

CD79a

Concentrated and Prediluted Monoclonal Antibody
901-067-052423

BIOCARE
M E D I C A L

Catalog Number:	CM 067 A, C	PM 067 AA	VLTM 067 G20
Description:	0.1, 1.0 mL, conc.	6.0 mL, RTU	20 mL, RTU
Dilution:	1:100	Ready-to-use	Ready-to-use
Diluent:	Van Gogh Yellow	N/A	N/A

Intended Use:

For In Vitro Diagnostic Use

CD79a [HM47/A9] is a mouse monoclonal antibody that is intended for laboratory use in the qualitative identification of CD79a 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.

Summary and Explanation:

CD79a is an intracellular component of the signal transduction pathway of the B-cell Receptor (BCR). CD79a first appears at pre-B-cell stage, early in maturation. It persists until the plasma cell stage, when it is found as an intracellular component. CD79a is found in the majority of acute leukemias of precursor-B-cell type (2). It is also found in B-cell lines, B-cell lymphomas, and in some myelomas (1-6). It is not present in myeloid or T-cell lines (1-2). In a study, when tested on a total of 454 paraffin-embedded tissues, it reacted with 97% of B-cell neoplasms. This antibody labels precursor B-cell acute lymphoblastic leukemia samples, making it the most reliable B-cell marker for this disorder (7). It is therefore highly recommended that CD79a be used in conjunction with CD20 [L26] for the identification of B-cell neoplasms. CD79a for B-cell is conserved across many species. Therefore, this antibody may be useful to aid in the identification of lymphocyte subsets in species other than human.

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 one-, two- or three-step detection procedure can be employed. The one-step procedure will feature an enzyme-labeled polymer that binds to the primary antibody. A two-step procedure will feature a secondary antibody added to bind to the primary antibody. An enzyme-labeled polymer is then added to bind to the secondary antibody. The three-step detection procedure will feature a secondary antibody added to bind to the primary antibody followed by a linker antibody step for maximum binding. An enzyme-labeled polymer is then added to bind to the linker antibody. These detections of the bound antibodies are evidenced by a colorimetric reaction.

Source: Mouse monoclonal

Species Reactivity: Human and rat

Clone: HM47/A9

Isotype: IgG1/kappa

Protein Concentration: Call for lot specific Ig concentration.

Epitope/Antigen: CD79a

Cellular Localization: Cell membrane

Positive Tissue Control: Germinal center B-cells in lymph node or tonsil

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. The product is stable to the expiration date printed on the label, when stored under these conditions. Do not use after expiration date. Diluted reagents should be used promptly; any remaining reagent should be stored at 2°C to 8°C.

Protocol Recommendations (VALENT® Automated Slide Staining Platform):

VLTM067 is intended for use with the VALENT. Refer to the User Manual for specific instructions for use. Protocol parameters in the Protocol Manager should be programmed as follows:

Deparaffinization: Deparaffinize for 8 minutes with Val DePar.

Pretreatment: Perform heat retrieval at 98°C for 60 minutes using Val AR-Lo pH, 5X (use at 1X).

Peroxidase Block: Block for 5 minutes with Val Peroxidase Block.

Protein Block (Optional): Incubate for 10-20 minutes at RT with Val Background Block.

Primary Antibody: Incubate for 20 minutes.

Secondary: Incubate for 10 minutes with Val Mouse Secondary.

Linker: Incubate for 10 minutes with Val Universal Linker.

Polymer: Incubate for 10 minutes with Val Universal Polymer.

Chromogen: Incubate for 5 minutes with Val DAB.

Counterstain: Counterstain for 5 minutes with Val Hematoxylin.

Protocol Recommendations (intelliPATH FLX® and manual use):

Peroxide Block: Block for 5 minutes with Peroxidized 1.

Pretreatment: Perform heat retrieval using Reveal Decloaker. Refer to the Reveal Decloaker product data sheet for specific instructions.

Protein Block (Optional): Incubate for 5-10 minutes at RT with 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 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, for intelliPATH FLX and manual use, has been standardized with MACH 4 detection system. Use TBS 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.

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 (NaN₃) used as a preservative is toxic if ingested. Sodium azide may react with lead and copper plumbing to



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Precautions Cont'd:

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) (8)

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. (9)

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.

References:

1. Milner RJ, *et al.* Immunophenotypic classification of canine malignant lymphoma on formalin-fixed paraffin wax-embedded tissue by means of CD3 and CD79a cell markers. *Onderstepoort J Vet Res.* 1996 Dec; 63(4):309-13.

2. Astsaturov IA, *et al.* Differential expression of B29 (CD79b) and mb-1 (CD79a) proteins in acute lymphoblastic leukaemia. *Leukemia.* 1996 May;10(5):769-73.

3. Ashton-Key M, *et al.* Follicular Hodgkin's disease. *Am J Surg Pathol.* 1995 Nov;19 (11):1294-9.

4. Chetty R, *et al.* Immunohistochemistry in apparently normal bone marrow trephine specimens from patients with nodal follicular lymphoma. *J Clin Pathol.* 1995 Nov;48:1035-8.

5. Hashimoto S, *et al.* Alternative splicing of CD79a (Igalpha/mb-1) and CD79b (Igbeta/B29) RNA transcripts in human B cells. *Mol Immunol.* 1995 Jun;32(9):651-9.

6. Hemsley SW, *et al.* Immunohistological staining of lymphoid tissue in four Australian marsupial species using species cross-reactive antibodies. *Immunol Cell Biol.* 1995 Aug;73(4):321-5.

7. Mason Dy, *et al.* CD79a: a novel marker for B-cell neoplasms in routinely processed tissue samples. *Blood.* 1995 Aug 15;86(4):1453-9.

8. 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."

9. 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.