Chromogranin A
Concentrated and Prediluted Cocktail Antibody
901-010-062917

Catalog Number: CM 010 A, B, C PM 010 AA IP 010 G10 OAI 010 T60

Description: 0.1, 0.5, 1.0 ml, concentrated 6.0 ml, prediluted 10 ml, prediluted 60 tests, prediluted

Dilution: 1:100 Ready-to-use Ready-to-use N/A N/A

Diluent: Da Vinci Green N/A N/A N/A N/A

Intended Use:
For In Vitro Diagnostic Use

Chromogranin A ([LK2H10 + PHE5]) is a mouse monoclonal antibody cocktail that is intended for laboratory use in the qualitative identification of chromogranin A protein by immunohistochemistry (IHC) in formalin-fixed paraffin-embedded (FFPE) human tissues. The clinical interpretation of any staining or its absence should be complemented by morphological studies using proper controls and should be evaluated within the context of the patient's clinical history and other diagnostic tests by a qualified pathologist.

Summary and Explanation:
This antibody recognizes a protein of 68-75 kDa, identified as Chromogranin A (a protein of 439-amino acid which is encoded on chromosome 14). Although the epitopes for [LK2H10] and [PHE5] are not precisely mapped, experimental data suggests that they are different. A cocktail of LK2H10 and PHE5 is specifically designed for sensitive detection of Chromogranin A in formalin-fixed, paraffin-embedded tissues. Chromogranin A is present in neuroendocrine cells throughout the body, including the neuroendocrine cells of the large and small intestine, adrenal medulla and pancreatic islets. It is an excellent marker for carcinoid tumors, pheochromocytomas, paragangliomas and other neuroendocrine tumors. Coexpression of Chromogranin A and neuron specific enolase (NSE) is common in paragangliomas and other neuroendocrine tumors. Coexpression of Chromogranin A and neuron specific enolase (NSE) is common in paragangliomas and other neuroendocrine tumors. Coexpression of Chromogranin A and neuron specific enolase (NSE) is common in paragangliomas and other neuroendocrine tumors. Coexpression of Chromogranin A and neuron specific enolase (NSE) is common in paragangliomas and other neuroendocrine tumors.

Principle of Procedure:
Antigen detection in tissues and cells is a multi-step immunohistochemical process. The initial step binds the primary antibody to its specific epitope. A secondary antibody may be applied to bind the primary antibody, followed by an enzyme labeled polymer; or an enzyme labeled polymer may be applied directly to bind the primary antibody. The detection of the bound primary antibody is evidenced by an enzyme-mediated colorimetric reaction.

Source: Mouse monoclonal
Species Reactivity: Human; others not tested
Isotype: IgG1, IgG2

Total Protein Concentration: ~10 mg/ml. Call for lot specific Ig concentration.

Epitope/Antigen: Chromogranin A
Cellular Localization: Finely granular cytoplasm
Positive Control: Pancreas or adrenal gland

Known Applications:
Immunohistochemistry (formalin-fixed paraffin-embedded tissues)
Supplied As: Buffer with protein carrier and preservative

Storage and Stability:
Store at 2°C to 8°C. Do not use after expiration date printed on vial. If reagents are stored under conditions other than those specified in the package insert, they must be verified by the user. Diluted reagents should be used promptly; any remaining reagent should be stored at 2°C to 8°C.

Protocol Recommendations (IntelliPATH and manual use):

Peroxide Block:
Block for 5 minutes with Biocare's Peroxidazed 1.

Protocol Recommendations (IntelliPATH and manual use) Cont'd:

Pretreatment: Perform heat retrieval using Biocare's Reveal Decloaker. Refer to the Reveal Decloaker product data sheet for specific instructions.

Primary Antibody: Incubate for 5-10 minutes at RT with Biocare's Background Punisher.

Primary Antibody: Incubate for 30 minutes at RT.

Probe: Incubate for 10 minutes at RT with a secondary probe.

Polymer: Incubate for 10-20 minutes at RT with a tertiary polymer.

Chromogen:
Incubate for 5 minutes at RT with Biocare's DAB -OR- Incubate for 5-7 minutes at RT with Biocare's Warp Red.

Counterstain:
Counterstain with hematoxylin. Rinse with deionized water. Apply Tha's Bluing Solution for 1 minute. Rinse with deionized water.

intelliPATH Automated Slide Stainer:
IP010 is intended for use on the intelliPATH Automated Slide Stainer. Refer to the intelliPATH Automated Slide Stainer manual for specific instructions on its use. When using the intelliPATH, peroxide block with intelliPATH Peroxidase Blocking Reagent (IPB5000) may be performed following heat retrieval.

Protocol Recommendations (ONCORE Automated Slide Staining System):
OAI010 is intended for use with the ONCORE Automated Slide Staining System. Refer to the ONCORE Automated Slide Staining System User Manual for specific instructions on its use. Protocol parameters in the ONCORE Automated Slide Stainer Protocol Editor should be programmed as follows:

Protocol Name: Chromogranin A
Protocol Template (Description): Ms HRP Template 1
Dewaxing (DS Option): DS Buffer
Antigen Retrieval (AR Option): AR2, low pH; 101°C
Reagent Name, Time, Temp.: Chromogranin, 30 min., 25°C

Technical Note:
This antibody has been optimized for use with Biocare's MACH 4 Universal HRP-Polymer Detection, intelliPATH Universal HRP Detection Kit and ONCORE HRP Detection. Use TBS for washing steps.

Limitations:
The optimum antibody dilution and protocols for a specific application can vary. These include, but are not limited to: fixation, heat-retrieval method, incubation times, tissue section thickness and detection kit used. Due to the superior sensitivity of these unique reagents, the recommended incubation times and titer lists are not applicable to other detection systems, as results may vary. The data sheet recommendations and protocols are based on exclusive use of Biocare products. Ultimately, it is the responsibility of the investigator to determine optimal conditions. The clinical interpretation of any positive or negative staining should be evaluated within the context of clinical presentation, morphology and other histopathological criteria by a qualified pathologist. The clinical interpretation of any positive or...
Limitations Cont'd:

negative staining should be complemented by morphological studies using proper positive and negative internal and external controls as well as other diagnostic tests.

Quality Control:


Precautions:

1. This antibody contains less than 0.1% sodium azide. Concentrations less than 0.1% are not reportable hazardous materials according to U.S. 29 CFR 1910.1200, OSHA Hazard communication and EC Directive 91/155/EC. Sodium azide (NaN₃) used as a preservative is toxic if ingested. Sodium azide may react with lead and copper plumbing to form highly explosive metal azides. Upon disposal, flush with large volumes of water to prevent azide build-up in plumbing. (Center for Disease Control, 1976, National Institute of Occupational Safety and Health, 1976) (7)

2. Specimens, before and after fixation, and all materials exposed to them should be handled as if capable of transmitting infection and disposed of with proper precautions. Never pipette reagents by mouth and avoid contacting the skin and mucous membranes with reagents and specimens. If reagents or specimens come in contact with sensitive areas, wash with copious amounts of water. (8)

3. Microbial contamination of reagents may result in an increase in nonspecific staining.

4. Incubation times or temperatures other than those specified may give erroneous results. The user must validate any such change.

5. Do not use reagent after the expiration date printed on the vial.

6. The SDS is available upon request and is located at http://biocare.net.

Troubleshooting:

Follow the antibody specific protocol recommendations according to data sheet provided. If atypical results occur, contact Biocare’s Technical Support at 1-800-542-2002.

References:


