Calretinin
Concentrated and Prediluted Polyclonal Antibody
901-092-022219

<table>
<thead>
<tr>
<th>Catalog Number:</th>
<th>Description:</th>
<th>Dilution:</th>
<th>Diluent:</th>
</tr>
</thead>
<tbody>
<tr>
<td>CP 092 A, C</td>
<td>0.1, 1.0 mL, conc.</td>
<td>1:100</td>
<td>Van Gogh Yellow</td>
</tr>
<tr>
<td>PP 092 AA</td>
<td>6.0 mL, RTU</td>
<td>Ready-to-use</td>
<td>N/A</td>
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<tr>
<td>IP 092 G10</td>
<td>10 mL, RTU</td>
<td>Ready-to-use</td>
<td>N/A</td>
</tr>
<tr>
<td>OAI 092 T60</td>
<td>60 tests, RTU</td>
<td>Ready-to-use</td>
<td>N/A</td>
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<tr>
<td>VLTR 092 G20</td>
<td>20 mL, RTU</td>
<td>Ready-to-use</td>
<td>N/A</td>
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</tbody>
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Intended Use:
For In Vitro Diagnostic Use
Calretinin is a rabbit polyclonal antibody that is intended for laboratory use in the qualitative identification of calretinin 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:
Calretinin is a calcium binding protein that is related to calmodulin and calbindin-D28k and is found mainly in neuronal tissue. It is present in subsets of neurons throughout the brain and spinal cord, including sensory ganglia. Studies have shown that Calretinin, like calbindin, may be neuroprotective. Immunohistochemical studies have recently shown Calretinin to be useful in distinguishing mesotheliomas from lung adenocarcinomas. However, it is recommended that a panel of antibodies be used in tandem with Calretinin. Other antibodies recommended are CK 5/6, E-cadherin, WT-1, CEA, B72.3, Vimentin and D2-40. Calretinin may not stain all mesotheliomas.

Protocol Recommendations (VALENt Automated Slide Staining Platform) Cont’d:
Peroxidase Block: Block for 5 minutes with Val Peroxidase Block.
Protein Block: Incubate for 10 minutes with Val Background Block.
Primary Antibody: Incubate for 20 minutes.
Secondary: N/A
Linker: Incubate for 10 minutes with Val Universal Linker.
Polymer: Incubate for 20 minutes with Val Universal Polymer.
Chromogen: Incubate for 5 minutes with Val DAB.

Protocol Recommendations (intelliPATH FLX® and manual use):
Peroxide Block: Block for 5 minutes with Peroxidased 1.
Pretreatment: Perform heat retrieval using Diva Decloaker. Refer to the Diva Decloaker data sheet for specific instructions.
Protein Block (Optional): Incubate for 5-10 minutes at RT with Background Punisher.
Primary Antibody: Incubate for 30-45 minutes at RT.
Probe: N/A
Polymer: Incubate for 30 minutes at RT with a secondary-conjugated 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.

Protocol Recommendations (ONCORE™ Automated Slide Staining System):
OA1092 is intended for use with the ONCORE. Refer to the User Manual for specific instructions for use. Protocol parameters in the Protocol Editor should be programmed as follows:
Protocol Name: Calret Rb
Protocol Template (Description): Rb HRP Template 1
Dewaxing (DS Option): DS2
Antigen Retrieval (AR Option): AR2, low pH; 85°C
Reagent Name, Time, Temp.: Calret Rb, 30 min., 25°C

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:

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 (NaNaN₃) 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) (6)
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. (7)
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: