
Product Data Sheet

CT/NG Internal Control DNA Spike

Cat. #: CTNG-ICS

CT/NG Clinical Relevance:

Chlamydia (*Chlamydia trachomatis*) is the most prevalent sexually transmitted bacterial infection (~3-4 million cases annually). **Gonorrhea** (*Neisseria gonorrhoeae*) is a bacterial infection that often co-exists with Chlamydia (~700,000 cases annually). Infection with either organism can cause pelvic inflammatory disease (PID), ectopic pregnancy, and infertility in women, and testicular and prostate infections, and sterility in men.

CytoGenes offers primer mixes and controls allowing laboratories to detect *Chlamydia trachomatis* and *Neisseria gonorrhoeae* by quantitative PCR. Results are qualitative, indicating the presence or absence of each of the target organisms. An internal control primer set is available to verify the quality of the DNA extraction process.

Product Description:

The CTNG Internal Control DNA Spike is intended to verify the success of the sample DNA extraction process. Samples spiked with this control will yield positive results with the CTNG Internal Control Primer Mix. Failure of this assay to detect the internal control, or low level of detection could indicate failure of the DNA extraction process or the presence of PCR inhibitors.

Product Specifications:

The table below indicates the assay targets and concentrations for the Internal Control DNA Spike.

Cat #	Item	Assay Targets Included	Concentration
CTNG-ICS	Internal Control DNA Spike	Int Con Primer Mix	2e ³ copies/ul

Volume: 250µl
Reactions: 50 (5µl/ reaction)

For Investigational Use Only. The performance characteristics of this product have not been established.

Procedure:

Researchers are advised to optimize the use of these controls in any application. Samples should be spiked with this control prior to the DNA extraction process.

Storage:

Store at -20°C. Once open store at 4°C. Repeated freezing/thaw cycles should be avoided.

References:

1. Jaton K, Bille J, Greub G. A novel real-time PCR to detect *Chlamydia trachomatis* in first-void urine or genital swabs. *J Med Microbiol.* 2006 Dec;55(Pt 12):1667-74. PubMed PMID: 17108270.
2. Whiley DM, Limnios A, Moon NJ, Gehrig N, Goire N, Hogan T, Lam A, Jacob K, Lambert SB, Nissen MD, Sloots TP. False-negative results using *Neisseria gonorrhoeae* porA pseudogene PCR - a clinical gonococcal isolate with an *N. meningitidis* porA sequence, Australia, March 2011. *Euro Surveill.* 2011 May 26;16(21). pii: 19874. PubMed PMID: 21632019.