Carcinoembryonic Antigen (CEA{M})

Concentrated and Prediluted Monoclonal Antibody

Control Number: 902-058-090717



Catalog Number:ACR 058 A, B, CAPR 058 AADescription:0.1, 0.5, 1.0 ml, concentrated6.0 ml, predilutedDilution:1:100Ready-to-use

Diluent: Da Vinci Green N/A

Intended Use:

For Research Use Only. Not for use in diagnostic procedures.

Summary and Explanation:

The CEA gene family belongs to the immunoglobulin gene superfamily (IgSF) and comprises a large number of genes. The cell surface associated CEA proteins are heavily glycosylated, abundantly expressed and multifunctional. The CEA (CD66e) COL-1 clone shows no detectable reactivity for other CEA family members such as NCA or BGP. COL-1 is useful in detecting early foci of gastric carcinoma and distinguishing pulmonary adenocarcimomas from mesothelioma. It stains many types of adenocarcinoma, but does not stain benign glands, stroma, or malignant prostatic cells. Normal colon, without colon disease, is unreactive, but a weak reactivity was in normal-appearing mucosa several centimeters remote from colon cancer (6).

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, a secondary antibody is added to bind to the primary antibody. An enzyme label is then added to bind to the secondary antibody; this detection of the bound antibody is evidenced by a colorimetric reaction.

Source: Mouse monoclonal

Species Reactivity: Human; others not tested.

Clone: COL-1

Isotype: IgG2a/kappa

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

concentration.

Epitope/Antigen: CEA

Cellular Localization: Cytoplasmic and lumenal membrane

Positive Control: Colon carcinoma

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.

Staining Protocol Recommendations:

Peroxide Block: Block for 5 minutes with Biocare's Peroxidazed 1. **Pretreatment:** Perform heat retrieval using Biocare's Diva Decloaker. Refer to the Diva Decloaker product data sheet for specific instructions.

Protein Block (Optional): 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 Tacha's Bluing Solution for $\bf 1$ minute. Rinse with deionized water.

Technical Note:

This antibody has been standardized with Biocare's MACH 4 detection system. Use TBS buffer for washing steps.

Limitations:

This product is provided for Research Use Only (RUO) and is not for use in diagnostic procedures. Suitability for specific applications may vary and it is the responsibility of the end user to determine the appropriate application for its use.

Precautions:

- 1. This antibody contains less than 0.1% sodium azide. Concentrations less than 0.1% are not reportable hazardous material according to U.S. 29 CFR 1910.1200, OSHA Hazard communication and EC Directive 91/155/EC. Sodium azide (NaN $_3$) 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 expiration date printed on the vial.
- 6. The SDS is available upon request and is located at http://biocare.net.

Technical Support:

Contact Biocare's Technical Support at 1-800-542-2002 for questions regarding this product.

References:

- 1. Luo W, *et al.* Association of an 80 kDa protein with C-CAM1 cytoplasmic domain correlates with C-CAM1-mediated growth inhibition. Oncogene. 1998 Mar 5;16(9):1141-7.
- 2. Obrink B. ČEA adhesion molecules: multifunctional proteins with signal-regulatory properties. Curr Opin Cell Biol. 1997 Oct; 9(5): 616-26.
- 3. Screaton RA, Penn LZ, Stanners CP. Carcinoembryonic antigen, a human tumor marker, cooperates with Myc and Bcl-2 in cellular transformation. J Cell Biol. 1997 May 19;137(4):939-52.
- 4. Nollau P, *et al.* Expression of CD66a (human C-CAM) and other members of the carcinoembryonic antigen gene family of adhesion molecules in human colorectal adenomas. Cancer Res. 1997 Jun 15;57(12):2354-7.
- 5. Rojas M, *et al.* Radical differences in functions of closely related members of the human carcinoembryonic antigen gene family. Cell Growth Differ. 1996 May;7(5):655-62.



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References Cont'd:

- 6. Shi ZR, Tacha D, Itzkowitz SH. Monclonal antibody COL-1, which reacts with restricted epitopes on carcinoembryonic antigen: an immunohistochemical study. J Histochem Cytochem. 1994 Sept;42(9):1215-9.
- 7. Center for Disease Control Manual. Guide: Safety Management, NO. CDC-22, Atlanta, GA. April 30, 1976 "Decontamination of Laboratory Sink Drains to Remove Azide Salts."
- 8. Clinical and Laboratory Standards Institute (CLSI). Protection of Laboratory Workers from Occupationally Acquired Infections; Approved Guideline-Fourth Edition CLSI document M29-A4 Wayne, PA 2014.



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