



Lyher Novel Coronavirus (COVID-19) Antigen Test Kit
(Colloidal Gold)

Lyher Novel Coronavirus (COVID-19) Antigen Test Kit (Colloidal Gold)

Clinical Evaluation Report

Product Name: Lyher kit Novel Coronavirus (COVID-9) Antigen Test Kit (Colloidal Gold)

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Summary

According to the *Guidelines for Clinical Trials of In vitro diagnostic reagents (No.16 of 2014)*, We entrusted Medical institutions in Liaoning, Heilongjiang, Beijing and Xinjiang to perform the clinical evaluation of Lyher Novel Coronavirus (COVID-9) Antigen Test Kit (Colloidal Gold) (hereinafter referred to as “Lyher kit”) developed by Hangzhou Laihe Biotech Co.,Ltd.

The clinical trial was compared with the clinical PCR test results and clinical diagnosis results to investigate the consistency of the products of Hangzhou Laihe Biotech Co.,Ltd with the clinical diagnosis results.

A total of 216 patients were collected in this clinical trial, including 118 confirmed cases and 98 excluded cases. Compared with the results of clinical diagnosis, the clinical sensitivity of Lyher kit was 95.76%, the clinical specificity of Lyher kit was 98.98%, the total coincidence rate was 97.22%, Kappa=0.944. There was no statistically significant difference between the test results of Lyher kit and the clinical diagnosis results, the results of Lyher kit were highly consistent with the results of clinical diagnosis.

Conclusion: Lyher Novel Coronavirus (COVID-19) Antigen Test Kit (Colloidal Gold) owned by Hangzhou Laihe Biotech Co.,Ltd showed no statistically significant difference between Lyher kit test results and the clinical diagnosis results, which were highly consistent.

Abbreviation

I . Suspected case

Conduct a comprehensive analysis combining the following epidemiological history and clinical manifestations:

1. Epidemiological history
 - a. Travel or residence history in the area where there are confirmed cases within 14 days prior to onset of the disease;
 - b. Have contact with SARS-CoV-2 infected person (with a positive NAT (nucleic acid test) of SARS-CoV-2) within 14 days before onset of illness
 - c. Patients with fever or respiratory symptoms who had come into contact with patients from the area where there are confirmed cases, or from communities with case reports, within 14 days before onset of illness;
 - d. Cluster incidence (2 or more cases of fever and/or respiratory symptoms within 2 weeks in small areas such as homes, offices, school classes, etc.).
2. Clinical manifestation
 - a. Fever and/or respiratory symptoms;
 - b. Have the above COVID-19 imaging characteristics;
 - c. In the early stage of the disease, the total number of white blood cells was normal or decreased, and the lymphocyte count was normal or decreased.

The patient who has any one of the epidemiological histories and be conformed to any one of the clinical manifestations. Or who has no clear epidemiological history, but be conformed to have any 2 of the clinical manifestations.

II . Confirmed cases (positive cases)

Suspected cases with one of the following etiological or serological evidence:

1. A positive NAT of SARS-CoV-2;
2. Viral gene sequencing is highly homologous with the SARS-CoV-2 known;
3. Specific IgM and IgG antibodies to SARS-CoV-2 were positive in serum; specific IgG antibody to SARS-CoV-2 changed from negative to positive; or the amount of IgG antibodies increased by 4 times or more in the recovery stage than in the symptom onset stage.

Introduction

The incubation period of SARS-CoV-2 infection is 1-14 days, with an average of about 5 days. Some of those infected may have no symptoms at all but still be contagious; Most of the patients will rapidly develop into severe pneumonia, respiratory distress, asphyxia, etc. A small proportion of patients infected with the SARS-CoV-2 may die. In addition, SARS-CoV-2 has been reported to attack the nervous system and the male reproductive system. Therefore, SARS-CoV-2 infection early screening is of great significance for controlling the epidemic and the transition from mild to severe.

SARS-CoV-2 antigen can be detected approximately 0 to 3 days after infection (with or without symptoms), which is earlier and more direct than antibody detection. Compared to nucleic acid detection is faster and more convenient.

Objective

The objective of this clinical trial is to compare a certain number of clinical samples with the clinical diagnosis results for clinical single-blind detection, to evaluate the sensitivity, specificity and other indicators of the product, and to verify the accuracy of the product in clinical determination, so as to determine whether it meets the requirements of safety and effectiveness.

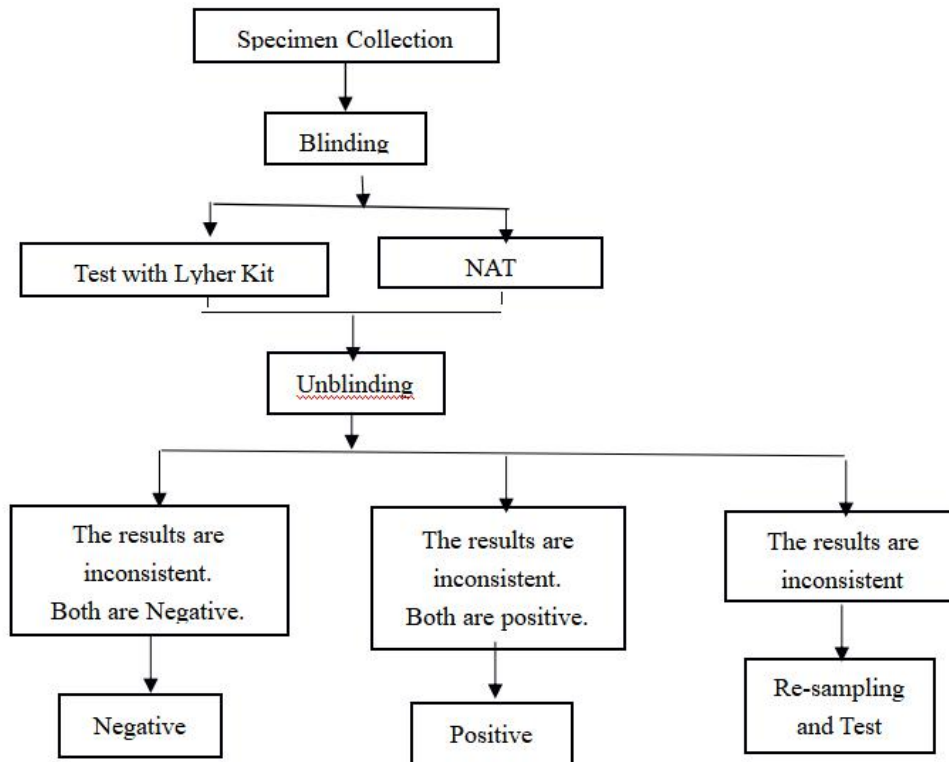
Design of the trial

1. Overall design and scheme description of the trial

A single blind method was adopted in this clinical trial to evaluate the sensitivity and specific coincidence rate of this product and verify the accuracy of this product in clinical determination by comparing with the clinical diagnosis results and PCR test results.

At least 2 nasopharyngeal samples and 2 oropharyngeal swabs samples shall be collected at the same time for each subject after enrollment, one for PCR detection and one for antigen detection. Two samples will be sent to the person who is in charge of statistics at the trial site to be blinded. After that, different operators will test these two blinded samples with the Kit pending to be evaluated and comparator PCR Test according to the instructions of the corresponding methods.

