority	□non-inferiority	
	⊠equivalence	□other	
2. Sample size:			
<ul> <li>Enrolled subjects: approximately 60 – 120 subjects</li> </ul>			

 Evaluable samples: for NP specimens: at least 30 positive samples\* and 30 negative samples for OP specimens: at least 30 positive samples\* and 30 negative samples \*Evaluable positive sample: RT-PCR also reveals positive in this study.

3. Analyzed samples: all evaluable specimens

4. Statistical methods:

All eligible samples will be included in the analysis for primary and secondary endpoints. Positive and negative percent agreement between Formosa One Sure SARS-CoV-2 Ag Rapid Test Kit and RT-PCR testing results will be calculated. Agreement will also be calculated for the discriminatory assay results. Agreement will be calculated as shown below and reported as a percentage. The percentage will be reported with a 95% binomial two-sided confidence interval by Clopper-Pearson (Exact) method.

	Γ	RT-PCR	
		Positive	Negative
Test product	Positive	А	В
	Negative	С	D

For primary endpoint:

Overall consistency (positive and negative samples) will be calculated as follows:  $100\% \times (a + d) / (a + b + c + d)$ 

For secondary endpoints:

- Specificity (true negative rate):  $100\% \times d / (b + d)$ 

- Sensitivity (true positive rate):  $100\% \times a / (a + c)$ 

5. Planned interim analysis: □yes ⊠no



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#### VII. Assessment procedure

- Specimen collection and viral detection process
- 1. After providing the signed informed consent, subjects will be swabbed to collect two NP and/or OP specimens. (Note: Test specimens immediately. If a delay in testing is expected, or store specimens at  $2 8^{\circ}$ C for up to 24 hours after collection.)
- 2. One of the specimens collected from the same subject will be tested by RT-PCR according to standard procedures.
- The other one specimen will be tested using Formosa One Sure SARS-CoV-2 Ag Rapid Test Kit according to the instruction as below.
- Compare the results between RT-PCR and Formosa One Sure SARS-CoV-2 Ag Rapid Test Kit

#### Instruction for use

Figure 2 displays the instruction for Formosa One Sure SARS-CoV-2 Ag Rapid Test Kit.

- 1. Bring all materials and specimens to room temperature.
- 2. Put the Elution Tube into Racks. Vertically add 10 drops of Elution Buffer to the Elution Tube. (see Step 1)
- 3. Put the swab to be tested into Elution Tube. Rotate the swab vigorously (without making a lot of bubbles) ten (10) times in the liquid. (see Step 2)
- 4. Press the swab against the side of the Elution Tube and turn as you remove it from the tube. This removes sample from the swab. (see Step 3)
- 5. Discard the swab into a container intended for contagious material.
- 6. Close the cap. (see Step 4)
- 7. Remove the test card from the sealed foil pouch and place it on a dry surface.
- 8. Hold the Elution Tube in a vertical position over the sample well of the test card and deliver 3 drops of sample into the sample well. (see Step 5)
- 9. Place the test card flat on a dry surface.
- 10. Read the results between 15 and 20 minutes after adding the sample.

