

Human sCD141 ELISA Kit

Instructions for use

Catalogue numbers: 1x48 tests: EA101199

1x96 tests: EA101200 2x96 tests: EA101201

For research use only

Fast Track Your Research.....

Table of Contents

1.	In	tended use	3
2.	In	troduction	3
	2.1.	Summary	3
	2.2.	Principle of the method	3
3.	Re	eagents provided and reconstitution	4
4.	M	aterials required but not provided	4
5.	St	orage Instructions	4
6.	Sp	pecimen collection, processing & storage	5
7.	Sa	afety & precautions for use	6
8.	As	ssay Preparation	7
	8.1.	Assay Design	7
	8.2.	Preparation of Wash Buffer	7
	8.3.	Preparation of Standard Diluent Buffer	7
	8.4.	Preparation of Standard	8
	8.5.	Preparation of Controls	8
	8.6.	Preparation of Samples	8
i	8.7.	Preparation of Biotinylated anti-CD141	8
i	8.8.	Preparation of Streptavidin-HRP	9
9.	M	ethod	10
10		Data Analysis	11
11		Assay limitations	11
12		Performance Characteristics	12
	12.1	. Sensitivity	12
	12.2	Specificity	12
	12.3	Precision	12
	12.4	Dilution Parallelism	13
	12.5	Spike Recovery	13
	12.6	Stability	13
	12.7	. Expected serum values	13
13		Bibliography	14
14		OriGeneHuman CD141 ELISA references	14
15		Assav Summary	15

Human sCD141 ELISA KIT

1. Intended use

The OriGenesCD141 ELISA kit is a solid phase sandwich ELISA for the *in-vitro* qualitative and quantitative determination of sCD141 in supernatants, buffered solutions or serum and plasma samples. This assay will recognise both natural and recombinant human sCD141.

This kit has been configured for research only. Not suitable for use in therapeutic procedures.

2. Introduction

2.1. Summary

CD141 , also known as Thrombomodulin or BDC-A is an transmembrane protein expressed predominantly on the surface of vascular endothelial cells, but also on other cell types such as macrophages, monocytes, subpopulation of myeloid dendritic cells and keratinocytes. Thrombomodulin is a type 1 membrane glycoprotein of 74kDa consisting on a single chain with 6 Epidermal Growth Factor (EGF)-like domains critical for Thrombin and proteine C binding, and four other domains (an N-terminal C-type lectin domain, a highly glycosylated serine/threonine-rich domain, a transmembrane segment, and a short C-terminal cytoplasmic tail. It acts as an important component in the anti-coagulation and fibrinolysis system: cofactor for active thrombin, the thrombomodulin-thrombin complex activates protein C to degrade coagulation factors, inhibiting coagulation and fibrinolysis. (1-5)

When vascular endothelial cells injury occurs, proteolytic cleavage release multiple fragments of thrombomodulin in circulation, so it represents a good marker for endothelial cell damage in pathologies such as cardiovascular disease, acute coronary syndrome, pulmonary thromboembolism or severe hemorrhage.(6-8). Thrombomodulin has been described as an anticoagulant effect protein, and its therapeutical potential for preventing deep vein thrombosis and its use in the treatment of disseminated intravascular coagulation is under demonstrated in preliminary data.(9-11)

More recently, other biological effects beyond anticoagulation have been demonstrated such as an antiinflammatory, cell adhesion and proliferation regulation. It is also demonstrated that thrombomodulin may be able to suppress the metastatic capacity of tumor cells, and hence have a protective role in many types of malignancies. (12-14)

2.2. Principle of the method

A capture Antibody highly specific for CD141has been coated to the wells of the microtitre strip plate provided during manufacture. Binding of CD141 samples and known standards to the capture antibodies and subsequent binding of the biotinylated anti-CD141 secondary antibody to the analyte is completed during the same incubation period. Any excess unbound analyte and secondary antibody is removed. The HRP conjugate solution is then added to every well including the zero wells, following incubation excess conjugate is removed by careful washing. A chromogen substrate is added to the wells resulting in the progressive development of a blue coloured complex with the conjugate. The colour development is then stopped by the addition of acid turning the resultant final product yellow. The intensity of the produced coloured complex is directly proportional to the concentration of CD141present in the samples and standards. The absorbance of the colour complex is then measured and the generated OD values for each standard are plotted against expected concentration forming a standard curve. This standard curve can then be used to accurately determine the concentration of CD141 in any sample tested.