The test procedure is as follows:



Note: For the collected retained samples, the statistical results in this clinical trial are the PCR test results immediately after sampling. The retained samples used for antigen test are frozen samples stored at -70°C after treatment with the buffer of Lyher kit.

The test results of Lyher kit are interpreted according to the instructions. When the results are consistent with the NAT and clinical results, the test results are recorded; while they are inconsistent with the NAT and clinical results, they were judged according to the clinical diagnosis results. According to the test results, the clinical application performance of Lyher kit was evaluated, and the equivalence and consistency of Lyher kit with NAT results and clinical results were investigated.

2. Trial design and study method selection

(1) Sample size and sample size determination basis

Since the COVID-19 outbreak in China was basically over by the time this trial was conducted, sufficient positive samples should be covered in this evaluation, such as no less than 30 positive samples of nasopharyngeal/oropharyngeal swabs.

(2) Sample selection criteria, inclusion criteria, exclusion criteria

♦ **Selection basis**

This product is intended used for qualitatively testing SARS-CoV-2 antigens in human specimens collected by nasopharyngeal/oropharyngeal swab.

Clinical study samples can be selected from outpatients' or inpatients' specimens collected by nasopharyngeal or oropharyngeal swab that meet the inclusion criteria.

♦ **Inclusion criteria**

- 1) The samples were COVID-19 confirmed cases (including some cases in convalescence) and excluded cases
- 2) Clinical patients with different disease progression: samples of related cases including at the early stage, middle stage, late stage/convalescence, etc.
- 3) All cases should be suspected or confirmed
- 4) There is no limitation on age and gender if sufficient samples can be taken as required

♦ **Exclusion criteria:**

- 1) The collection time of samples is not clear, no nucleic acid test results or clinical information is missing;
- 2) Insufficient sample size due to error during test operation;
- 3) Samples such as those contaminated during specimen preservation were found before the test operation;
- 4) Improperly preserved specimens should be excluded.

♦ **Criteria for ruling out the abnormal samples from the selected samples**

- 1) Samples that do not meet the requirements of the specimen collection method;
- 2) Samples that have been dried or contaminated;
- 3) The diagnostic information of the sample is found to be missing or untraceable before statistics.
- 4) Samples with incomplete information

(3) Collection, preservation and transportation of specimens:

♦ **Specimen collection**

The target specimens of Lyher kit can be collected by nasopharyngeal/oropharyngeal swab.

Collection and treatment of samples: Samples used for assessment tests shall be sampled and treated as required in the assessment reagent manual. Samples used for nucleic acid testing refer to the control reagent specification for sampling and treatment.

Samples used for antigen detection should not be stored for more than 4 hours before treatment, at room temperature for more than 1 hour after treatment, at 2-8°C for less than 4 hours, and under -70°C for a long time.

Samples used for nucleic acid testing shall be processed and stored according to the instructions for the control reagent.

♦ **Specimens sent for test**

After a certain number of specimens are collected, they are uniformly blinded, and then tested with Lyher kit.

3. The determination of the comparative method

In order to fully evaluate the clinical performance of this product, NAT and clinical diagnosis results were used as the control.

(1) Product information used in clinical trials:

	The reagent to be evaluated	Comparator
Product Name	SARS-CoV-2 (COVID-19) Antigen Test Kit(Colloidal Gold)	1. Real-Time Fluorescent RT-PCR Kit for Detecting SARS-2019-nCoV of BGI Genomics Co. Ltd. 2. SARS-CoV-2 (2019-nCoV) Nucleic Acid Diagnostic Kit (PCR-Fluorescence Probing) of Sansure BioTech Inc
Specifications	25 Pcs/Box	
Validity& Storage	Stored in 2~30°C dry place away from light, valid for 18 months. Shall be used as soon as possible within 30 minutes after opening the bag.	
Registration	In Pending	
Batch No.	2006003-A	
Manufacturer	Hangzhou Laihe Biotech Co.,Ltd.	

4. Method of Quality Control

◆ On-site quality control of clinical trials

In the course of this study, clinical supervisors appointed by the sponsor will make regular on-site inspection visits to the clinical trial research unit to ensure that all contents of the study protocol are strictly observed and the study data are filled in correctly. Participating researchers must undergo unified training, unified recording methods and judgment standards. The whole clinical trial process should be carried out under strict operation. All observations and findings in Clinical trials should be verified to ensure the reliability of the data and to ensure that the conclusions in clinical trials are derived from the original data. There are corresponding data management measures in clinical trial and data processing stage.

◆ Quality control of clinical specimens

- 1) Read the instructions carefully before the test, and the test operation shall be carried out strictly according to the instructions.
- 2) The collection of specimens shall be carried out in strict accordance with relevant clinical operation standards.

◆ Quality control of reagents in clinical trials

- 1) Read the reagent instructions carefully before the test, and the test operation shall be carried out strictly according to the instructions.
- 2) Negative and positive controls were set for each batch of tests. If no positive results were found during the positive quality control, the test would be invalid.
- 3) To read and interpret the result at a specified time.
- 4) All reagents used in the test are kept strictly in accordance with the manufacturer's requirements and used within the validity period.

5. Clinical evaluation method

The reagents and clinical results are mainly represented in a four-grid table (as shown in Table 1). The table is self-explanatory, that is, it has table titles, table notes and number of cases

SPSS software was used to conduct kappa consistency analysis on the test results of the assessment reagent in clinical results. Kappa value (k) was determined as $k > 0.75$, showing good consistency. $0.40 \leq k \leq 0.75$, good consistency; $K < 0.40$, poor consistency.

6. Statistical analysis of clinical trial data

A single blind method was used in this clinical trial. Conduct conformity analysis, consistency analysis, correlation analysis and statistical difference analysis on the experimental data, and calculate clinical sensitivity, clinical specificity and total compliance rate; Calculate the kappa value.

(1) General analysis:

- The clinical sensitivity and specificity, total coincidence rate and 95% confidence interval (as compared with clinical diagnosis) of the test reagents were calculated as follows:

Table 1. Test Results of _____ Specimens

Lyher kit	Clinical Results		Total
	Positive (+)	Negative (-)	
Positive (+)	A	B	A+B
Negative (-)	C	D	C+D
Total	A+C	B+D	A+B+C+D

Clinical sensitivity: $A/(A+C) \times 100\%$

Clinical specificity: $D/(B+D) \times 100\%$

Total consistent rate: $(A+D)/(A+B+C+D) \times 100\%$

The calculation formula of 95% confidence interval is: $p \pm 1.96 \times [p(1-p)/n]^{1/2}$ (where p is clinical sensitivity, clinical specificity or total coincidence rate, n is the number of samples, if p value is 100%, $p=99.99\%$ will be used for analysis).

- SPSS software was used to conduct kappa consistency analysis (to report specific kappa values) on the data in table 1, to investigate the consistency between the assessment reagent and clinical diagnosis and nucleic acid test results, as well as the consistency between the assessment reagent and clinical diagnosis results.
- Cross interference test: Relevant tests were carried out on the specimens containing interfering substances and compared with the clinical diagnosis results, so as to verify the specificity of the assessment reagent from the clinical perspective.

7. Provisions for revision of clinical trial protocols

- In general, the clinical trial protocol should not be changed. Any modification of the scheme during the test shall be explained, and the time, reason, process and whether the change is recorded shall be explained in detail and its impact on the evaluation of the whole study result shall be demonstrated.
- The above modification instructions shall be submitted in written form by the registration applicant, and shall be put on record in the administrative body of the trial undertaking unit after being confirmed by each clinical implementation unit.

