

# Cytokeratin, H.W. M (34betaE12)

Mouse Monoclonal Antibody SAM-QHD-MM46-2 (10 tests) QHD-MM46-15 (100 tests)

Document IFU-MM46-Cytokeratin HWM, 05312018

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| Source                  | Clone     | Species | Isotype                   | Primary<br>Antibody Diluent |
|-------------------------|-----------|---------|---------------------------|-----------------------------|
| Ascites                 | 34betaE12 | Mouse   | IgG₁/K                    | NA                          |
| Epitope: Not Determined |           |         | Species Reactivity: Human |                             |

| Catalog Number           | Description   |  |
|--------------------------|---|--|
| SAM-QHD-MM46-10<br>tests | 2mL Ready To Use antibody for use with StatLab Quantum HD HRP or Quantum HD AP Detection kit on fully automated StatLab Quantum HDx Platform. |  |
| QHD-MM46-100<br>tests    | I HD HRP or Quantum HD AP Detection kit on fully automa   |  |

## **Intended Use**

For In Vitro Diagnostic Use., Cytokeratin (34betaE12) antibody is intended for qualitative identification by light microscopy of 34betaE12 antigen in sections of formalin-fixed, paraffin-embedded tissue sections using immunohistochemical (IHC) test methods. Staining results should be interpreted by a qualified pathologist in conjunction with the patient's clinical history, and other diagnostic tests after the primary diagnosis of cancer has been established.

## **Summary and Explanation**

Anti-Cytokeratin, 34betaE12 is an antibody to high molecular weight cytokeratin that reacts with all squamous and ductal epithelium and stains carcinomas. This antibody recognizes cytokeratins 1,5,10, and 14 that are found in complex epithelia. Anti-Cytokeratin, 34betaE12 shows no reactivity with hepatocytes, pancreatic acinar cells, proximal renal tubules, or endometrial glands; there has been no reactivity with cells derived from simple epithelia. Mesenchymal tumors, lymphomas, melanomas, and neural tumors are unreactive with this antibody with some exceptions. Anti-Cytokeratin, 34betaE12 does label myoepithelial cells and has been shown to be useful in distinguishing prostatic adenocarcinoma from hyperplasia of the prostate. This antibody has also been useful in separating benign from malignant intraductal breast proliferations.

### **Materials and Methods Provided**

The stated primary antibody product contains reagent in a vial made for

use with the StatLab Quantum HDx IHC slide stainer. The vial is equipped with an RFID tag that is read by the slide stainer to provide product and lot specific information.

This antibody is diluted in Tris Buffer, pH 7.3-7.7, with 1% BSA and <0.1% Sodium Azide.

#### Storage and Handling

Store at 2-8°C. Do NOT freeze. When stored properly, the reagents are stable to the date indicated on the label. The presence of an unusual odor or precipitate indicates that the antibody is deteriorating and should not be used. Do not use reagents beyond the expiration date printed on the vial. The user must validate any storage conditions other than these specified in the package insert.

#### Materials and Reagents Needed but Not Provided

The following reagents and materials may be required for staining but are not provided with the primary antibody. Please refer to our website at <a href="https://www.StatLab.com">www.StatLab.com</a>.

- 1. Quantum HD HRP Detection Kit (Cat. No.: QHD-U-15-HRP-KIT)
- 2. Quantum HD Retrieval Solution, pH 9.0 (Cat. No.: QHD-003)
- 3. Quantum HD Retrieval Solution, pH 6.0 (Cat. No.: QHD-002)
- 4. Quantum HD DS2 (Cat. No.: QHD-007)
- 5. Quantum HD Block (Cat. No.: QHD-006)
- 6. Quantum HD AP Detection Kit (Cat. No.: QHD-U-15-HRP-KIT)
- 7. Wash Buffer (Cat. No.: QHD-015)
- 8. Positive and Negative Tissue controls

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#### **Principles of the Procedures**

Antigen detection by immunohistochemistry (IHC) is a two-step process involving first, the binding of a primary antibody to the antigen of interest, and second, the detection of bound antibody by a chromogen. The primary antibody may be used in IHC using manual techniques or using automated IHC Staining Systems.

## **Warnings and Precautions**

- This antibody contains less than 0.1% sodium azide. Concentrations less than 0.1% are not reportable as hazardous materials?
- 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<sup>8</sup>
- Specimens, before and after fixation and all materials exposed to them, should be handled as if capable of transmitting infections and disposed of with proper precautions<sup>9</sup>.
- 4. 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 use must validate any such change.
- 7. The SDS is available upon request.
- Do not use reagents beyond the expiration date printed on the vial.
- 9. The user must validate any storage conditions other than these specified in the package insert

## **Specimen Collection and Preparation**

Tissues fixed in 10% formalin are suitable for use prior to paraffin embedding  $^{10,11}$ .

