

CD103 (RM)

Concentrated and Prediluted Rabbit Monoclonal Antibody
901-3117-111417

BIOCARE
M E D I C A L

Catalog Number:	ACI 3117 A, B	API 3117 AA
Description:	0.1, 0.5 ml, concentrated	6.0 ml, prediluted
Dilution:	1:50	Ready-to-use
Diluent:	Renoir Red	N/A

Intended Use:

For In Vitro Diagnostic Use

CD103 (RM) [EP206] is a rabbit monoclonal antibody that is intended for laboratory use in the qualitative identification of CD103 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:

CD103 antibody recognizes the integrin subunit CD103 cell surface antigen, which is characteristically expressed in hairy cell leukemia (HCL), a B-cell lymphoproliferative disorder (1-3). CD103 [EP206] has demonstrated reactivity in FFPE (formalin-fixed paraffin-embedded) tissue, eliminating the need for flow cytometric analysis or frozen section IHC, making it a valuable addition to an immunohistochemistry (IHC) panel for the diagnosis of HCL (1). Other antibodies that have been used in conjunction with CD103 for the detection of HCL include CD25, TIA-1, DBA44 and CD11c (2-3). Intraepithelial CD8 (+) tumor-infiltrating lymphocytes (TIL) that express CD103 have been shown to be strongly associated with patient survival in high-grade serous ovarian cancer (HGSC) (4).

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, an enzyme labeled polymer is added to bind to the primary antibody. The detection of the bound antibody is evidenced by a colorimetric reaction.

Source: Rabbit monoclonal

Species Reactivity: Human; others not tested

Clone: EP206

Isotype: IgG

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

Epitope/Antigen: A synthetic peptide corresponding to the residues of human CD103 protein

Cellular Localization: Cell membrane

Positive Tissue Control: Hairy cell leukemia

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 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. Diluted reagents should be used promptly; any remaining reagent should be stored at 2°C to 8°C.

Protocol Recommendations:

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

Pretreatment Solution (recommended): Diva

Pretreatment Protocol:

Heat Retrieval Method:

Preheat the retrieval solution to 95°C for 30 minutes and then place slides into the preheated solution if using Biocare's Decloaking

Protocol Recommendations Cont'd:

Chamber Pro or Decloaking Chamber Plus. If using Biocare's Decloaking Chamber NxGen, place slides into the retrieval solution without preheating. Retrieve at 95°C for 40 minutes. Allow solution to cool for 20 minutes and 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.

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 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 Note:

This antibody has been standardized with Biocare's MACH 4 detection 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 (NaN₃) 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 into contact with sensitive areas, wash with copious amounts of water. (6)

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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 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. Morgan EA, *et al.* Immunohistochemical detection of hairy cell leukemia in paraffin sections using a highly effective CD103 rabbit monoclonal antibody. *Am J Clin Pathol.* 2013 Feb; 139(2):220-30.
2. Dong HY, *et al.* Immunophenotypic analysis of CD103+ B-lymphoproliferative disorders: hairy cell leukemia and its mimics. *Am J Clin Pathol.* 2009 Apr; 131(4):586-95.
3. Mori N, *et al.* TIA-1 expression in hairy cell leukemia. *Mod Pathol.* 2004 Jul; 17 (7):840-6.
4. Webb JR, *et al.* Tumor-infiltrating lymphocytes expressing the tissue resident memory marker CD103 are associated with increased survival in high-grade serous ovarian cancer. *Clin Cancer Res.* 2014 Jan 15; 20(2):434-44.
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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