Fluorescence polarization system for rapid COVID-19 diagnosis

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Fig. S1. Real-time user interface. At the far left is a configuration panel where experimental parameters can be tuned, including (i) the number of measurements to collect, (ii) how long each measurement should take, and (iii) how many samplings to average in order to obtain a reliable measurement. The reference fluorescence anisotropy (FA) value (*r*₀) can also be set here. The main dashboard is divided into four quadrants, where the user can monitor the raw fluorescent intensity for both parallel and perpendicular FA detectors (upper left), as well as a continuously computed FA value (lower left). Temperature and PID control signals are continuously monitored (upper right) and multiple patient samples can be analyzed sequentially in a batch and plotted (lower right). The dashboard is shown running on Windows 7-64 bit, though it is fully cross-platform and can run on a variety of operating systems that support the Qt GUI toolkit (MacOS/Linux).



1 Raw Analog Signal Acquisition

Fig. S2. CODA signal processing flow. In *step 1*, fluorescence intensity data from parallel (red) and perpendicular (blue) channels are captured as 14-bit integers every 0.1 sec. These signals may contain common noise (orange arrows). The channels are then subtracted, normalized, and scaled by factor *F*, leading to the continuous anisotropy plot of *step 2*. Note that the anisotropy measurement is free of the common noise fluctuations. A rolling standard deviation of the most recent 40 anisotropy samplings is monitored during data collection to ensure that the values are stable. Finally, in *step 3*, a measurement is taken as the average of 40 samples, provided that their standard deviation is less than 0.5%.



Fig. S3. qRT-PCR for N1 RNA. (a) Cycle-dependent fluorescent signals of qRT-PCR in the presence of serially diluted N1 RNA. (b) Melting curve analysis was carried out on RT-PCR product of N1 RNA to validate the results of qRT-PCR. The observed melting temperature ($T_m = 81.1 \text{ °C}$) matches with a predicted value (80.6 °C).



Fig. S4. Optimization of the reporter probe. (a) The length of the reporter probe was varied and the resulting anisotropy signal from CRISPR cleavage was measured. The optimal length was found to be 9 bases. **(b)** The concentration of the 9-base probe was optimized to achieve the maximal anisotropy signal. The optimal concentration was found to be 0.1 μ M. The target concentration (SARS-CoV-2 plasmid control) was fixed at 10³ copy/ μ L. All experiments were performed in triplicate and the data are displayed as means ± s.e.m.



Fig. S5. CODA results of clinical samples. Three targets (N1, N2, RPP30) were assessed in clinical samples for COVID-19 detection. Data are displayed as mean ± s.e.m from triplicate measurements.

