**CD163**

Concentrated and Prediluted Monoclonal Antibody

901-353-041218

<table>
<thead>
<tr>
<th>Catalog Number:</th>
<th>CM 353 AK, CK</th>
<th>PM 353 AA</th>
<th>OAI 353 T60</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description:</td>
<td>0.1, 1.0 ml, concentrated</td>
<td>6.0 ml, prediluted</td>
<td>60 tests, prediluted</td>
</tr>
<tr>
<td>Dilution:</td>
<td>1:100</td>
<td>Ready-to-use</td>
<td>Ready-to-use</td>
</tr>
<tr>
<td>Diluent:</td>
<td>Renoir Red</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**Intended Use:**

For In Vitro Diagnostic Use

CD163 [10D6] is a mouse monoclonal antibody that is intended for laboratory use in the qualitative identification of CD163 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:**

CD163 is useful in identifying cells of monocyte/macrophage lineage in normal and neoplastic conditions [1,2]. This antibody reacts with human scavenger receptor cysteine-rich protein CD163 (p155, M130) found on mononuclear phagocytes including human monocytes and macrophages [1]. Compared with the CD68 antibodies, studies have shown that CD163 demonstrated greater specificity as a marker of disorders of monocyte/macrophage origin [2]. However, immunohistochemical evaluation of CD163 expression does not seem to be a sensitive means of determining monocytic differentiation of AMLs or myeloid sarcoma [3].

**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. A secondary antibody may be applied to bind the primary antibody, followed by an enzyme labeled polymer; or an enzyme labeled polymer may be applied directly to bind the primary antibody. The detection of the bound primary antibody is evidenced by an enzyme-mediated colorimetric reaction.

**Source:** Mouse monoclonal

**Species Reactivity:** Human; others not tested

**Clone:** 10D6

**Isotype:** IgG1

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

**Epitope/Antigen:** CD163

**Cellular Localization:** Cell membrane

**Positive Tissue Control:** Tonsil or placenta

**Known Applications:**

Immunohistochemistry (formalin-fixed paraffin-embedded tissues)

**Supplied As:** Buffer with protein carrier and preservative

**Refrigera:**

Renoir Red (PD904)

**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 (intelliPATH and manual use):**

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

**Pretreatment:** Perform heat retrieval using Biocare's Diva Decloaker. Refer to the Diva Decloaker data sheet for specific instructions.

**Protein Block (Optional):** Incubate for 5-10 minutes at RT with Biocare's 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 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, for intelliPATH and manual use, has been standardized with Biocare's 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 titer 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:**


**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) (4)
Precautions Cont’d:
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. (5)
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: