# Ki-67 + Caspase-3

Prediluted Multiplex Cocktail (4-Step) Control Number: 901-240DS-090917

| Catalog Number: | PPM 240 DS AA      |
|-----------------|--------------------|
| Description:    | 6.0 ml, prediluted |
| Dilution:       | Ready-to-use       |
| Diluent:        | N/A                |

#### Intended Use:

For In Vitro Diagnostic Use

Ki-67 + Caspase-3 is a cocktail of mouse monoclonal and rabbit polyclonal antibodies that is intended for laboratory use in the qualitative identification of Ki-67 and caspase -3 proteins 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 Multiplex IHC was designed to provide information on cell death vs. cell proliferation rates. The Ki-67 nuclear antigen is associated with cell proliferation. It is found throughout the cell cycle that includes the G1, S, G2, and M phases; but not the (GO) phase.

Apoptosis is a process in which cells activate an intrinsic suicide mechanism and destroy themselves. The proteases that mediate this execution are called caspases (cysteinyl-aspartic acid proteases). Apoptosis has gained central importance in the study of many biological processes, including neoplasia, neurodegenerative diseases, and development. Cleaved caspase-3 detects endogenous levels of the large fragment (17/19 kDa) of activated caspase-3 resulting from cleavage adjacent to (Asp175). Activation of caspase-3 requires proteolytic processing of its inactive zymogen into active p17 and p12 subunits. Cleavage of caspase-3 requires aspartic acid at the P1 position. This antibody does not cross-react with other cleaved caspases. Ki-67 is a mouse monoclonal antibody and caspase-3 (cleaved) is an affinity purified rabbit polyclonal antibody.

## **Principle of Procedure:**

A Multiplex IHC stain can be accomplished in four major steps. The initial step consists of an antibody cocktail with at least one mouse and one rabbit antibody. This cocktail is applied to the tissue and will bind with two or more target antigens. A multiplex detection cocktail of horseradish peroxidase (HRP) and alkaline phosphatase (AP) conjugated secondary antibodies is applied. The third step consists of the addition of DAB-Substrate that binds to the HRP and produces a brown chromogenic reaction product. The fourth step consists of a Fast Red/Warp Red that binds to the AP and produces a red chromogenic reaction product.

Source: Mouse monoclonal and Rabbit polyclonal

Species Reactivity: Human; others not tested

Clone: DVB-2

Isotype: IgG<sub>1</sub> (Ki-67 only)

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

Epitope/Antigen: Ki-67 and Caspase-3

Cellular Localization:

Ki-67: (nuclear): brown Caspase-3: (cytoplasmic / nuclear): red

Positive Control: Tonsil or colon cancer

#### 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 reagent after the expiration date printed on the vial. If reagents are stored under conditions other than those specified in the package insert, they must be verified by the user.

## Protocol Recommendations:

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

Pretreatment Solution (recommended): Diva

Pretreatment Protocol:

#### Heat Retrieval Method:

Retrieve sections under pressure using Biocare's Decloaking Chamber, followed by a wash in distilled water; alternatively, steam tissue sections for 45-60 minutes. Allow solution to cool for 10 minutes then wash in distilled water.

**Protein Block (Optional):** Incubate for 5-10 minutes at RT with Biocare's Background Punisher.

**Primary Antibody:** Incubate for 30 minutes at RT.

**Double Stain Detection:** Incubate for 30 minutes at RT using Biocare's MACH 2 Double Stain 2.

Chromogen (1):

Incubate for 5 minutes at RT with Biocare's Betazoid DAB.

**Chromogen (2):** 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 Notes:**

This antibody has been standardized with Biocare's MACH 2 Double Stain 2. It can also be used on an automated staining system. 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:**

Refer to CLSI Quality Standards for Design and Implementation of Immunohistochemistry Assays; Approved Guideline-Second edition (I/LA28-A2). CLSI Wayne, PA, USA (www.clsi.org). 2011

### **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 (NaN<sub>3</sub>) 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)

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.

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 MSDS is available upon request and is located at http://biocare. net/support/msds/.



60 Berry Drive Pacheco, CA 94553 USA



EC REP EMERGO EUROPE

Prinsessegracht 20 2514 AP The Hague The Netherlands



# Ki-67 + Caspase-3

# Prediluted Multiplex Cocktail (4-Step) Control Number: 901-240DS-090917

# References:

1. Gown AM, Willingham MC. Improved detection of apoptotic cells in archival paraffin sections: Immunohistochemistry using antibodies to cleaved caspase 3. J Histochem Cytochem 2002 Apr;50(4):449-54

2. 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."

3. Clinical and Laboratory Standards Institute (CLSI). Protection of Laboratory workers from occupationally Acquired Infections; Approved guideline-Third Edition CLSI document M29-A3 Wayne, PA 2005.

### **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.





The Netherlands

Tel: 800-799-9499 I www.biocare.net I Fax: 925-603-8080