Clinical trial results and analysis

1. General analysis

A total of 216 specimens were collected in this study, including 118 excluded cases and 98 confirmed cases. The following is the data analysis of inclusion and clinical evaluation:

Table 2 Basic information of Specimens

Type of Specimen	Index	Item	Amount
Oropharyngeal swab	Gender	Male	74
		Female	70
	Age	<20	4
		20-40	57
		40-60	62
		60-80	20
		≥80	1
		Confirmed cases	85
	Excluded cases	59	
	Nasopharyngeal swab	Gender	Male
Female			30
Age		<20	4
		20-40	21
		40-60	27
		60-80	20
		≥80	0
Confirmed cases		33	
Excluded cases	39		

Table 3 Total Results of Lyher kits (216)

Test Results of Lyher kit	Clinical diagnosis (PCR results)		
	Positive(+)	Negative(-)	Total
Positive(+)	113	1	114
Negative(-)	5	97	102
Total	118	98	216

Clinical Sensitivity: $113 / (113+5) \times 100\% = 95.76\%$
 95% CI: $p \pm 1.96 \times [p(1-p) / n]^{1/2} = [92.13\%, 99.40\%]$
 Clinical Specificity: $97 / (97+1) \times 100\% = 98.98\%$
 95% CI: $p \pm 1.96 \times [p(1-p) / n]^{1/2} = [96.99\%, 100.00\%]$
 Total coincidence rate: $(113+97) / (113+5+1+97) \times 100\% = 97.22\%$
 95% CI: $p \pm 1.96 \times [p(1-p) / n]^{1/2} = [95.03\%, 99.41\%]$
 Consistency analysis by the value of Kappa: $Kappa = 0.944 (K > 0.75)$

It can be considered that the Lyher kit and clinical diagnosis results are consistent.

2. Correlation Analysis

2.1 Comparison of fresh samples with frozen samples

A total of 216 samples were collected in this clinical evaluation, including 159 fresh samples and 57 frozen samples. The following is the data analysis of fresh samples and frozen samples:

- Results of fresh samples

Table 4 Results of fresh specimens

Test Results of Lyher kit	Clinical diagnosis (PCR results)		
	Positive (+)	Negative (-)	Total
Positive (+)	69	1	70
Negative (-)	4	85	89
Total	73	86	159

Clinical Sensitivity: $69 / (69+4) \times 100\% = 94.52\%$
 95% CI: $p \pm 1.96 \times [p(1-p) / n]^{1/2} = [89.30\%, 99.74\%]$
 Clinical Specificity: $85 / (85+1) \times 100\% = 98.84\%$
 95% CI: $p \pm 1.96 \times [p(1-p) / n]^{1/2} = [96.57\%, 100.00\%]$
 Total coincidence rate : $(69+85) / (69+4+1+85) \times 100\% = 96.86\%$
 95% CI: $p \pm 1.96 \times [p(1-p) / n]^{1/2} = [94.14\%, 99.57\%]$
 Consistency analysis by the value of Kappa: $Kappa = 0.936 (K > 0.75)$.

It can be considered that the examination reagents and clinical diagnosis results are consistent. According to the results of 159 fresh samples, there was no statistically significant difference between the test results of the fresh samples and the clinical diagnosis results with the reagents to be tested. $Kappa = 0.936 (K > 0.75)$, indicating a high consistency between the Lyher kits and the clinical diagnosis results.

- Results of frozen specimens

Table 5 Results of frozen specimens

Test Results of Lyher kit	Clinical diagnosis (PCR results)
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	Positive (+)	Negative (-)	Total
Positive (+)	44	0	44
Negative (-)	1	12	13
Total	45	12	57

Clinical Sensitivity: $44 / (44+1) \times 100\% = 97.78\%$

95% CI: $p \pm 1.96 \times [p(1-p) / n]^{1/2} = [93.47\%, 100.00\%]$

Clinical Specificity: $12 / (12+0) \times 100\% = 100.00\%$

95% CI: $p \pm 1.96 \times [p(1-p) / n]^{1/2} = [99.42\%, 100.00\%]$

Total coincidence rate : $(44+12) / (44+1+0+12) \times 100\% = 98.25\%$

95% CI: $p \pm 1.96 \times [p(1-p) / n]^{1/2} = [94.84\%, 100.00\%]$

Consistency analysis by the value of Kappa: $Kappa = 0.949 (K > 0.75)$,

It can be considered that the Lyher kit and clinical diagnosis results are consistent. According to the statistical results of the data of 57 frozen samples, there was no statistically significant difference between the test results of the frozen samples and the clinical diagnosis results with the reagents to be tested. $Kappa = 0.949 (K > 0.75)$, indicating a high consistency between the Lyher kit and the clinical diagnosis results.

2.2 Comparison of results of NP and OP specimens

A total of 216 samples were collected in this clinical evaluation, including 144 oropharyngeal (OP) swab and 72 or nasopharyngeal (NP) swab specimens. Data analysis of pharyngeal swab samples and nasal swab samples is as follows:

- Analysis of oropharyngeal (OP) swab specimens

Table 6 Analysis of oropharyngeal (OP) swab specimens

Test Results of Lyher kit	Clinical diagnosis(PCR results)		
	Positive(+)	Negative(-)	Total
Positive(+)	85	1	86
Negative(-)	0	58	58
Total	85	59	144

Clinical Sensitivity: $85 / (85+0) \times 100\% = 100.00\%$

95% CI: $p \pm 1.96 \times [p(1-p) / n]^{1/2} = [99.78\%, 100.00\%]$

Clinical Specificity: $58 / (58+1) \times 100\% = 98.31\%$

95% CI: $p \pm 1.96 \times [p(1-p) / n]^{1/2} = [95.01\%, 100.00\%]$

Total coincidence rate : $(85+58) / (85+0+1+58) \times 100\% = 99.31\%$

95% CI: $p \pm 1.96 \times [p(1-p) / n]^{1/2} = [97.95\%, 100.00\%]$

Consistency analysis by the value of Kappa: $Kappa = 0.986 (K > 0.75)$.

It can be considered that the Lyher kit and clinical diagnosis results are consistent. According to the

statistical results of 144 pharyngeal swab samples, there was no statistically significant difference between the test results of pharyngeal swab samples and the clinical diagnosis results with the reagents to be tested. Kappa=0.986(K>0.75), indicating a high consistency between the Lyher kits and the clinical diagnosis results.

- Analysis of nasopharyngeal (NP) swab specimens

Table 7 Analysis of nasopharyngeal (NP) swab specimens

Test Results of Lyher kit	Clinical diagnosis(PCR results)		
	Positive(+)	Negative(-)	Total
Positive(+)	28	0	28
Negative(-)	5	39	44
Total	33	39	72

Clinical Sensitivity: $28 / (28+5) \times 100\% = 84.85\%$

95% CI: $p \pm 1.96 \times [p(1-p) / n]^{1/2} = [72.62\%, 97.08\%]$

Clinical Specificity: $39 / (39+0) \times 100\% = 100.00\%$

95% CI: $p \pm 1.96 \times [p(1-p) / n]^{1/2} = [99.68\%, 100.00\%]$

Total coincidence rate : $(28+39) / (28+5+0+39) \times 100\% = 93.06\%$

95% CI: $p \pm 1.96 \times [p(1-p) / n]^{1/2} = [87.18\%, 98.93\%]$

Consistency analysis by the value of Kappa: Kappa=0.858(K>0.75).

