

Oct-3/4

Prediluted Monoclonal Antibody
901-313-052323

BIOCARE
M E D I C A L

Catalog Number:	PM 313 AA	VLTM 313 G20
Description:	6.0 mL, RTU	20 mL, RTU
Dilution:	Ready-to-use	Ready-to-use
Diluent:	N/A	N/A

Intended Use:

For In Vitro Diagnostic Use

Oct-3/4 [SEMGC] is a mouse monoclonal antibody that is intended for laboratory use in the qualitative identification of Oct-3/4 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 evaluation within the context of the patient's clinical history and other diagnostic tests by a qualified pathologist.

Summary and Explanation:

Oct-3/4 is an 18 kDa POU-domain transcription factor encoded by the POU5F1 gene. The gene which encodes Oct-3/4 maps to human chromosome 6p21.31. Oct-3/4 is involved in regulation of pluripotency during normal development and is detectable in embryonic stem and germ cells. Transcription factors containing the POU homeodomain have been shown to be important regulators of tissue-specific gene expression in lymphoid and pituitary differentiation and in early mammalian development. Oct-3 (also known as Oct-4) is a mammalian POU transcription factor expressed by early embryo cells and germ cells. Oct-3/4 is essential for the identity of the pluripotential founder cell population in the mammalian embryo. Studies have shown Oct-3/4 immunohistochemistry is an informative diagnostic tool for pluripotent germ-cell tumors and offers new insights into the histological heterogeneity of this cancer. Studies have demonstrated that Oct-3/4 is a highly specific and sensitive immunohistochemical marker for primary intracranial germinomas and is a sensitive and specific marker for intratubular germ cell neoplasia. The intensity of Oct-3/4 immunostaining has been shown to be significantly better than that of PLAP.

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

Clone: SEMGC

Isotype: IgG2b

Protein Concentration: Call for lot specific Ig concentration.

Epitope/Antigen: Oct-3/4

Cellular Localization: Nuclear

Positive Control: Seminoma

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.

Protocol Recommendations (VALENT® Automated Slide Staining Platform):

VLTM313 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: Incubate for 10 minutes at RT with Val Background Block.

Primary Antibody: Incubate for 45 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 Borg Decloaker. Refer to the Borg Decloaker 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 Notes:

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



60 Berry Drive
Pacheco, CA 94553
USA



Tel: 800-799-9499 | www.biocare.net | Fax: 925-603-8080



Westervoortsedijk 60
6827 AT Arnhem
The Netherlands

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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 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. de Jong J, *et al.* Diagnostic value of OCT3/4 for pre-invasive and invasive testicular germ cell tumours. *J Pathol.* 2005 Jun;206(2):242-9.
2. Jones TD, *et al.* OCT4: A sensitive and specific biomarker for intratubular germ cell neoplasia of the testis. *Clin Cancer Res.* 2004 Dec 15;10(24):8544-7.
3. Hattab EM, *et al.* OCT4 immunohistochemistry is superior to placental alkaline phosphatase (PLAP) in the diagnosis of central nervous system germinoma. *Am J Surg Pathol.* 2005 Mar;29(3):368-71.
4. Looijenga LH, *et al.* POU5F1 (OCT3/4) identifies cells with pluripotent potential in human germ cell tumors. *Cancer Res.* 2003 May 1;63(9):2244-50.
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.