

Application Information / Information de soumission			
*Licence Name/Nom de l'homologation:	Application Number/Numéro de soumission		
ID NOW COVID-19	320087		
Licence # / # de l'homologation:	Application Type/Type de soumission:		
0	Interim Order		
Manufacturer/Fabricant:	Company ID/Identificateur d'entreprise:		
ABBOTT DIAGNOSTICS SCARBOROUGH, INC.	150768		
Risk Class:	Rationale:		
4	IVDD classification rule 2(a)		
*Licence Type/Type d'homologation:	Rationale:		
Test Kit ▼			
☐ Contains Controlled Substance(s) ☐ Contains Drug(s) ☐ Contains Biological Material(s)			

\*Intended Use and/or Indications for Use/ Utilisation Prévue et/ou Indications

ID NOW COVID-19 assay performed on the ID NOW Instrument is a rapid molecular in vitro diagnostic test utilizing an isothermal nucleic acid amplification technology intended for the qualitative detection of nucleic acid from the SARS-CoV-2 viral RNA in direct nasal, nasopharyngeal or throat swabs from individuals who are suspected of COVID-19 by their healthcare provider. Testing is authorized for laboratories certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA), 42 U.S.C. 263a, to perform moderate complexity/high complexity tests. The ID NOW COVID-19 assay is also authorized for use at the Point of Care (POC), i.e., in patient care settings operating under a CLIA Certificate of Waiver, Certificate of Compliance, or Certificate of Accreditation.

Results are for the identification of SARS-CoV-2 RNA. The SARS-CoV-2RNA is generally detectable in respiratory samples during the acute phase of infection. Positive results are indicative of the presence of SARS-CoV-2 RNA; clinical correlation with patient history and other diagnostic information is necessary to determine patient infection status. Positive results do not rule out bacterial infection or co-infection with other viruses. Testing facilities within the United States and its territories are required to report all positive results to the appropriate public health authorities.

Negative results should be treated as presumptive and, if inconsistent with clinical signs and symptoms or necessary for patient management, should be tested with different authorized or cleared molecular tests. Negative results do not preclude SARS-CoV-2 infection and should not be used as the sole basis for

patient management decisions. Negative results should be considered in the context of a patient"s recent exposures, history and the presence of clinical signs and symptoms consistent with COVID-19.

The ID NOW COVID-19 test is intended for use by medical professionals or trained operators who are proficient in performing tests using the ID NOW Instrument. The ID NOW COVID-19 test is only for use under the Food and Drug Administration"s Emergency Use Authorization.



OEM Licence Information					
OEM Licence Name :		OEM Manufac	cturer :		
OEM Intended Use and/or Indications for Use					
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Reason for Change			Comment(s)		
Change to classification of a device					
Manufacturer name change					
License name change					
Device name change					
Change to the purpose/indication of					
license					
Addition of device(s)					
Deletion of device(s)					
Daniel Charles			C		
Reason for Change			Comment(s)		
Change in name and/or address of the Private Label Manufacturer					
Private Label Manufacturei  Private Label License name change					
Private Label Device name change					
Addition of device(s)					
Deletion of device(s)					
Deletion of device(s)					
Certificate Screening Checklist:					
Contract		Coul Do John	(Comments (If Annillands)		
Cert # (new):		Cert Revisions /	/ Comments (If Applicable):		
Cert. # (old):					
Parlacing Frieting Control File (V/NI)					
Replacing Existing Cert on File (Y/N):					
Criteria		conforms	Comments/info for MDS		
Issued to full name of manufacturer as it app	ears				
on application/licence and label.					
Issued to complete civic address matching					
application/licence and label.					
Criteria are ISO 13485:2016 and Medical Dev	vices				
Regulations – Part 1 – SOR 98/282					
Scope activities limited to design, developme					
manufacture, production, servicing, installati	ion,				
or distribution.  Activities include "manufacture" or "product	ion"				
Activities include "manufacture" or "production" Activities include "design" or "development and					
development" for class III/IV devices.	unu				
Scope is unambiguous and covers app./lic.					
devices. Does not contain product		_			
names/models/licence numbers.					
Auditing Organisation is Authorized or					



Medical Devices Directorate

Recognized			
Statement of Authorization or Recognition.			
Field labelled "Effective Date"			
Field labelled "Expiry Date"			
Validity period ≤ 3 years			
Unique identification code labelled "certificate		□ new	☐ revised
number" or "certification document number"		□ new	□ reviseu
Name, title, and signature of certification			
authority			
Pagination (page x or y) included on all pages . All			
pages present.			
Method to verify validity			
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Screening	Decision		
Accept			▼
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Health	Canada
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Santé Canada

Check GMDN

Regulatory Action Reference Material	
Action for Screener	
Issue	
GMDN Description	
GMDN	
GMDN Name	