It can be considered that the examination reagents and clinical diagnosis results are consistent. According to the statistical results of the 72 nasal swab samples, there was no statistically significant difference between the test results of the nasal swab samples and the clinical diagnosis results with the reagents to be tested. Kappa=0.858(K>0.75), indicating a high consistency between the Lyher kits and the clinical diagnosis results.

2.3 The detection rate of Lyher kit for specimens at different stages

A total of 216 patients were confirmed in this study, including 34 samples at early stage (0-7 Days), 24 samples at middle stage(8-14 Days), 16 samples at late stage(> 14 Days) and 44 samples of asymptomatic patients. The detection rate statistics of each stage specimens are as follows:

Table 8 The detection rate of Lyher kit for specimens at different stages

Number of days post-onset of patient symptoms	Specimen s number of confirmed cases	The number of positive samples detected by the test reagent	Detectable rate	95%CI
0-7 Days	34	33	97.06%	(91.38%~100.00%)
8-14 Days	24	23	95.83%	(87.84%~100.00%)
>14 Days	16	15	93.75%	(81.89%~100.00%)

Asymptomatic Patient*	44	42	95.45%	(89.30%~100.00%)
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*Note: "Asymptomatic patients" refers to those whose NAT results are positive but they have no symptoms related to SARS-CoV-2 at the time of sampling.

According to the results, the Lyher kit can effectively detect the antigen of COVID-19 in patients who are at the early, middle, late/convalescent stage or asymptomatic patients.

3. Discussion and Conclusions

A total of 216 patients were collected in this clinical trial, including 118 confirmed cases and 98 excluded cases. Compared with the results of clinical diagnosis, the clinical sensitivity of Lyher kit was 95.76%, the clinical specificity of Lyher kit was 98.98%, the total coincidence rate was 97.22%, Kappa=0.944. There was no statistically significant difference between the test results. And the test results of Lyher kit and the clinical diagnosis results were highly consistent.

In this clinical evaluation, the equivalence between the test reagent and clinical diagnosis should be verified. The evaluation results showed that Lyher Novel Coronavirus (COVID-19) Antigen Test Kit (Colloidal Gold) produced by Hangzhou Laihe Biotech Co.,Ltd had high consistency with the clinical diagnosis results, which means that the product had good clinical application performance.

In the process of the trial, it should be noted that each sampling should be done at different locations, or the interval should be long enough, so as to avoid repeated sampling at the same location affecting the test results.



**Lyher kit Novel Coronavirus (COVID-19) Antigen Test Kit
(Colloidal Gold)**

Attachment: Summary of Results

SN	No.	Gender	Age	Diagnosis	Type	Results of Lyher Kit			Onset Date	PCR specimen collect	BGI PCR Results		San PCR Results		Remarks
						Collect	Testing	Results			CT	Result	CT	Result	
1	BJ001	Female	50	Confirmed	OP	2020/7/4	2020/7/4	Positive	2020/7/5	2020/7/4	14.5	Positive	\	\	Asymptomatic
2	BJ002	Male	62	Confirmed	OP	2020/7/2	2020/7/4	Positive	2020/7/3	2020/7/2	24.8	Positive	\	\	Asymptomatic
3	BJ004	Male	56	Confirmed	OP	2020/7/2	2020/7/4	Positive	2020/6/21	2020/7/2	23.7	Positive	\	\	Middle
4	BJ008	Male	44	Confirmed	OP	2020/6/27	2020/7/4	Positive	2020/6/29	2020/6/27	17.9	Positive	\	\	Asymptomatic
5	BJ009	Male	25	Confirmed	OP	2020/6/27	2020/7/4	Positive	2020/6/30	2020/6/27	22.5	Positive	\	\	Asymptomatic
6	BJ012	Male	61	Confirmed	NP	2020/6/26	2020/7/4	Positive	2020/6/28	2020/6/26	17.9	Positive	\	\	Asymptomatic
7	BJ014	Male	51	Confirmed	OP	2020/6/27	2020/7/4	Positive	2020/6/26	2020/6/27	15.6	Positive	\	\	Early
8	BJ017	Male	27	Confirmed	OP	2020/6/29	2020/7/4	Positive	2020/6/26	2020/6/29	26.0	Positive	\	\	Early
9	BJ024	Male	33	Confirmed	OP	2020/6/26	2020/7/4	Positive	2020/6/26	2020/6/26	19.1	Positive	\	\	Early
10	BJ025	Male	40	Confirmed	OP	2020/6/26	2020/7/4	Positive	2020/6/26	2020/6/26	14.5	Positive	\	\	Early
11	BJ029	Female	53	Confirmed	OP	2020/6/26	2020/7/4	Positive	2020/6/28	2020/6/26	19.1	Positive	\	\	Asymptomatic
12	BJ030	Male	49	Confirmed	OP	2020/6/25	2020/7/4	Positive	2020/6/26	2020/6/25	20.2	Positive	\	\	Asymptomatic
13	BJ034	Male	42	Confirmed	OP	2020/6/26	2020/7/4	Positive	2020/6/20	2020/6/26	15.6	Positive	\	\	Early
14	BJ039	Female	38	Confirmed	OP	2020/7/4	2020/7/6	Positive	2020/6/24	2020/6/26	27.1	Positive	\	\	Middle
15	BJ042	Female	49	Confirmed	OP	2020/6/26	2020/7/4	Positive	2020/6/24	2020/6/26	21.4	Positive	\	\	Early
16	BJ043	Female	46	Confirmed	OP	2020/6/26	2020/7/4	Positive	2020/6/24	2020/6/26	17.9	Positive	\	\	Early
17	BJ050	Male	29	Confirmed	OP	2020/6/26	2020/7/4	Positive	2020/6/24	2020/6/26	22.5	Positive	\	\	Early
18	BJ051	Female	55	Confirmed	OP	2020/6/26	2020/7/4	Positive	2020/6/24	2020/6/26	28.3	Positive	\	\	Early
19	BJ055	Male	62	Confirmed	NP	2020/7/4	2020/7/6	Negative	2020/6/25	2020/6/13	36.3	Positive	\	\	Middle
20	BJ056	Male	26	Confirmed	OP	2020/6/22	2020/7/4	Positive	2020/6/21	2020/6/22	15.6	Positive	\	\	Early



