



**WHO International Standard  
3rd WHO International Standard for Hepatitis A Virus VL For  
Nucleic Acid Amplification Techniques  
NIBSC code: 15/276  
Instructions for use  
(Version 2.0, Dated 19/11/2018)**

### 1. INTENDED USE

The 3rd WHO International Standard for hepatitis A virus (HAV), NIBSC code 15/276, is intended to be used for the calibration of secondary reference preparations for HAV NAT [1]. The standard comprises a genotype IB HAV RNA-positive plasma mini pool donation, diluted in pooled human plasma. The pooled human plasma diluent was sourced from blood donations and had been tested and found negative for HCV RNA, HAV RNA, HIV RNA, HBV DNA, HBsAg, anti-HCV and anti-HIV. The standard has been lyophilised in 0.5 mL aliquots and stored at -20 °C. The material has been calibrated in International Units (IU) [2], in parallel with the 2nd WHO International Standard for HAV RNA [3, 4]. The genomic sequence of this material is available (accession number KY003229) [5].

### 2. CAUTION

**This preparation is not for administration to humans or animals in the human food chain.**

The preparation contains materials of human origin, and either the final product or the source materials, from which it is derived, have been tested and found negative for HBsAg, anti-HIV and HCV RNA. As with all materials of biological origin, this preparation should be regarded as potentially hazardous to health. It should be used and discarded according to your own laboratory's safety procedures. Such safety procedures should include the wearing of protective gloves and avoiding the generation of aerosols. Care should be exercised in opening ampoules or vials, to avoid cuts.

### 3. UNITAGE

This material has been assigned a unitage of 26300 IU/mL (~4.42 log<sub>10</sub> IU/mL) when reconstituted in 0.5 mL of nuclease-free water. Uncertainty: the assigned unitage does not carry an uncertainty associated with its calibration. The uncertainty may therefore be considered to be the variance of the vial content and was determined to be +/- 0.53 %.

### 4. CONTENTS

Country of origin of biological material: South Africa.  
Each vial contains 0.5 mL of lyophilized plasma containing infectious HAV.

### 5. STORAGE

Vials of 15/276 are shipped at ambient and must be stored at -20 °C.  
**Please note: because of the inherent stability of lyophilized material, NIBSC may ship these materials at ambient temperature.**

### 6. DIRECTIONS FOR OPENING

Vials have a screw cap; an internal stopper may also be present. The cap should be removed by turning anti-clockwise. Care should be taken to prevent loss of the contents. Please note: If a stopper is present on removal of the cap, the stopper should remain in the vial or be removed with the cap.

### 7. USE OF MATERIAL

**No attempt should be made to weigh out any portion of the freeze-dried material prior to reconstitution**

The material should be reconstituted with 0.5 mL of deionized, nuclease-free molecular-grade water and left for a minimum of 20 minutes with occasional agitation before use. The reconstituted material has a final

concentration of 26300 IU/mL (~4.42 log<sub>10</sub> IU/mL). The International Standard should be used to calibrate secondary reference materials, for example, by determining the equivalent concentration of secondary reference reagent being calibrated, against the International Standard, in parallel. The secondary reference reagent can then be assigned a concentration in IU. Once reconstituted, the International Standard should be diluted in the matrix appropriate to the material being calibrated, and should be extracted prior to HAV RNA measurement.

### 8. STABILITY

Reference materials are held at NIBSC within assured, temperature-controlled storage facilities and they should be stored on receipt as indicated on the label. It is the policy of WHO not to assign an expiry date to their international reference materials. Accelerated degradation studies have indicated that this material is suitably stable, when stored at -20 °C, for the assigned values to remain valid until the material is withdrawn or replaced. These studies have also shown that the material is suitably stable for shipment at ambient temperature without any effect on the assigned values. Users who have data supporting any deterioration in the characteristics of any reference preparation are encouraged to contact NIBSC.

NIBSC follows the policy of WHO with respect to its reference materials.

### 9. REFERENCES

1. Manual for the preparation of secondary materials for in vitro diagnostic assays designed for infectious disease nucleic acid or antigen detection: Calibration to WHO International Standards. [http://www.who.int/biologicals/expert\\_committee/WHO\\_Manual\\_Calibration\\_of\\_secondary\\_standards\\_final\\_mn.pdf?ua=1](http://www.who.int/biologicals/expert_committee/WHO_Manual_Calibration_of_secondary_standards_final_mn.pdf?ua=1) (accessed November 2017)
2. Minhas RA, Fryer JF, Hockley J, Morris CL and the collaborative study group. Collaborative Study to Evaluate the Proposed 3rd WHO International Standard for Hepatitis A Virus (HAV) for Nucleic Acid Amplification Technology (NAT)-Based Assays. WHO ECBS Report 2017;WHO/BS/2017.2308.
3. Fryer JF, Heath AB, Morris CL and the collaborative study group. Collaborative study to evaluate the proposed 2nd WHO International Standard for hepatitis A virus (HAV) for nucleic acid amplification technology (NAT)-based assays. WHO ECBS Report 2013;WHO/BS/2013.2225.
4. Saldanha J, Heath A, Lelie N, Pisani G, Yu M-Y. Report on the WHO collaborative study to establish an International Standard for HAV RNA nucleic acid amplification technology (NAT) assays. WHO ECBS Report 2003; BS/03.1959.
5. Jenkins A, Minhas R, Morris C, Berry N. Genomic Sequence of the WHO International Standard for Hepatitis A Virus RNA. Genome Announc. 2018 May 10;6(19). pii: e00402-18. doi: 10.1128/genomeA.00402-18.