3. Reagents provided and reconstitution

Reagents (Store@2-8°C)	Quantity 1x48 well kit Cat no. EA101199	Quantity 1x96 well kit Cat no. EA101200	Quantity 2x96 well kit Cat no. EA101201	Reconstitution
96 well microtitre strip plate	1/2	1	2	Ready to use (Pre-coated)
Plastic plate covers	2	2	4	n/a
Standard: 20 ng/ml	1	2	4	Reconstitute as directed on the vial (see reagent preparation, section 8)
Standard Diluent (Buffer)	1 (25ml)	1 (25ml)	1 (25ml)	10x Concentrate, dilute in distilled water (see reagent preparation, section 8)
Control	1	2	4	Reconstitute as directed on the vial (see reagent preparation, section 8)
Biotinylated anti- CD141	1 (0.4ml)	1 (0.4ml)	2 (0.4ml)	Dilute in biotinylated antibody diluent (see reagent preparation, section 8)
Biotinylated Antibody diluent	1 (7ml)	1 (7ml)	1 (13ml)	Ready to use
Streptavidin-HRP	1 (5µl)	2 (5μΙ)	4 (5µl)	Add 0.5ml of HRP diluent prior to use (see reagent preparation, section 8)
HRP Diluent	1 (23ml)	1 (23ml)	1 (23ml)	Ready to use
Wash Buffer	1 (10ml)	1 (10ml)	2 (10ml)	200x Concentrate dilute in distilled water (see reagent preparation, section 8)
TMB Substrate	1 (11ml)	1 (11ml)	1 (24ml)	Ready to use
H ₂ SO ₄ stop reagent	1 (11ml)	1 (11ml)	2 (11ml)	Ready to use

4. Materials required but not provided

- Microtitre plate reader fitted with appropriate filters (450nm required with optional 620nm reference filter)
- Microplate washer or wash bottle
- 10, 50, 100, 200 and 1,000µl adjustable single channel micropipettes with disposable tips
- 50-300μl multi-channel micropipette with disposable tips
- Multichannel micropipette reagent reservoirs
- Distilled water
- Vortex mixer
- Miscellaneous laboratory plastic and/or glass, if possible sterile

5. Storage Instructions

Store kit reagents between 2 and 8°C. Immediately after use remaining reagents should be returned to cold storage (2-8°C). Expiry of the kit and reagents is stated on box front labels. The expiry of the kit components can only be guaranteed if the components are stored properly, and if, in case of repeated use of one component, the reagent is not contaminated by the first handling.

6. Specimen collection, processing & storage

Cell culture supernatants, human serum, plasma or other biological samples will be suitable for use in the assay. Remove serum from the clot or red cells, respectively, as soon as possible after clotting and separation.

Cell culture supernatants: Remove particulates and aggregates by spinning at approximately 1000 x g for 10 min.

Serum: Use pyrogen/endotoxin free collecting tubes. Serum should be removed rapidly and carefully from the red cells after clotting. Following clotting, centrifuge at approximately 1000 x g for 10 min and remove serum.

Plasma: EDTA, citrate and heparin plasma can be assayed. Spin samples at 1000 x g for 30 min to remove particulates. Harvest plasma.

Storage: If not analyzed shortly after collection, samples should be aliquoted (250-500µI) to avoid repeated freeze-thaw cycles and stored frozen at -70°C. Avoid multiple freeze-thaw cycles of frozen specimens.

Recommendation: Do not thaw by heating at 37°C or 56°C. Thaw at room temperature and make sure that sample is completely thawed and homogeneous before use. When possible avoid use of badly haemolysed or lipemic sera. If large amounts of particles are present these should be removed prior to use by centrifugation or filtration.