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21	BJ059	Male	41	Confirmed	OP	2020/6/24	2020/7/4	Positive	2020/6/8	2020/6/24	22.5	Positive	\	\	Late
22	BJ063	Male	27	Confirmed	OP	2020/6/14	2020/7/4	Positive	2020/6/25	2020/6/14	21.4	Positive	\	\	Asymptomatic
23	BJ066	Female	29	Confirmed	OP	2020/6/21	2020/7/4	Positive	2020/6/24	2020/6/21	24.8	Positive	\	\	Asymptomatic
24	BJ067	Male	29	Confirmed	NP	2020/6/23	2020/7/4	Positive	2020/6/13	2020/6/23	17.9	Positive	\	\	Middle
25	BJ071	Female	60	Confirmed	OP	2020/7/4	2020/7/6	Positive	2020/6/24	2020/6/21	29.4	Positive	\	\	Middle
26	BJ074	Female	44	Confirmed	OP	2020/6/24	2020/7/4	Positive	2020/6/22	2020/6/24	22.5	Positive	\	\	Early
27	BJ076	Male	55	Confirmed	OP	2020/6/23	2020/7/4	Positive	2020/6/24	2020/6/23	15.6	Positive	\	\	Asymptomatic
28	BJ077	Female	60	Confirmed	OP	2020/6/23	2020/7/4	Positive	2020/6/16	2020/6/23	28.3	Positive	\	\	Middle
29	BJ084	Male	56	Confirmed	NP	2020/7/4	2020/7/6	Positive	2020/6/23	2020/6/22	20.2	Positive	\	\	Middle
30	BJ092	Male	46	Confirmed	OP	2020/6/22	2020/7/4	Positive	2020/6/21	2020/6/22	17.9	Positive	\	\	Early
31	BJ093	Female	39	Confirmed	OP	2020/7/4	2020/7/6	Positive	2020/6/22	2020/6/21	28.3	Positive	\	\	Middle
32	BJ094	Male	47	Confirmed	OP	2020/7/4	2020/7/6	Positive	2020/6/22	2020/6/21	29.4	Positive	\	\	Middle
33	BJ099	Female	55	Confirmed	OP	2020/6/20	2020/7/4	Positive	2020/6/20	2020/6/20	23.7	Positive	\	\	Early
34	BJ100	Male	27	Confirmed	OP	2020/6/20	2020/7/4	Positive	2020/6/20	2020/6/20	22.5	Positive	\	\	Early
35	BJ108	Male	47	Confirmed	OP	2020/6/16	2020/7/4	Positive	2020/6/18	2020/6/16	27.1	Positive	\	\	Asymptomatic
36	BJ109	Female	86	Confirmed	OP	2020/6/18	2020/7/4	Positive	2020/6/19	2020/6/18	26.0	Positive	\	\	Asymptomatic
37	BJ111	Female	2	Confirmed	NP	2020/7/4	2020/7/6	Negative	2020/6/18	2020/6/19	35.2	Positive	\	\	Late
38	BJ112	Male	50	Confirmed	NP	2020/6/19	2020/7/4	Positive	2020/6/12	2020/6/19	19.1	Positive	\	\	Middle
39	BJ115	Male	34	Confirmed	OP	2020/6/18	2020/7/4	Positive	2020/6/19	2020/6/18	27.1	Positive	\	\	Asymptomatic
40	BJ116	Female	54	Confirmed	OP	2020/6/18	2020/7/4	Positive	2020/6/18	2020/6/18	19.1	Positive	\	\	Early
41	BJ120	Male	31	Confirmed	OP	2020/7/4	2020/7/6	Positive	2020/6/15	2020/6/17	29.4	Positive	\	\	Late
42	BJ121	Female	34	Confirmed	OP	2020/6/18	2020/7/4	Positive	2020/6/10	2020/6/18	15.6	Positive	\	\	Middle
43	BJ122	Male	34	Confirmed	OP	2020/6/18	2020/7/4	Positive	2020/6/16	2020/6/18	21.4	Positive	\	\	Early
44	BJ123	Female	32	Confirmed	OP	2020/6/17	2020/7/4	Positive	2020/6/18	2020/6/17	15.6	Positive	\	\	Asymptomatic



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45	BJ124	Female	34	Confirmed	OP	2020/6/17	2020/7/4	Positive	2020/6/19	2020/6/17	20.2	Positive	\	\	Asymptomatic
46	BJ125	Female	56	Confirmed	OP	2020/6/16	2020/7/4	Positive	2020/6/14	2020/6/16	26.0	Positive	\	\	Early
47	BJ130	Male	36	Confirmed	OP	2020/6/16	2020/7/4	Positive	2020/6/16	2020/6/16	27.1	Positive	\	\	Early
48	BJ131	Female	24	Confirmed	OP	2020/6/16	2020/7/4	Positive	2020/6/17	2020/6/16	24.8	Positive	\	\	Asymptomatic
49	BJ133	Female	57	Excluded	OP	2020/6/24	2020/7/4	Negative	\	2020/6/24	NA	Negative	\	\	
50	BJ136	Male	61	Excluded	OP	2020/6/24	2020/7/4	Negative	\	2020/6/24	NA	Negative	\	\	
51	BJ141	Female	69	Excluded	OP	2020/6/24	2020/7/4	Negative	\	2020/6/24	NA	Negative	\	\	
52	BJ142	Female	64	Excluded	OP	2020/6/24	2020/7/4	Negative	\	2020/6/24	NA	Negative	\	\	
53	BJ146	Female	26	Excluded	OP	2020/6/24	2020/7/4	Negative	\	2020/6/24	NA	Negative	\	\	
54	BJ147	Female	48	Excluded	OP	2020/6/24	2020/7/4	Negative	\	2020/6/24	NA	Negative	\	\	
55	BJ149	Female	43	Excluded	OP	2020/6/20	2020/7/4	Negative	\	2020/6/20	NA	Negative	\	\	
56	BJ154	Female	21	Excluded	NP	2020/6/20	2020/7/4	Negative	\	2020/6/20	NA	Negative	\	\	
57	BJ155	Male	67	Excluded	NP	2020/6/20	2020/7/4	Negative	\	2020/6/20	NA	Negative	\	\	
58	BJ156	Male	19	Excluded	NP	2020/6/20	2020/7/4	Negative	\	2020/6/20	NA	Negative	\	\	
59	BJ157	Male	65	Excluded	NP	2020/6/20	2020/7/4	Negative	\	2020/6/20	NA	Negative	\	\	
60	XJ001	Male	31	Confirmed	NP	2020/2/27	2020/6/12	Positive	2020/2/15	2020/2/27	\	\	18.6	Positive	Middle
61	XJ002	Male	36	Confirmed	OP	2020/2/27	2020/6/12	Positive	2020/2/15	2020/2/27	\	\	19.6	Positive	Middle
62	XJ003	Male	30	Confirmed	OP	2020/2/14	2020/6/14	Positive	2020/2/16	2020/2/27	\	\	25.4	Positive	Asymptomatic
63	XJ005	Female	43	Confirmed	OP	2020/2/27	2020/6/12	Positive	2020/2/12	2020/2/27	\	\	20.6	Positive	Late
64	XJ008	Female	22	Confirmed	OP	2020/2/27	2020/6/12	Positive	2020/2/12	2020/2/27	\	\	17.7	Positive	Late
65	XJ009	Male	55	Confirmed	OP	2020/2/27	2020/6/12	Positive	2020/2/13	2020/2/27	\	\	17.7	Positive	Late
66	XJ011	Male	52	Confirmed	OP	2020/2/27	2020/6/12	Positive	2020/2/15	2020/2/27	\	\	23.4	Positive	Middle
67	XJ012	Male	41	Confirmed	OP	2020/2/27	2020/6/12	Positive	2020/2/16	2020/2/27	\	\	16.7	Positive	Middle
68	XJ013	Female	61	Confirmed	OP	2020/2/27	2020/6/12	Positive	2020/2/12	2020/2/27	\	\	13.8	Positive	Late



