



SZABO SCANDIC

Part of Europa Biosite

Produktinformation



Forschungsprodukte & Biochemikalien



Zellkultur & Verbrauchsmaterial



Diagnostik & molekulare Diagnostik



Laborgeräte & Service

Weitere Information auf den folgenden Seiten!
See the following pages for more information!



Lieferung & Zahlungsart

siehe unsere [Liefer- und Versandbedingungen](#)

Zuschläge

- Mindermengenzuschlag
- Trockeneiszuschlag
- Gefahrgutzuschlag
- Expressversand

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ImmunoCard STAT!® CGE

(The rapid discriminator of *Entamoeba histolytica*¹)



DEFINITIVE ANSWERS, CONFIDENT RESULTS™

- Easy, effective and efficient detection of *Cryptosporidium parvum*, *Giardia lamblia* & *Entamoeba histolytica*
- Room Temperature storage and test results within 10 minutes
- Expedite the initiation of treatment and pathogen control measures

ImmunoCard
STAT! CGE

 **Meridian**
Bioscience® Europe
Inspired Science. Trusted Solutions.®

TEST PROCEDURE

- Using the dropper with the Sample Diluent/Negative Control, add 1ml of Sample Diluent to a test tube.
- Add a small portion of approximately 5-6mm size (50mg) or 100µl stool using appropriate applicator or pipette. Vortex 15 seconds.
- Wait 3-5 minutes until the solid particles settle at the bottom of the tube or centrifuge.
- Add 125µl of the prepared specimen to the sample port of the device and read the results at 10 minutes.



This illustration is representative of the current Package Insert at the time of publication. Please refer to the most current version of the Package Insert for complete instructions.

RESULTS INTERPRETATION

Negative **Positives**

- Control
- Entamoeba
- Giardia
- Cryptosporidium

Ordering Information

Product	Quantity	Catalogue #
ImmunoCard STAT!® CGE	20 Tests	751420
ImmunoCard STAT!® CGE Positive Control	3 Tests	751403



For more information contact a specialist at info@meridianbioscience.eu
Visit us on the web at www.meridianbioscience.eu

REFERENCES

¹WHO recommends that *E. histolytica*/*E. dispar* is differentiated and such patients should not be treated on the basis of microscopy findings alone. **Wkly. Epidemiol. Rec.** 1997, 72, 97-99

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