7. Safety & precautions for use

- Handling of reagents, serum or plasma specimens should be in accordance with local safety procedures , e.g.CDC/NIH Health manual : " Biosafety in Microbiological and Biomedical Laboratories" 1984
- The human serum included in this kit have been tested and found non reactive for HbsAg, anti HIV1 & 2
 and anti VHC. Nevertheless, no known method can offer complete assurance that human blood
 derivatives will not transmit hepatitis, AIDS or other infections. Therefore handling of reagents, serum or
 plasma specimens should be in accordance with local safety procedures
- Laboratory gloves should be worn at all times
- Avoid any skin contact with H₂SO₄ and TMB. In case of contact, wash thoroughly with water
- Do not eat, drink, smoke or apply cosmetics where kit reagents are used
- Do not pipette by mouth
- When not in use, kit components should be stored refrigerated or frozen as indicated on vials or bottles labels
- All reagents should be warmed to room temperature before use. Lyophilized standards should be discarded after use
- Once the desired number of strips has been removed, immediately reseal the bag to protect the remaining strips from deterioration
- · Cover or cap all reagents when not in use
- Do not mix or interchange reagents between different lots
- Do not use reagents beyond the expiration date of the kit
- Use a clean disposable plastic pipette tip for each reagent, standard, or specimen addition in order to avoid cross contamination, for the dispensing of H₂SO₄ and substrate solution, avoid pipettes with metal parts
- Use a clean plastic container to prepare the washing solution
- Thoroughly mix the reagents and samples before use by agitation or swirling
- All residual washing liquid must be drained from the wells by efficient aspiration or by decantation followed by tapping the plate forcefully on absorbent paper. Never insert absorbent paper directly into the wells
- The TMB solution is light sensitive. Avoid prolonged exposure to light. Also, avoid contact of the TMB solution with metal to prevent colour development. Warning TMB is toxic avoid direct contact with hands. Dispose off properly
- If a dark blue colour develops within a few minutes after preparation, this indicates that the TMB solution has been contaminated and must be discarded. Read absorbance's within 1 hour after completion of the assay
- When pipetting reagents, maintain a consistent order of addition from well-to-well. This will ensure equal incubation times for all wells
- Follow incubation times described in the assay procedure
- Dispense the TMB solution within 15 min of the washing of the microtitre plate

8. Assay Preparation

Bring all reagents to room temperature before use

8.1. Assay Design

Determine the number of microwell strips required to test the desired number of samples plus appropriate number of wells needed for running zeros and standards. Each sample, standard, zero and control should be tested **in duplicate**. Remove sufficient Microwell Strips for testing from the aluminium pouch immediately prior to use. Return any wells not required for this assay with desiccant to the pouch. Seal tightly and return to 2-8°C storage.

Example plate layout(example shown for a 6 point standard curve)

		lards / trols		Sample Wells								
	1	2	3	4	5	6	7	8	9	10	11	12
Α	20	20										
В	10	10										
С	5	5										
D	2.5	2.5										
Е	1.25	1.25										
F	0.625	0.625										
G	zero	zero										
Н	Ctrl	Ctrl										

All remaining empty wells can be used to test samples in duplicate

8.2. Preparation of Wash Buffer

Dilute the (200x) wash buffer concentrate 200 fold with distilled water to give a 1x working solution. Pour entire contents (10 ml) of the Washing Buffer Concentrate into a clean 2,000 ml graduated cylinder.Bring final volume to 2,000 ml with glass-distilled or deionized water. Mix gently to avoid foaming. Transfer to a clean wash bottle and store at 2°-25°C.

8.3. Preparation of Standard Diluent Buffer

Add the contents of the vial (10x concentrate) to 225ml of distilled water before use.

This Solution can be stored at 2-8°C for up to 1 week.

8.4. Preparation of Standard

Standard vials must be reconstituted with the volume of standard diluent shown on the vial immediately prior to use. This reconstitution gives a stock solution of 20ng/ml of CD141. Mix the reconstituted standard gently by inversion only. Serial dilutions of the standard are made directly in the assay plate to provide the concentration range from 20 to 0.625ng/ml. A fresh standard curve should be produced for each new assay.

- Immediately after reconstitution add 200µl of the reconstituted standard to well's A1 and A2, which provides the highest concentration standard at 20ng/ml
- Add 100μl of appropriate standard diluent to the remaining standard wells B1 and B2 to F1 and F2
- Transfer 100µl from wells A1 and A2 to B1 and B2. Mix the well contents by repeated aspirations and ejections taking care not to scratch the inner surface of the wells
- Continue this 1:1 dilution using 100µl from wells B1 and B2 through to wells F1 and F2 providing a serial diluted standard curve ranging from 20ng/ml to 0.625ng/ml
- Discard 100μl from the final wells of the standard curve (F1 and F2)

Alternatively these dilutions can be performed in separate clean tubes and immediately transferred directly into the relevant wells.

8.5. Preparation of Controls

The supplied Controls must be reconstituted with the volume of Standard Diluent indicated on the vial. Reconstitution of the freeze-dried material with the indicated volume, will give a solution at the concentration stated on the vial. Do not store after use.

8.6. Preparation of Samples

Before testing, human serum or plasmas samples have to be diluted 1:2 in standard buffer diluent.

8.7. Preparation of Biotinylated anti-CD141

It is recommended this reagent is prepared immediately before use. Dilute the biotinylated anti-CD141 with the biotinylated antibody diluent in an appropriate clean glass vial using volumes appropriate to the number of required wells. Please see example volumes below:

Number of wells	Biotinylated	Biotinylated
required	Antibody (µl)	Antibody Diluent (μl)
16	40	1060
24	60	1590
32	80	2120
48	120	3180
96	240	6360

8.8. Preparation of Streptavidin-HRP

It is recommended to centrifuge vial for a few seconds in a microcentrifuge to collect all the volume at the bottom.

Dilute the 5μ l vial with 0.5ml of HRP diluent **immediately before use.** Do-not keep this diluted vial for future experiments. Further dilute the HRP solution to volumes appropriate for the number of required wells in a clean glass vial. Please see example volumes below:

Number of wells	Streptavidin-HRP	Streptavidin-HRP
required	(µl)	Diluent (ml)
16	30	2
24	45	3
32	60	4
48	75	5
96	150	10

9. Method

We strongly recommend that every vial is mixed thoroughly without foaming prior to use.

Prepare all reagents as shown in section 8.

Note: final preparation of Biotinylated Secondary Antibody (section 8.6) and Streptavidin-HRP (section 8.7) should occur immediately before use.

As	ssay Step	Details					
1.	Addition	Prepare Standard curve as shown in section 8.4 above					
2.	Addition	Add 100μl of each, Sample, Standard, Control and zero (standard diluent) in duplicate to appropriate number of wells					
3.	Addition	Add 50μl of diluted biotinylated anti-CD141 to all wells					
4.	Incubation	Cover with a plastic plate cover and incubate at room temperature (18 to 25°C) for 1 hour(s)					
5.	Wash	Remove the cover and wash the plate as follows: a) Aspirate the liquid from each well b) Dispense 0.3 ml of 1x washing solution into each well c) Aspirate the contents of each well d) Repeat step b and c another two times					
6.	Addition	Add 100µl of Streptavidin-HRP solution into all wells					
7.	Incubation	Cover with a plastic plate cover and incubate at room temperature (18 to 25°C) for 30 min					
8.	Wash	Repeat wash step 5.					
9.	Addition	Add 100µl of ready-to-use TMB Substrate Solution into all wells					
10.	Incubation	Incubate in the dark for 10-15 minutes * at room temperature. Avoid direct exposure to light by wrapping the plate in aluminium foil.					
11.	Addition	Add 100µl of H₂SO₄:Stop Reagent into all wells					
Pose	Post the absorbance value of each well (immediately after stop 11) on a spectrophotometer using 450						

Read the absorbance value of each well (immediately after step 11.) on a spectrophotometer using 450 nm as the primary wavelength and optionally 620 nm as the reference wave length (610 nm to 650 nm is acceptable).

^{*}Incubation time of the substrate solution is usually determined by the ELISA reader performance. Many ELISA readers only record absorbance up to 2.0 O.D. Therefore the colour development within individual microwells must be observed by the analyst, and the substrate reaction stopped before positive wells are no longer within recordable range

10. Data Analysis

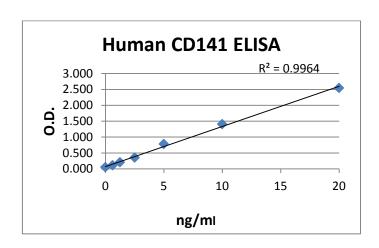
Calculate the average absorbance values for each set of duplicate standards, controls and samples. Ideally duplicates should be within 20% of the mean.