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69	XJ014	Female	24	Confirmed	OP	2020/2/27	2020/6/12	Positive	2020/2/11	2020/2/27	\	\	19.6	Positive	Late
70	XJ015	Female	18	Confirmed	OP	2020/2/27	2020/6/12	Positive	2020/2/10	2020/2/27	\	\	21.5	Positive	Late
71	XJ016	Male	34	Confirmed	OP	2020/2/27	2020/6/12	Positive	2020/2/10	2020/2/27	\	\	22.5	Positive	Late
72	XJ018	Female	62	Confirmed	NP	2020/2/10	2020/6/14	Negative	2020/2/10	2020/2/27	\	\	30.2	Positive	Early
73	XJ021	Female	54	Confirmed	OP	2020/2/8	2020/6/14	Positive	2020/2/8	2020/2/27	\	\	25.4	Positive	Early
74	XJ022	Female	44	Confirmed	OP	2020/2/27	2020/6/12	Positive	2020/2/8	2020/2/27	\	\	20.6	Positive	Late
75	XJ023	Male	27	Confirmed	OP	2020/2/27	2020/6/12	Positive	2020/2/9	2020/2/27	\	\	18.6	Positive	Late
76	XJ024	Male	54	Confirmed	OP	2020/2/27	2020/6/12	Positive	2020/2/6	2020/2/27	\	\	21.5	Positive	Late
77	XJ025	Male	64	Confirmed	OP	2020/2/27	2020/6/12	Positive	2020/2/9	2020/2/27	\	\	15.8	Positive	Late
78	XJ026	Male	21	Confirmed	OP	2020/2/11	2020/6/14	Positive	2020/2/11	2020/2/27	\	\	24.4	Positive	Early
79	XJ027	Male	60	Confirmed	NP	2020/2/27	2020/6/12	Positive	2020/2/11	2020/2/27	\	\	20.6	Positive	Late
80	XJ028	Female	19	Confirmed	NP	2020/2/27	2020/6/12	Positive	2020/2/12	2020/2/27	\	\	21.5	Positive	Late
81	XJ031	Male	54	Confirmed	NP	2020/2/18	2020/6/12	Positive	2020/2/12	2020/2/18	\	\	19.6	Positive	Early
82	XJ032	Female	54	Confirmed	OP	2020/2/13	2020/6/14	Positive	2020/2/14	2020/2/18	\	\	25.4	Positive	Asymptomatic
83	XJ034	Female	66	Confirmed	OP	2020/2/11	2020/6/14	Positive	2020/2/11	2020/2/18	\	\	24.4	Positive	Early
84	XJ035	Male	65	Confirmed	OP	2020/2/18	2020/6/12	Positive	2020/2/12	2020/2/18	\	\	18.6	Positive	Early
85	XJ036	Male	42	Confirmed	OP	2020/2/18	2020/6/12	Positive	2020/2/13	2020/2/18	\	\	21.5	Positive	Early
86	XJ037	Female	63	Confirmed	OP	2020/2/18	2020/6/12	Positive	2020/2/11	2020/2/18	\	\	19.6	Positive	Middle
87	XJ038	Male	48	Confirmed	OP	2020/2/18	2020/6/12	Positive	2020/2/9	2020/2/18	\	\	19.6	Positive	Middle
88	XJ039	Male	49	Confirmed	OP	2020/2/8	2020/6/14	Positive	2020/2/8	2020/2/18	\	\	25.4	Positive	Early
89	XJ041	Male	58	Confirmed	OP	2020/2/18	2020/6/12	Positive	2020/2/5	2020/2/18	\	\	16.7	Positive	Middle
90	XJ042	Female	31	Confirmed	OP	2020/2/18	2020/6/12	Positive	2020/2/9	2020/2/18	\	\	18.6	Positive	Middle
91	XJ043	Male	64	Confirmed	OP	2020/2/18	2020/6/12	Positive	2020/2/10	2020/2/18	\	\	20.6	Positive	Middle
92	XJ046	Male	32	Confirmed	OP	2020/2/18	2020/6/12	Positive	2020/2/13	2020/2/18	\	\	20.6	Positive	Early



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93	XJ047	Male	19	Confirmed	OP	2020/2/18	2020/6/12	Positive	2020/2/14	2020/2/18	\	\	13.8	Positive	Early
94	XJ048	Male	49	Confirmed	OP	2020/2/18	2020/6/12	Positive	2020/2/14	2020/2/18	\	\	12.9	Positive	Early
95	XJ050	Female	64	Confirmed	OP	2020/2/18	2020/6/12	Positive	2020/2/14	2020/2/18	\	\	12.9	Positive	Early
96	XJ051	Female	47	Confirmed	OP	2020/2/18	2020/6/12	Positive	2020/2/14	2020/2/18	\	\	21.5	Positive	Early
97	XJ052	Female	40	Confirmed	OP	2020/2/8	2020/6/14	Positive	2020/2/12	2020/2/18	\	\	24.4	Positive	Asymptomatic
98	XJ053	Male	23	Confirmed	OP	2020/2/18	2020/6/12	Positive	2020/2/12	2020/2/18	\	\	20.6	Positive	Early
99	XJ054	Female	27	Confirmed	OP	2020/2/18	2020/6/12	Positive	2020/2/11	2020/2/18	\	\	13.8	Positive	Early
100	XJ056	Male	52	Confirmed	OP	2020/2/18	2020/6/12	Positive	2020/2/7	2020/2/18	\	\	19.6	Positive	Middle
101	XJ057	Male	36	Confirmed	OP	2020/2/7	2020/6/14	Positive	2020/2/7	2020/2/18	\	\	24.4	Positive	Early
102	XJ058	Male	38	Confirmed	OP	2020/2/18	2020/6/12	Positive	2020/2/6	2020/2/18	\	\	13.8	Positive	Middle
103	XJ059	Male	31	Confirmed	OP	2020/2/18	2020/6/12	Positive	2020/2/9	2020/2/18	\	\	22.5	Positive	Middle
104	XJ060	Male	44	Confirmed	OP	2020/2/18	2020/6/12	Positive	2020/2/9	2020/2/18	\	\	12.9	Positive	Middle
105	XJ069	Male	32	Excluded	OP	2020/2/20	2020/6/12	Negative	\	2020/2/20	\	\	NA	Negative	
106	XJ072	Female	61	Excluded	OP	2020/2/20	2020/6/12	Negative	\	2020/2/20	\	\	NA	Negative	
107	XJ073	Female	57	Excluded	OP	2020/2/20	2020/6/12	Negative	\	2020/2/20	\	\	NA	Negative	
108	XJ083	Female	38	Excluded	NP	2020/2/20	2020/6/12	Negative	\	2020/2/20	\	\	NA	Negative	
109	XJ084	Male	64	Excluded	NP	2020/2/20	2020/6/12	Negative	\	2020/2/20	\	\	NA	Negative	
110	XJ085	Female	68	Excluded	NP	2020/2/20	2020/6/12	Negative	\	2020/2/20	\	\	NA	Negative	
111	XJ089	Male	49	Excluded	NP	2020/2/21	2020/6/12	Negative	\	2020/2/21	\	\	NA	Negative	
112	XJ090	Male	42	Excluded	OP	2020/2/21	2020/6/12	Negative	\	2020/2/21	\	\	NA	Negative	
113	XJ095	Female	58	Excluded	OP	2020/2/21	2020/6/12	Negative	\	2020/2/21	\	\	NA	Negative	
114	XJ102	Male	42	Excluded	OP	2020/2/21	2020/6/12	Negative	\	2020/2/21	\	\	NA	Negative	
115	XJ103	Female	46	Excluded	OP	2020/2/21	2020/6/12	Negative	\	2020/2/21	\	\	NA	Negative	
116	XJ108	Female	67	Excluded	OP	2020/2/21	2020/6/12	Negative	\	2020/2/21	\	\	NA	Negative	