The user is advised to validate the use of the products with their tissue specimens prepared and handled in accordance with their laboratory practices

## StatLab Quantum HDx Recommended Staining Procedure:

| Instrument Parameters    | QHD-U3-HRP-Kit | QHD-U2-AP-Kit |
|--------------------------|----------------|---------------|
| Retrieval Reagent        | QHD-High pH    | QHD-High pH   |
| Antibody Incubation Time | 10-45 minutes  | 10-45 minutes |

#### Step by Step Procedure:

- Follow the StatLab Quantum HDx instrument instructions for setting up the reagents on the instrument
- Load slides, antibodies, and detection kit(s) onto StatLab Quantum HDx instrument according to StatLab Quantum HDx instructions for use
- 3. Start the run.
- 4. When the staining is complete, remove the slides from instrument, rinse well with distilled water
- 5. Dehydrate, Clear and Coverslip

## Troubleshooting

Positive and negative controls should be run simultaneously with all patient specimens. If unexpected staining is observed which cannot be explained by variations in laboratory procedures and a problem with the antibody is suspected, contact StatLab IHC Technical Support via Email ihctech@statlab.com or call us at (800) 442-3573

## **Cellular Localization and Positive Tissue Control**

| Positive Tissue Control |               |  |  |
|-------------------------|---------------|--|--|
| Tissue                  | Visualization |  |  |
| Prostate                | Cytoplasmic   |  |  |

## **Limitations of the Procedure**

IHC is a complex technique involving both histological and immunological detection methods. Tissue processing and handling prior to immunostaining can also cause inconsistent results. Variations in fixation and embedding or the inherent nature of the tissue may cause variations in results<sup>12</sup>. (Endogenous peroxidase activity or pseudo peroxidase activity in erythrocytes and endogenous biotin may cause non-specific staining depending on detection system used. Tissues containing Hepatitis B Surface Antigen (HBsAg) may give false positive with horseradish peroxidase systems<sup>13</sup>. Improper

counterstaining and mounting may compromise the interpretation of results.

#### **Performance Characteristics**

The optimum protocols for a specific application can vary. These include, but are not limited to: fixation, heat-retrieval method, incubation times, and tissue section thickness and detection kit used. Due to the sensitivity of these reagents, the recommended incubation times listed may not be applicable to other detection systems, as results may vary. The data sheet recommendations and protocols are based exclusively on StatLab 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.

#### NOTE

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

#### References

- Gown, AM et al. Monoclonal antibodies to human intermediate filament proteins. II. Distribution of filament proteins in normal human tissues. Am J Pathol 1984; 114:309.
- 2. O'Malley, FP et al. Usefulness of immunoperoxidase staining with high-molecular-weight cytokeratin in the differential diagnosis of small-acinar lesions of the prostate gland. Virch Arch A 1990; 417:191.
- 3. Amin, MB. Analysis of cribriform morphology in prostatic neoplasia using antibody to high-molecular-weight cytokeratins. Arch Pathol Lab Med March 1994; 118:260-264.
- 4. Wojno, KJ et al. The utility of basal cell-specific anticytokeratin antibody (34betaE12) in the diagnosis of prostate cancer. A review of 228 cases. Am J Surg Pathol 1995; 19:251-60.
- Moinfar, F et al. Use of keratin 35betaE12 as an adjunct in the diagnosis of mammary intraepithelial neoplasia-ductal typebenign and malignant intraductal proliferations. Am J Surg Pathol 1999; 23:1048-58.
- Yang, XJ et al. Rare expression of high-molecular-weight cytokeratin in adenocarcinoma of the prostate gland: a study of 100 cases of metastatic and locally advanced prostate cancer. Am J Surg Pathol 1999; 23:147-52
- U.S. 29CFR 1910.1200, OSHA Hazard Communication and EC Directive 91/155/EC.
- Center for Disease Control, 1976, National Institute of Occupational Safety and Health, 1976.
- U.S. Department of Health and Human Services: Centers for Disease Control and Prevention. Guidelines for Safe Work Practices in Human and Animal Medical Diagnostic Laboratories, Supplement/Vol 61, January 6, 2012.
- 10. Kiernan, Microscopy Today 00-1 pp. 8-12, (2000)
- Sheehan and Hrapchak, Theory and Practice of Histotechnology, Second Edition, Battelle Press, 1980
- 12. Nadji and Morales, AR Ann N.Y. Acad Sci 420:134-9, 1983
- 13. Omata M et al, Am J Clin Pathol 73(5): 626-32, 1980