Generate a linear standard curve by plotting the average absorbance of each standard on the vertical axis versus the corresponding CD141 standard concentration on the horizontal axis.

The amount of CD141 in each sample is determined by extrapolating OD values against CD141 standard concentrations using the standard curve.

Example sCD141 Standard curve

Standard	CD141 Conc	OD (450nm) mean	CV (%)
1	20	2.545	3.2
2	10	1.408	5.0
3	5	0.782	4.4
4	2.5	0.354	2.9
5	1.25	0.208	1.8
6	0.625	0.111	3.3
zero	0	0.051	4.2



Note; curve shown above should not be used to determine results. Every laboratory must produce a standard curve for each set of microwell strips assayed.

For samples human serum or plasmas which have been diluted 1:2 according to the protocol, the calculated concentration should be multiplied by the dilution factor (x2)

11. Assay limitations

Do not extrapolate the standard curve beyond the maximum standard curve point. The dose-response is non-linear in this region and good accuracy is difficult to obtain. Concentrated samples above the maximum standard concentration must be diluted with Standard diluent or with your own sample buffer to produce an OD value within the range of the standard curve. Following analysis of such samples always multiply results by the appropriate dilution factor to produce actual final concentration.

The influence of various drugs on end results has not been investigated. Bacterial or fungal contamination and laboratory cross-contamination may also cause irregular results.

Improper or insufficient washing at any stage of the procedure will result in either false positive or false negative results. Completely empty wells before dispensing fresh Washing Buffer, fill with Washing Buffer as indicated for each wash cycle and do not allow wells to sit uncovered or dry for extended periods.

Disposable pipette tips, flasks or glassware are preferred, reusable glassware must be washed and thoroughly rinsed of all detergents before use.

As with most biological assays conditions may vary from assay to assay therefore afresh standard curve must be prepared and run for every assay.

12. Performance Characteristics

12.1. Sensitivity

The sensitivity or minimum detectable dose of CD141using this OriGeneCD141 ELISA kit was found to be **0.31 ng/ml**. This was determined by adding 2 standard deviations to the mean OD obtained when the zero standard was assayed in 6 independent experiments.

12.2. Specificity

The assay recognizes both natural and recombinant human CD141. To define the specificity of this ELISA several proteins were tested for cross reactivity. There was no cross reactivity observed for any protein tested (IL-1 α , IL-1 β , IL-2, IL-17FA, IL-17F, IFN γ , CD116, CD54, CD138, and ICAM-2).

12.3. Precision

Intra-assay

Reproducibility within the assay will be evaluated in three independent experiments. Each assay will be carried out with 6 replicates (3 duplicates) in 2 human pooled serum, 2 in RPMI and 2 in standard diluent with samples containing different concentrations of CD141. 2 standard curves were run on each plate **The overall intra-assay coefficient of variation has been calculated to be 3.9%**.

Session	Sample	Mean CD141 ng/ml	SD	CV%
	Sample 1	5.79	0.06	1.1
	Sample 2	2.85	0.03	1.2
Secsion 1	Sample 3	4.36	0.23	5.3
Session 1	Sample 4	1.42	0.04	3.1
	Sample 5	12.78	0.70	5.5
	Sample 6	11.24	0.46	4.1
	Sample 1	5.69	0.08	1.3
	Sample 2	2.75	0.25	9.0
Session 2	Sample 3	4.52	0.19	4.2
Session 2	Sample 4	1.41	0.11	7.8
	Sample 5	14.09	0.35	2.5
	Sample 6	11.01	1.07	9.7
	Sample 1	5.86	0.16	2.8
	Sample 2	3.13	0.09	2.9
Sansian 2	Sample 3	4.23	0.04	1.0
Session 3	Sample 4	1.44	0.04	2.8
	Sample 5	13.45	0.19	1.4
	Sample 6	11.29	0.49	4.3

Inter-assay

Assay to assay reproducibility within one laboratory will be evaluated in three independent experiments by two technicians. Each assay will be carried out with 6 replicates (3 duplicates) in 2 human pooled serum, 2 in RPMI and 2 in standard diluent with samples containing different concentrations of CD141. 2 standard curves were run on each plate. **The calculated overall coefficient of variation was 9.8%.**