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117	LN002	Male	20	Confirmed	OP	2020/8/6	2020/8/8	Positive	\	2020/8/6	\	\	NA	Negative	Asymptomatic
118	LN003	Female	52	Confirmed	OP	2020/8/6	2020/8/8	Positive	\	2020/8/6	\	\	NA	Negative	Asymptomatic
119	LN005	Female	57	Confirmed	OP	2020/8/6	2020/8/8	Positive	\	2020/8/6	\	\	NA	Negative	Asymptomatic
120	LN006	Female	30	Confirmed	NP	2020/8/6	2020/8/8	Positive	\	2020/8/6	\	\	NA	Negative	Asymptomatic
121	LN010	Female	53	Excluded	NP	2020/8/6	2020/8/8	Negative	\	2020/8/6	\	\	NA	Negative	
122	LN011	Female	67	Excluded	NP	2020/8/6	2020/8/8	Negative	\	2020/8/6	\	\	NA	Negative	
123	LN012	Male	44	Excluded	NP	2020/8/6	2020/8/8	Negative	\	2020/8/6	\	\	NA	Negative	
124	LN013	Female	47	Excluded	NP	2020/8/6	2020/8/8	Negative	\	2020/8/6	\	\	NA	Negative	
125	LN014	Female	69	Excluded	NP	2020/8/6	2020/8/8	Negative	\	2020/8/6	\	\	NA	Negative	
126	LN015	Male	25	Excluded	OP	2020/8/6	2020/8/8	Negative	\	2020/8/6	\	\	NA	Negative	
127	LN016	Female	36	Excluded	OP	2020/8/6	2020/8/8	Negative	\	2020/8/6	\	\	NA	Negative	
128	LN019	Female	35	Excluded	OP	2020/8/6	2020/8/8	Negative	\	2020/8/6	\	\	NA	Negative	
129	LN022	Female	37	Excluded	OP	2020/8/6	2020/8/8	Negative	\	2020/8/6	\	\	NA	Negative	
130	LN023	Female	45	Excluded	OP	2020/8/5	2020/8/8	Negative	\	2020/8/5	\	\	NA	Negative	
131	LN024	Female	23	Excluded	OP	2020/8/5	2020/8/8	Negative	\	2020/8/5	\	\	NA	Negative	
132	LN025	Female	66	Excluded	OP	2020/8/5	2020/8/8	Negative	\	2020/8/5	\	\	NA	Negative	
133	LN026	Male	31	Excluded	OP	2020/8/5	2020/8/8	Negative	\	2020/8/5	\	\	NA	Negative	
134	LN027	Male	33	Excluded	OP	2020/8/5	2020/8/8	Negative	\	2020/8/5	\	\	NA	Negative	
135	LN030	Female	22	Excluded	OP	2020/8/5	2020/8/8	Negative	\	2020/8/5	\	\	NA	Negative	
136	LN031	Female	52	Excluded	OP	2020/8/5	2020/8/8	Negative	\	2020/8/5	\	\	NA	Negative	
137	LN032	Female	54	Excluded	OP	2020/8/5	2020/8/8	Negative	\	2020/8/5	\	\	NA	Negative	
138	LN033	Male	49	Excluded	OP	2020/8/5	2020/8/8	Negative	\	2020/8/5	\	\	NA	Negative	
139	LN034	Female	19	Excluded	OP	2020/8/5	2020/8/8	Negative	\	2020/8/5	\	\	NA	Negative	
140	LN037	Male	33	Excluded	NP	2020/8/5	2020/8/8	Negative	\	2020/8/5	\	\	NA	Negative	



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141	LN038	Female	42	Excluded	NP	2020/8/5	2020/8/8	Negative	\	2020/8/5	\	\	NA	Negative	
142	LN039	Female	39	Excluded	NP	2020/8/5	2020/8/8	Negative	\	2020/8/5	\	\	NA	Negative	
143	LN040	Female	46	Excluded	NP	2020/8/5	2020/8/8	Negative	\	2020/8/5	\	\	NA	Negative	
144	LN041	Male	38	Excluded	NP	2020/8/5	2020/8/8	Negative	\	2020/8/5	\	\	NA	Negative	
145	LN042	Male	58	Excluded	NP	2020/8/5	2020/8/8	Negative	\	2020/8/5	\	\	NA	Negative	
146	LN043	Female	32	Excluded	NP	2020/8/5	2020/8/8	Negative	\	2020/8/5	\	\	NA	Negative	
147	LN044	Female	53	Excluded	NP	2020/8/5	2020/8/8	Negative	\	2020/8/5	\	\	NA	Negative	
148	LN051	Female	40	Excluded	OP	2020/8/4	2020/8/8	Negative	\	2020/8/4	\	\	NA	Negative	
149	LN052	Female	52	Excluded	OP	2020/8/4	2020/8/8	Negative	\	2020/8/4	\	\	NA	Negative	
150	LN060	Male	27	Excluded	OP	2020/8/4	2020/8/8	Negative	\	2020/8/4	\	\	NA	Negative	
151	LN061	Male	21	Excluded	OP	2020/8/4	2020/8/8	Negative	\	2020/8/4	\	\	NA	Negative	
152	LN062	Male	24	Excluded	OP	2020/8/4	2020/8/8	Negative	\	2020/8/4	\	\	NA	Negative	
153	LN063	Male	21	Excluded	OP	2020/8/4	2020/8/8	Negative	\	2020/8/4	\	\	NA	Negative	
154	LN066	Female	64	Excluded	OP	2020/8/3	2020/8/8	Negative	\	2020/8/3	\	\	NA	Negative	
155	LN067	Male	60	Excluded	OP	2020/8/3	2020/8/8	Negative	\	2020/8/3	\	\	NA	Negative	
156	LN069	Female	55	Excluded	OP	2020/8/3	2020/8/8	Negative	\	2020/8/3	\	\	NA	Negative	
157	LN072	Male	48	Excluded	OP	2020/8/3	2020/8/8	Negative	\	2020/8/3	\	\	NA	Negative	
158	LN073	Male	34	Excluded	NP	2020/8/3	2020/8/8	Negative	\	2020/8/3	\	\	NA	Negative	
159	LN074	Female	59	Excluded	NP	2020/8/3	2020/8/8	Negative	\	2020/8/3	\	\	NA	Negative	
160	LN075	Male	54	Excluded	NP	2020/8/3	2020/8/8	Negative	\	2020/8/3	\	\	NA	Negative	
161	LN076	Female	64	Excluded	NP	2020/8/3	2020/8/8	Negative	\	2020/8/3	\	\	NA	Negative	
162	LN078	Female	63	Excluded	NP	2020/8/3	2020/8/8	Negative	\	2020/8/3	\	\	NA	Negative	
163	LN079	Female	34	Excluded	NP	2020/8/3	2020/8/8	Negative	\	2020/8/3	\	\	NA	Negative	
164	LN083	Female	70	Excluded	NP	2020/8/3	2020/8/8	Negative	\	2020/8/3	\	\	NA	Negative	



