

MACH 3 Mouse AP-Polymer Detection

Biotin-Free Detection
Polymer Detection Kit
901-M3M532-071317

BIOCARE
M E D I C A L

Catalog Number: M3M532 G, H, L

Description: 6.0, 25, 100 ml

Intended Use:

For In Vitro Diagnostic Use

Summary & Explanation:

MACH 3 Mouse AP-Polymer Detection is a two-step, micro-polymer detection system that provides excellent specificity and sensitivity for mouse primary antibodies. This biotin-free detection uses a specific probe to detect mouse monoclonal antibodies followed by an alkaline phosphatase (AP) labeled micro-polymer that binds to the probe. Upon addition of a suitable chromogenic substrate, the AP enzyme catalyzes the conversion of the chromogen into a colored product, thus permitting visualization of the primary antibody. The innovative micro-polymer technology increases staining sensitivity 5 to 20 times when compared to other AP detection kits, such as Envision+. It can be used manually and on automated stainers.

Known Applications:

Immunohistochemistry (formalin-fixed paraffin-embedded tissues)

Supplied As:

6ml Kit

MACH 3 Mouse Probe (MP530G) 6ml

MACH 3 Mouse AP-Polymer (MAP532G) 6ml

25ml Kit

MACH 3 Mouse Probe (MP530H) 25ml

MACH 3 Mouse AP-Polymer (MAP532H) 25ml

100ml Kit

MACH 3 Mouse Probe (MP530L) 100ml

MACH 3 Mouse AP-Polymer (MAP532L) 100ml

Materials and Reagents Needed But Not Provided:

Microscope slides, positively charged

Desert Chamber* (Drying oven)

Positive and negative tissue controls

Xylene (Could be substituted with xylene substitute*)

Ethanol or reagent alcohol

Decloaking Chamber* (Pressure cooker)

Deionized or distilled water

Wash buffer*(TBS)

Pretreatment reagents*

Enzyme digestion*

Peroxidase block*

Protein block*

Primary antibody*

Negative control reagents*

Chromogens*

Hematoxylin*

Bluing reagent*

Mounting medium*

* Biocare Medical Products: Refer to a Biocare Medical catalog for further information regarding catalog numbers and ordering information. Certain reagents listed above are based on specific application and detection system used.

Species Reactivity:

Mouse IgG heavy and light chains

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.

Protocol Recommendations:

Deparaffinization: Deparaffinize slides in Slide Brite or xylene. Hydrate slides in a series of graded alcohols to water.

Peroxide Block (Optional): Block for 5 minutes with Biocare's Peroxidized 1.

Pretreatment Solution/Protocol: Please refer to the respective primary antibody data sheet for recommended pretreatment solution and protocol.

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

Primary Antibody: Please refer to the respective primary antibody data sheet for incubation time.

Probe: Incubate for 10 minutes at RT with MACH 3 Mouse Probe.

Polymer: Incubate for 10 minutes at RT with MACH 3 Mouse AP-Polymer.

Chromogen: 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:

1. Use TBS wash buffer only. PBS wash buffers will inhibit alkaline phosphatase staining.
2. Primary Antibody titers can be dramatically increased when using Biocare's Revival Series Diluents and Heat Retrieval Solutions.
3. MACH 3 Mouse and Rabbit detection cannot be used with mouse, rat or rabbit tissues.
4. Do not use goat serum as a protein block.
5. Do not use Biocare's Background Eraser or Background Terminator.

Limitations:

The 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

Covered by one or more of the following US Pat. Nos. 6,686,461; 6,800,728; 7,102,024; 7,173,125; 7,462,689.

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Precautions:

1. This product is not classified as hazardous. The preservative used in this reagent is Proclin 300 and the concentration is less than 0.25%. Overexposure to Proclin 300 can cause skin and eye irritation and irritation to mucous membranes and upper respiratory tract. The concentration of Proclin 300 in this product does not meet the OSHA criteria for a hazardous substance. Wear disposable gloves when handling reagents.
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.

Precautions Cont'd:

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/>.
7. Consult OSHA, federal, state or local regulations for disposal of any toxic substances. Proclin™ is a trademark of Rohm and Haas Company, or of its subsidiaries or affiliates.

Troubleshooting:

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

Troubleshooting Guide:

No Staining

1. Critical reagent (such as primary antibody) omitted.
2. Staining steps performed incorrectly or in the wrong order.
3. Heat-induced epitope retrieval (HIER) step was performed incorrectly using the wrong time, the wrong order or the wrong pretreatment.
4. Insufficient amount of antigen.
5. Secondary antibody at too low of a concentration.
6. Primary antibody incubation period too short.
7. Improperly mixed substrate and/or chromogen solution(s).

Weak Staining

1. Tissue is either over-fixed or under-fixed.
2. Primary antibody incubation time too short.
3. Low expression of antigen.
4. Heat-induced epitope retrieval (HIER) steps performed incorrectly using wrong time, in the wrong order, or the wrong pretreatment.
5. Over-development of substrate.
6. Excessive rinsing during wash steps.
7. Omission of critical reagent.
8. Incorrect procedure in reagent preparation.
9. Improper procedure in test steps.

Non-specific or High Background Staining

1. Tissue is either over-fixed or under-fixed.
2. Endogenous alkaline phosphatase (not blocked with levamisole).
3. Incorrect blocking reagent used; blocker should be from same species in which the secondary antibody was raised.
4. Tissue may need a longer or a more specific protein block.
5. Substrate is overly-developed.
6. Tissue was inadequately rinsed.
7. Deparaffinization incomplete.
8. Tissue damaged or necrotic.

Troubleshooting Guide Cont'd:

Tissues Falling Off

1. Slides were not positively charged.
2. A slide adhesive was used in the waterbath.
3. Tissue was not dried properly.
4. Tissue contained too much fat.

Specific Staining Too Dark

1. Concentrated antibody not diluted out properly (being used at too high of a concentration).
2. Incubation of primary antibody, link or label too long.