Estrogen Receptor (ER) [SP1]
Concentrated and Prediluted Rabbit Monoclonal Antibody
Control Number: 901-301-061114

Catalog Number: ACI 301 A, B, C
Description: 0.1, 0.5, 1.0 ml, concentrated
Dilution: 1:50-1:100
Diluent: Renoir Red

Intended Use:
For In Vitro Diagnostic Use
Estrogen Receptor (ER) [SP1] is a rabbit monoclonal antibody that is intended for laboratory use in the qualitative identification of estrogen receptor (ER) 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.

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Summary and Explanation:
Human estrogen receptor (ER) is a 66 kDa protein that acts as an estrogen-dependent, nuclear hormone receptor. Studies have shown ER is present in the nuclei of epithelial cells in normal breast and endometrial tissues, as well as a subset of breast carcinomas. The SP1 clone is a high affinity rabbit monoclonal antibody directed against an epitope of the C-terminus of the ER protein (1). SP1 has been shown to stain formalin-fixed paraffin-embedded tissues. The robustness of SP1 has been demonstrated by successful immunohistochemistry using lower temperatures for antigen retrieval (e.g. 80 or 95°C), and in some instances, staining can be obtained even without antigen retrieval (2-3).

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 then added to bind to the primary antibody. This detection of the bound antibody is evidenced by a colorimetric reaction.

Source: Rabbit monoclonal
Species Reactivity: Human; others not tested
Clone: SP1
Isotype: IgG

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

Protocol Recommendations:

Protocol Recommendations Cont’d:
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 1 minute. Rinse with deionized water.

Technical Note:
This antibody has been standardized with Biocare's MACH 2 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. 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 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 (Na₃N₃) 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) (5)
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 into contact with sensitive areas, wash with copious amounts of water. (6)
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.
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References: