

CD10

Concentrated and Prediluted Monoclonal Antibody
902-129-072617

BIOCARE
M E D I C A L

Catalog Number:	ACR 129 AK, BK CK	APR 129 AA
Description:	0.1, 0.5, 1.0 ml, concentrated	6.0 ml, prediluted
Dilution:	1:20-1:40	Ready-to-use
Diluent:	Renoir Red	N/A

Intended Use:

For Research Use Only. Not for use in diagnostic procedures.

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. CD10 also 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. Recently, CD10 has been used in a panel for mantle cell lymphoma with cyclin D1(+), CD43 (+), CD5 (+), IgM (+), CD23 (-) and CD10 (-).

Source: Mouse monoclonal

Species Reactivity: Human; others not tested

Clone: 56C6

Isotype: IgG₁

Source: Mouse monoclonal

Species Reactivity: Human; others not tested

Clone: 56C6

Isotype: IgG₁

Epitope/Antigen: CD10

Positive Control: Tonsil or kidney

Cellular Localization: Cell membrane

Normal Tissue: Tonsil, kidney or liver

Abnormal Tissue: Lymphoplastic leukemia, Burkitt's lymphoma and renal cell carcinoma

Known Applications:

Immunohistochemistry (formalin-fixed paraffin-embedded tissues)

Supplied As: Buffer with protein carrier and preservative.

Renoir Red (BRR904)

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 PEROXIDAZED 1.

Pretreatment Solution (recommended): Borg or Reveal

Pretreatment Protocol:

Heat Retrieval Method:

Retrieve sections under pressure using Biocare's Decloaking Chamber, followed by a wash in distilled water. Alternatively, steam tissue sections for 45-60 minutes. Allow solution to cool for 10 minutes then wash in distilled water.

Protein Block:

Optional: Incubate for 10-15 minutes at RT with Biocare's Background Sniper.

Primary Antibody: Incubate for 30-45 minutes at RT.

Probe: Incubate for 10 minutes at RT with a probe.

Polymer: Incubate for 10-20 minutes at RT with a polymer.

Chromogen: Incubate for 5 minutes at RT when using Biocare's DAB. –OR– Incubate for 10-20 minutes at RT when using Biocare's Vulcan Fast 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. It can also be used on an automated staining system and with other BIOCARE polymer detection kits. Use TBS buffer for washing steps.

Performance Characteristics:

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. These products are tools that can be used for interpretation of morphological findings in conjunction with other diagnostic tests and pertinent clinical data by a qualified pathologist.

Quality Control:

Refer to NCCLS Quality Assurance for Immunocytochemistry approved guidelines, December 1999 MM4-A Vol.19 No.26 for more information about Tissue Controls.

Precautions:

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)

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. Microbial contamination of reagents may result in an increase in nonspecific staining. Incubation times or temperatures other than those specified may give erroneous results. The user must validate any such change. The MSDS is available upon request.

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.

Limitations and Warranty:

There are no warranties, expressed or implied, which extend beyond this description. BIOCARE is not liable for property damage, personal injury, or economic loss caused by this product.



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