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165	LN084	Male	25	Excluded	OP	2020/8/3	2020/8/8	Negative	\	2020/8/3	\	\	NA	Negative	
166	LN093	Male	50	Excluded	OP	2020/8/3	2020/8/8	Negative	\	2020/8/3	\	\	NA	Negative	
167	LN094	Male	38	Excluded	OP	2020/8/3	2020/8/8	Negative	\	2020/8/3	\	\	NA	Negative	
168	LN106	Female	22	Excluded	OP	2020/8/3	2020/8/8	Negative	\	2020/8/3	\	\	NA	Negative	
169	LN116	Female	23	Excluded	OP	2020/8/2	2020/8/8	Negative	\	2020/8/2	\	\	NA	Negative	
170	HJ002	Male	61	Confirmed	NP	2020/7/27	2020/8/5	Negative	\	2020/7/25	\	\	17.7	Positive	Asymptomatic
171	HJ003	Male	21	Confirmed	NP	2020/7/25	2020/8/4	Positive	\	2020/7/25	\	\	14.8	Positive	Asymptomatic
172	HJ004	Male	66	Confirmed	NP	2020/8/1	2020/8/4	Positive	\	2020/8/1	\	\	15.8	Positive	Asymptomatic
173	HJ006	Male	38	Confirmed	NP	2020/8/1	2020/8/4	Positive	\	2020/8/1	\	\	12.9	Positive	Asymptomatic
174	HJ014	Male	38	Excluded	OP	2020/8/1	2020/8/4	Negative	\	2020/8/1	\	\	NA	Negative	
175	HJ015	Male	24	Excluded	OP	2020/8/1	2020/8/4	Negative	\	2020/8/1	\	\	NA	Negative	
176	HJ016	Male	55	Excluded	OP	2020/8/1	2020/8/4	Negative	\	2020/8/1	\	\	NA	Negative	
177	HJ017	Female	41	Excluded	OP	2020/8/1	2020/8/4	Negative	\	2020/8/1	\	\	NA	Negative	
178	HJ018	Female	69	Excluded	OP	2020/8/1	2020/8/4	Negative	\	2020/8/1	\	\	NA	Negative	
179	HJ025	Female	62	Excluded	OP	2020/8/2	2020/8/4	Negative	\	2020/8/2	\	\	NA	Negative	
180	HJ026	Female	57	Excluded	OP	2020/8/2	2020/8/4	Negative	\	2020/8/2	\	\	NA	Negative	
181	HJ027	Female	42	Excluded	OP	2020/8/2	2020/8/4	Negative	\	2020/8/2	\	\	NA	Negative	
182	HJ034	Female	39	Excluded	OP	2020/8/2	2020/8/4	Negative	\	2020/8/2	\	\	NA	Negative	
183	HJ041	Female	18	Excluded	OP	2020/8/2	2020/8/4	Negative	\	2020/8/2	\	\	NA	Negative	
184	HJ042	Male	53	Excluded	OP	2020/8/2	2020/8/4	Negative	\	2020/8/2	\	\	NA	Negative	
185	HJ043	Male	31	Excluded	OP	2020/8/2	2020/8/4	Negative	\	2020/8/2	\	\	NA	Negative	
186	HJ060	Male	19	Excluded	NP	2020/8/3	2020/8/4	Negative	\	2020/8/3	\	\	NA	Negative	
187	HJ061	Male	51	Excluded	NP	2020/8/3	2020/8/4	Negative	\	2020/8/3	\	\	NA	Negative	
188	HJ062	Female	53	Excluded	NP	2020/8/3	2020/8/4	Negative	\	2020/8/3	\	\	NA	Negative	



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189	HJ063	Male	56	Excluded	NP	2020/8/3	2020/8/4	Negative	\	2020/8/3	\	\	NA	Negative	
190	HJ067	Male	38	Excluded	OP	2020/8/3	2020/8/4	Negative	\	2020/8/3	\	\	NA	Negative	
191	HJ068	Male	28	Excluded	OP	2020/7/16	2020/8/5	Positive	\	2020/8/3	\	\	NA	Negative	
192	HJ069	Male	48	Excluded	OP	2020/8/3	2020/8/4	Negative	\	2020/8/3	\	\	NA	Negative	
193	HJ100	Female	52	Excluded	NP	2020/7/28	2020/8/4	Negative	\	2020/7/28	\	\	NA	Negative	
194	HJ101	Female	68	Excluded	NP	2020/7/28	2020/8/4	Negative	\	2020/7/28	\	\	NA	Negative	
195	HJ102	Male	34	Excluded	NP	2020/7/28	2020/8/4	Negative	\	2020/7/28	\	\	NA	Negative	
196	GD001	Male	58	Confirmed	NP	2020/10/21	2020/10/22	Positive	\	2020/10/21	\	\	20.5	Positive	Asymptomatic
197	GD002	Male	58	Confirmed	NP	2020/10/21	2020/10/22	Positive	\	2020/10/21	\	\	21.2	Positive	Asymptomatic
198	GD003	Female	61	Confirmed	NP	2020/10/22	2020/10/22	Positive	\	2020/10/22	\	\	18.5	Positive	Asymptomatic
199	GD004	Male	26	Confirmed	NP	2020/10/22	2020/10/22	Positive	\	2020/10/22	\	\	17.7	Positive	Asymptomatic
200	GD005	Male	41	Confirmed	NP	2020/10/16	2020/10/22	Positive	\	2020/10/16	\	\	22.1	Positive	Asymptomatic
201	GD006	Male	44	Confirmed	NP	2020/10/8	2020/10/22	Negative	\	2020/10/8	\	\	26.6	Positive	Asymptomatic
202	GD007	Male	29	Confirmed	NP	2020/10/7	2020/10/22	Positive	\	2020/10/7	\	\	21.5	Positive	Asymptomatic
203	GD008	Female	28	Confirmed	NP	2020/10/7	2020/10/22	Positive	\	2020/10/7	\	\	13.8	Positive	Asymptomatic
204	GD009	Male	65	Confirmed	NP	2020/10/8	2020/10/22	Positive	\	2020/10/8	\	\	23.4	Positive	Asymptomatic
205	GD010	Female	65	Confirmed	NP	2020/10/8	2020/10/22	Positive	\	2020/10/8	\	\	13.7	Positive	Asymptomatic
206	GD011	Male	63	Confirmed	NP	2020/10/8	2020/10/22	Positive	\	2020/10/8	\	\	13.9	Positive	Asymptomatic
207	GD012	Female	48	Confirmed	NP	2020/10/10	2020/10/22	Positive	\	2020/10/10	\	\	16.1	Positive	Asymptomatic
208	GD013	Male	44	Confirmed	NP	2020/10/10	2020/10/22	Positive	\	2020/10/10	\	\	17.7	Positive	Asymptomatic
209	GD014	Male	25	Confirmed	NP	2020/10/12	2020/10/22	Positive	\	2020/10/12	\	\	20.1	Positive	Asymptomatic
210	GD015	Male	25	Confirmed	NP	2020/10/10	2020/10/22	Positive	\	2020/10/10	\	\	23.5	Positive	Asymptomatic
211	GD016	Female	58	Confirmed	NP	2020/10/7	2020/10/22	Positive	\	2020/10/7	\	\	14.6	Positive	Asymptomatic
212	GD017	Male	50	Confirmed	NP	2020/10/7	2020/10/22	Positive	\	2020/10/7	\	\	21.0	Positive	Asymptomatic



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213	GD018	Male	29	Excluded	NP	2020/10/7	2020/10/22	Negative	\	2020/10/7	\	\	NA	Negative	
214	GD019	Male	34	Excluded	NP	2020/10/7	2020/10/22	Negative	\	2020/10/7	\	\	NA	Negative	
215	GD020	Male	42	Excluded	NP	2020/10/7	2020/10/22	Negative	\	2020/10/7	\	\	NA	Negative	
216	GD021	Female	55	Excluded	NP	2020/10/8	2020/10/22	Negative	\	2020/10/8	\	\	NA	Negative	