

CD10

Concentrated and Prediluted Monoclonal Antibody
901-129-052523

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M E D I C A L

Available Product Formats				
Format	Catalog Number	Description	Dilution	Diluent
Concentrate	CM 129 AK, BK, CK	0.1, 0.5, 1.0 mL	1:100	Renoir Red
Predilute	PM 129 AA	6.0 mL	Ready-to-use	N/A
intelliPATH FLX	IP 129 G10	10 mL	Ready-to-use	N/A
ONCORE	OAI 129 T60	60 tests	Ready-to-use	N/A
ONCORE Pro	OPAI 129 T60	60 tests	Ready-to-use	N/A
UltraLine – For BenchMark	AVI 129 G	6.0 mL	Ready-to-use	N/A
Q Series– For Leica BOND-III	ALI 129 G7	7.0 mL	Ready-to-use	N/A

Intended Use:

For In Vitro Diagnostic Use

CD10 [56C6] is a mouse monoclonal antibody that is intended for laboratory use in the qualitative identification of CD10 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:

Human CD10, also known as common acute lymphoblastic leukemia (CALLA), has been shown to react with TdT+ lymphoblastic leukemia, follicular germinal cell lymphoma, Burkitt's lymphoma, and chronic myelocytic leukemia. Studies have also shown that CD10 marks normal early lymphoid progenitor cells, immature B-cells in adult bone marrow, and germinal cells in normal tonsil and normal lymphoid tissue. It is also expressed in some non-lymphoid tissues such as fibroblasts, breast myoepithelium, and brush border of kidney. CD10 has been used in a panel for mantle cell lymphoma with cyclin D1(+), CD43 (+), CD5 (+), IgM (+), CD23 (-) and CD10 (-).

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

Source: Mouse monoclonal

Species Reactivity: Human; others not tested

Clone: 56C6

Isotype: IgG1

Protein Concentration: Call for lot specific Ig concentration.

Epitope/Antigen: CD10

Cellular Localization: Cell membrane

Positive Tissue Control: Tonsil or kidney

Known Applications:

Immunohistochemistry (formalin-fixed paraffin-embedded tissues)

Supplied As: Buffer with protein carrier and preservative
Renoir Red Diluent (PD904)

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 (intelliPATH FLX® and manual use):

Peroxide Block: Block for 5 minutes with Peroxidized 1.

Pretreatment: Perform heat retrieval using Borg or Reveal Decloaker. Refer to the Borg or 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 30-45 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.

intelliPATH FLX Automated Slide Stainer:

IP129 is intended for use with the intelliPATH FLX. Refer to the User Manual for specific instructions for use. When using the intelliPATH FLX, peroxide block with intelliPATH FLX Peroxidase Blocking Reagent (IPB5000) may be performed following heat retrieval.

Technical Note:

This antibody, for intelliPATH FLX and manual use, has been standardized with MACH 4 detection system. Use TBS for washing steps.

Protocol Recommendations (ONCORE™ Automated Slide Staining System):

OAI129 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: CD10

Protocol Template (Description): Ms HRP Template 1

Dewaxing (DS Option): DS2

Antigen Retrieval (AR Option): AR1, high pH; 101°C

Reagent Name, Time, Temp.: CD10, 30 min., 25°C

Protocol Recommendations (ONCORE™ Pro Automated Slide Staining System):

OPAI129 is intended for use with the ONCORE Pro. Refer to the User Manual for specific instructions for use. Protocol parameters in the Protocol Editor should be programmed as follows:

Protocol Name: CD10

Protocol Template (Description): IHC Extras Template 1

Dewaxing (DS Buffer Option): DS2-50

Antigen Retrieval (AR Option): AR1, high pH; 103°C

Block Option: Buffer

Reagent Name, Time, Temp.: CD10, 45 min., 25°C



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Protocol Recommendations (Ventana BenchMark ULTRA):

AVI129 is intended for use with the BenchMark ULTRA. Refer to the User Manual for specific instructions for use. Recommended protocol parameters are as follows:

Template/Detection: OptiView DAB IHC

Pretreatment Protocol: CC1 32 min

Peroxidase: Pre-Primary Peroxidase Inhibitor

Primary Antibody: 16 min, 36°C

Protocol Recommendations (Q Series – For Leica BOND-III):

ALI129 is intended for use with the Leica BOND-III. Refer to the User Manual for specific instructions for use. Recommended protocol parameters are as follows:

Protocol Name: IHC Protocol F

Detection: Bond Polymer Refine

HIER: 20 min with ER2

Peroxide Block: 5 min

Marker (Primary Antibody): 15 min

Post Primary: 8 min

Polymer: 8 min

Mixed DAB Refine: 10 min

Hematoxylin: 5 min

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 (Na₃N) 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 in 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.

References:

1. Kaufmann O, *et al.* Immuno-histochemical detection of CD10 with monoclonal antibody 56C6 on paraffin sections. *Am J Clin Pathol.* 1999 Jan;111(1):117-22.
2. Kurtin PJ, *et al.* Demonstration of distinct antigenic profiles of small B-cell lymphomas by paraffin section immunohistochemistry. *Am J Clin Pathol.* 1999 Sep;112(3):319-29.
3. de Leon ED, *et al.* Usefulness of an immunohistochemical panel in paraffin-embedded tissues for the differentiation of B-cell non-Hodgkin's lymphomas of small lymphocytes. *Mod Pathol.* 1998 Nov;11(11):1046-51.
4. de Boer CJ, *et al.* Bcl-1/cyclin D1 in malignant lymphoma. *Ann Oncol.* 1997;8 Suppl 2:109-17.
5. 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."
6. 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.

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