### 10. ACKNOWLEDGEMENTS

We gratefully acknowledge the important contributions of the collaborative study participants.

### 11. FURTHER INFORMATION

Further information can be obtained as follows:  
This material: [enquiries@nibsc.org](mailto:enquiries@nibsc.org)  
WHO Biological Standards:  
<http://www.who.int/biologicals/en/>  
JCTLM Higher order reference materials:  
<http://www.bipm.org/en/committees/jc/jctlm/>  
Derivation of International Units:  
[http://www.nibsc.org/standardisation/international\\_standards.aspx](http://www.nibsc.org/standardisation/international_standards.aspx)  
Ordering standards from NIBSC:  
<http://www.nibsc.org/products/ordering.aspx>  
NIBSC Terms & Conditions:  
[http://www.nibsc.org/terms\\_and\\_conditions.aspx](http://www.nibsc.org/terms_and_conditions.aspx)



**12. CUSTOMER FEEDBACK**

Customers are encouraged to provide feedback on the suitability or use of the material provided or other aspects of our service. Please send any comments to enquiries@nibsc.org

**13. CITATION**

In all publications, including data sheets, in which this material is referenced, it is important that the preparation's title, its status, the NIBSC code number, and the name and address of NIBSC are cited and cited correctly.

**14. MATERIAL SAFETY SHEET**

Classification in accordance with Directive 2000/54/EC, Regulation (EC) No 1272/2008: Not applicable or not classified

Physical and Chemical properties	
Physical appearance: Lyophilised solid	Corrosive: No
Stable: Yes	Oxidising: No
Hygroscopic: No	Irritant: No
Flammable: No	Handling: See caution, Section 2
Other (specify): Contains infectious HAV	
Toxicological properties	
Effects of inhalation:	Avoid - contains infectious HAV
Effects of ingestion:	Avoid - contains infectious HAV
Effects of skin absorption:	Avoid - contains infectious HAV
Suggested First Aid	
Inhalation:	Seek medical advice
Ingestion:	Seek medical advice
Contact with eyes:	Wash with copious amounts of water. Seek medical advice
Contact with skin:	Wash thoroughly with water.
Action on Spillage and Method of Disposal	
Spillage of ampoule contents should be taken up with absorbent material wetted with an appropriate disinfectant. Rinse area with an appropriate disinfectant followed by water. Absorbent materials used to treat spillage should be treated as biological waste.	

**15. LIABILITY AND LOSS**

In the event that this document is translated into another language, the English language version shall prevail in the event of any inconsistencies between the documents.

Unless expressly stated otherwise by NIBSC, NIBSC's Standard Terms and Conditions for the Supply of Materials (available at [http://www.nibsc.org/About\\_Us/Terms\\_and\\_Conditions.aspx](http://www.nibsc.org/About_Us/Terms_and_Conditions.aspx) or upon request by the Recipient) ("Conditions") apply to the exclusion of all other terms and are hereby incorporated into this document by reference. The Recipient's attention is drawn in particular to the provisions of clause 11 of the Conditions.

**16. INFORMATION FOR CUSTOMS USE ONLY**

<b>Country of origin for customs purposes*:</b> United Kingdom * Defined as the country where the goods have been produced and/or sufficiently processed to be classed as originating from the country of supply, for example a change of state such as freeze-drying.
<b>Net weight:</b> 0.5g
<b>Toxicity Statement:</b> Non-toxic
<b>Veterinary certificate or other statement</b> if applicable.
<b>Attached:</b> No

**17. CERTIFICATE OF ANALYSIS**

NIBSC does not provide a Certificate of Analysis for WHO Biological Reference Materials because they are internationally recognised primary reference materials fully described in the instructions for use. The reference materials are established according to the WHO Recommendations for the preparation, characterization and establishment of international and other biological reference standards [http://www.who.int/bloodproducts/publications/TRS932Annex2\\_Inter\\_biol\\_efstandardsrev2004.pdf](http://www.who.int/bloodproducts/publications/TRS932Annex2_Inter_biol_efstandardsrev2004.pdf) (revised 2004). They are officially endorsed by the WHO Expert Committee on Biological Standardization (ECBS) based on the report of the international collaborative study which established their suitability for the intended use.