Table S1. Oligonucleotide sequences used in this study.	
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	Sequence (5' to 3')														
	N1-Forward RPA primer	AGG	CAG	CAG	TAG	GGG	AAC	TTC	TCC	TGC	TAG	AAT			
	N1-Reverse RPA primer	TTG	GCC	TTT	ACC	AGA	CAT	TTT	GCT	CTC	AAG	CTG			
	N1-Forward Cas12a gRNA	UAA	UUU	CUA	CUA	AGU	GUA	GAU	CAU	CAC	CGC	CAU	UGC	CAG	сс
	N1-Reverse Cas12a gRNA	UAA	UUU	CUA	CUA	AGU	GUA	GAU	UUG	CUG	CUG	CUU	GAC	AGA	UU
	N2-Forward RPA primer	GGA	ACT	GAT	TAC	AAA	CAT	TGG	CCG	CAA	ATT	GCA			
	N2-Reverse RPA primer	TGC	TTA	TTC	AGC	AAA	ATG	ACT	TGA	тст	TTG	AAA			
	N2-Forward Cas12a gRNA	UAA	บบบ	CUA	CUA	AGU	GUA	GAU	AAC	GCU	GAA	GCG	CUG	GGG	GC
	N2-Reverse Cas12a gRNA	UAA	บบบ	CUA	CUA	AGU	GUA	GAU	GGU	UGA	CCU	ACA	CAG	GUG	CC
CODA ^(a)	RPP30-Forward RPA primer	TAT	GCG	GCC	TCG	GAC	TTC	AGC	ATG	GCG	GTG				
	RPP30-Reverse RPA primer	ATC	CCA	GAG	ACT	CTG	GGA	GAC	CGC	AAC	TCA	С			
	RPP30-Forward Cas12a gRNA	UAA	บบบ	CUA	CUA	AGU	GUA	GAU	CUC	GCA	GGU	CCA	AAU	CUG	CA
	RPP30-Reverse Cas12a gRNA	UAA	บบบ	CUA	CUA	AGU	GUA	GAU	UUG	UGG	AGA	CAG	CCG	CUC	AC
	Reporter probe (5 mer)		-TTA	ΤT											
	Reporter probe (7 mer)	FAM-	-TAT	TAT	т										
	Reporter probe (9 mer)	FAM-	-TAT	TAT	TAT										
	Reporter probe (11 mer)	FAM-	-ATT	ATT	ATT	AT									
	Reporter probe (13 mer)	FAM-	-ATT	ATT	ATT	ATT	А								
SARS-CoV-2 N1 for IVT ^(b)	Forward primer	TAA	TAC	GAC	TCA	СТА	TAG	<u>GG</u> C	TCA	AGG	AAC	AAC	ATT	GCC	A
	Reverse primer	GCT	TTA	GTG	GCA	GTA	CGT	т							
SARS-CoV-2 N1	Forward primer	CAG	CAG	TAG	GGG	AAC	TTC	т							
for qRT-PCR	Reverse primer	AGA	CAT	TTT	GCT	CTC	AAG	CTG							

^(a) The colors of oligonucleotide sequences correspond to those of the domains depicted in Fig. 1(a). ^(b) Underlined sequence is a T7 promoter sequence.

Patient #	Age	Gender	COVID-19	Patient #	Age	Gender	COVID-19
1	62	Male	Positive	11	41	Female	Negative
2	62	Female	Positive	12	37	Female	Negative
3	69	Female	Positive	13	80	Female	Negative
4	60	Male	Positive	14	34	Female	Negative
5	60	Male	Positive	15	18	Male	Negative
6	62	Male	Positive	16	34	Female	Negative
7	50	Male	Positive	17	14	Female	Negative
8	79	Female	Positive	18	40	Female	Negative
9	64	Female	Positive	19	25	Female	Negative
10	23	Male	Positive	20	21	Male	Negative

 Table S2. Information of clinical samples.

System	Readout	Assay time (min)	LOD (copy/µL)	Assay characteristics	Reference			
Dual-functional plasmonic system	LSPR	14	1.13 × 10⁵	Specialized chip from microfabricationLow sensitivity	1			
Sandwich electrochemi- cal sensor	Electrochemistry	180	0.2	 0.2 Many assay steps including magnetic separation Long assay time 				
RT-PCR	Fluorescence	120	3.2	 Requiring precise temperature control Dual-labeled probe (fluorophore and quencher) Long assay time 	3			
RT-LAMP	Color	20	0.5	Complex primer designIsothermal amplification	4			
RT-RPA	Fluorescence	20	1.2	Dual-labeled probeIsothermal amplification2 steps	5			
NEAR	Fluorescence	17	20	Dual-labeled probeIsothermal amplification	6			
NASBA	Fluorescence	120	2.5	Long assay timeIsothermal amplification2 steps	7			
RT-LAMP & CRISPR/Cas	Color	40	10	Complex primer designIsothermal amplification2 steps	8			
RT-RPA & CRISPR/Cas	Fluorescence	50	0.07	Dual-labeled probeIsothermal amplification2 steps	9			
CODA (current work)	Fluorescence anisotropy	20	3	Isothermal amplificationRatiometric measurementsSingle step	-			

Table S3. Comparison of COVID-19 molecular tests.

References

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