	Sample 1	Sample2	Sample 3	Sample 4	Sample 5	Sample 6
Mean CD141 ng/ml	6.4	3.2	4.9	1.6	14.1	11.9
SD	0.7	0.3	0.6	0.2	0.8	0.9
CV	10.8	10.8	12.4	11.6	5.5	7.5

12.4. Dilution Parallelism

Three spiked human serum samples with different levels of CD141 were analysed at different serial two fold dilutions (1:2 To 1:32) with two replicates each. Recoveries ranged from 70 to 141% with an overall **mean recovery of 109%.**

12.5. Spike Recovery

The spike recovery was evaluated by spikingin human serum and culture medium samples different concentrations of CD141 in 3 separate experiments. Recoveries ranged from 72 to 105% with an overall mean recovery of 89%

12.6. Stability

Storage Stability

Aliquots of spiked serum and spiked medium were stored at -20°C, 4°C, room temperature (RT) and at 37°C and the CD141 level determined after 24h. There was no significant loss of CD141 reactivity during storage at 4°C, RT and 37°C.

Freeze-thaw Stability

Aliquots of spiked serum and spiked medium were stored frozen at -20°C and thawed up to 5 times and the CD141 level was determined. There was no significant loss of CD141 reactivity after 5 cycles of freezing and thawing.

12.7. Expected serum values

A panel of 40 human sera and 40 Plasma samples were tested for CD141. See results below

Sample Matrix	Number of samples evaluated	Range (ng/ml)	Mean (ng/ml)	Standard deviation (ng/ml)
Serum	40	1.9 – 11.2	7.1	2.5
Plasma	40	2.9 – 7.6	5.1	1.5

13. Bibliography

- 1- Esmon, O. and al.(1981) .J.Proc.Natl.Acad.Sci.USA, 78:2249
- 2- Dittman, M and al. (1990) Blood, 75:325
- 3- Suzuki, K and al. (1987) EMBO J., 6:1891
- 4- Esmon, E. and al. (1982) J. Biol. Chem., 257: 7944
- 5- Esmon, C. and al. (1983) J.Biol.Chem.258, 12268
- 6- Takano, S. and al. (1990) Blood 76:2024
- 7-Salomaa, V and al. (1999) Lancet 353: 1729
- 8-Jansson, J.H. and al. (1997) Circulation 96:2938
- 9-Ohlin, A.K. and al. (2005) J.Thromb.Haemost.3:976
- 10- Kurosawa, S. and al. (1987) J.Biol.Chem.262.2206
- 11- Kearon, C. and al. (2005) J.Thromb. Haemost 3:962
- 12- Bernard, G.R. and al. (2001) N.Engl. J.Med. 344:699
- 13- Ossovskaya, V.S. and N.W. Bunnet (2004) Physiol.Rev.84:579
- 14- Hanly, A.M. and D.C. Winter (2007) Semin. Thromb. Hemost. 33:673.

14. OriGeneHuman CD141 ELISA references

De Leeuw K. et al.(2005) Ann. Rheum. Dis. 64 (5) 753-759 De Leeuw K. et al (2006), Lupus 15(10) 675-682 De Leeuw K. et al (2008), Lupus 17(11) 1010-1017 Jie, K. E. et al., Heart, 2011; Jan(97):60-65 Skrabal, C et al.,(2006), Jthorac Cardiovasc Surg. 132(2) 291-6 Yano, Y et al. (2003) J Clin Endocrinol Metab. 88 (2): 736-41

15. Assay Summary

Total procedure length: 1h45mn

Add 100 µl of sample and diluted standard/controls and 50µl Biotinylated anti-CD141

1

Incubate 1 hours at room temperature

 \downarrow

Wash three times

 \downarrow

Add 100µl of Streptavidin-HRP

 \downarrow

Incubate 30min at room temperature

 \downarrow

Wash three times

 \downarrow

Add 100µl of ready-to-use TMB Protect from light. Let the color develop for 12-15 mn.

Ţ

Add 100µl H₂SO₄

↓ ↓

Read Absorbance at 450 nm

TECHNICAL CONSULTATION

OriGene Technologies, Inc. 9620 Medical Center Dr., Suite 200 Rockville, MD 20850

Phone: 1.888.267.4436 Fax: 301-340-9254 Email: techsupport@origene.com Web: www.origene.com

For Research Use Only Not for use in diagnostic procedures