Glial Fibrillary Acidic Protein (GFAP(P))
Concentrated and Prediluted Polyclonal Antibody
Control Number: 901-040-101714

Catalog Number: CP 040 A, B
Description: 0.1, 0.5 ml, concentrated
Dilution: 1:100-1:200
Diluent: Da Vinci Green

Intended Use:
For In Vitro Diagnostic Use

Summary and Explanation:
This antibody reacts with human GFAP and has been solid phase absorbed with human and cow serum. Anti-GFAP stains astrocytes and some groups of ependymal cells and their corresponding tumors. In the peripheral nervous system, Schwann cells, enteric glial cells and satellite cells are stained. Weak staining of axons has been observed which is caused by cross-reaction with neurofilament. It is useful for distinguishing neoplasms of astrocytic origin from other neoplasms in the central nervous system. Negative staining has been observed with lymphatic tissue, muscle, gastrointestinal tract, liver, kidney, pancreas and bladder.

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. After labeling the antigen with a primary antibody, an enzyme labeled polymer is added to bind to the primary antibody. The detection of the bound antibody is evidenced by a colorimetric reaction.

Source: Rabbit polyclonal
Species Reactivity: Human, mouse and rat
Clone: N/A
Isotype: N/A
Total Protein Concentration: ~10 mg/ml. Call for lot specific Ig concentration.
Epitope/Antigen: Gial Fibrillary Acidic Protein
Cellular Localization: Cytoplasmic
Positive Control: Normal brain or astrocytoma
Normal Tissue: Normal brain
Abnormal Tissue: Astrocystoma
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:
Peroxide Block: Block for 5 minutes with Biocare's Peroxidized 1.

Dilution:
Digest with Pepsin enzyme for 5 minutes at 37°C - or - for 15 minutes at RT.

Protocol Recommendations Cont'd:
Protein Block:
Optional: Incubate for 10-15 minutes at RT with Biocare's Background Sniper.
Primary Antibody: Incubate for 30 minutes at RT.
Probe: N/A
Polymer: Incubate for 30 minutes at RT with a polymer.
Chromogen: Incubate for 5 minutes at RT when using Biocare's DAB. - OR - Incubate for 10-20 minutes at RT when using Biocare's Vulcan Fast Red.
Counterstain: Counterstain with Hematoxylin. Rinse with deionized water. Apply Tacha's Bluing solution for 1 minute. Rinse with deionized water.

Technical Note:
This antibody has been standardized with Biocare's MACH 4 detection system. It can also be used on an automated staining system and with other Biocare polymer detection kits. Use TBS buffer 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 titers listed 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. These products are tools that can be used for interpretation of morphological findings in conjunction with other diagnostic tests and pertinent clinical data by a qualified pathologist.

Quality Control:
Refer to NCCLS Quality Assurance for Immunocytochemistry approved guidelines, December 1999 MM4-A Vol.19 No.26 for more information about tissue controls.

Precautions:
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)
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. Microbial contamination of reagents may result in an increase in nonspecific staining. Incubation times or temperatures other than those specified may give erroneous results. The user must validate any such change. The MSDS is available upon request.

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.
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References:
5. Xu QZ, Duan HL, Lu DH. Immunohistochemical quantitative study of glial fibrillary acid protein and vimentin astrocytomas. Chuang-hua Ping Li Hsueh Tsa Chih 1994 Apr;23(2):66-68.