

Human APCS Sandwich ELISA Kit Datasheet

Please read it entirely before use

Catalogue Number: KE00122 Size: 96T Sensitivity: 2.6 pg/mL Range: 15.6 - 1000 pg/mL Usage: For the quantitative detection of human APCS concentrations in serum, plasma, cell culture supernatant and urine.

This product is for research use only and not for use in human or animal therapeutic or diagnostic.



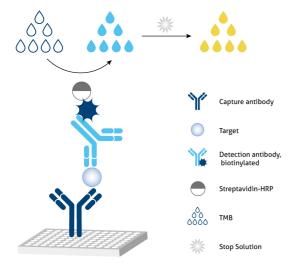
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1. Background

Serum amyloid P component (SAP, also known as APCS), belongs to the family of pentraxins, a superfamily of plasma proteins characterized by their pentameric assembly and calcium-dependent ligand binding. SAP is a constitutive serum protein synthesized by hepatocytes. It is structurally related to C-reactive protein, a major acute-phase reactant in humans. SAP is a calcium-dependent ligand binding protein, which can interact with DNA and histones and may scavenge nuclear material released from damaged circulating cells. SAP can also bind to fibrils in all types of amyloid deposits, and contributes to the pathogenesis of amyloidosis.

2. Principle



Sandwich ELISA structure (Detection antibody labeled with biotin)

A capture antibody is pre-coated onto the bottom of wells which binds to analyte of interest. A detection antibody labeled with biotin also binds to the analyte. Streptavidin-HRP binds to the biotin. TMB acts as the HRP substrate and the solution color will change from colorless to blue. A stop solution containing sulfuric acid turns solution yellow. The color intensity is proportional to the quantity of bound protein which is measurable at 450 nm with the correction wavelength set at 630 nm.

3. Required Materials

3.1 A microplate reader capable of measuring absorbance at 450 nm with the correction wavelength set at 630 nm.

3.2 Calibrated, adjustable precision pipettes and disposable plastic tips. A manifold multi-channel pipette is recommended for large assays.

3.3 Plate washer: automated or manual.

3.4 Absorbent paper towels.

3.5 Glass or plastic tubes to prepare standard and sample dilutions.

3.6 Beakers and graduated cylinders.

3.7 Log-log or semi-log graph paper or computer and software for ELISA data analysis. A four-parameter logistic (4-PL) curve-fit is recommended.



4. Kit Components and Storage

Microplate - antibody coated 96-well microplate (8 well × 12 strips)	1 plate	Unopened Kit:	
Protein standard - 1000 pg/bottle; lyophilized	2 bottles		
Detection antibody, biotinylated (100×) - 120 µL/vial*	1 vial	Store at 2-8°C for 6 months or -	
Streptavidin-horseradish peroxidase (HRP) (100×) - 120 µL/vial*	1 vial	20°C for 12 months.	
Sample Diluent PT 1-ef - 30 mL/bottle. For serum, plasma and cell culture supernatant	2 bottles	Opened Kit:	
Sample Diluent PT 3-ef - 30 mL/bottle. For urine	1 bottle	All reagents stored at 2-8°C for	
Detection Diluent - 30 mL/bottle	1 bottle	7 days.	
Wash Buffer Concentrate (20×) - 30 mL/bottle	1 bottle	Please use a new standard	
Tetramethylbenzidine Substrate (TMB) - 12 mL/bottle	1 bottle	for each assay.	
Stop Solution - 12 mL/bottle	1 bottle	ior cach assay.	
Plate Cover Seals	4 pieces		

* Centrifugation immediately before use

5. Safety Notes

5.1 Avoid any skin and eye contact with Stop Solution and TMB. In case of contact, wash thoroughly with water.

5.2 Do not use the kit after the expiration date.

5.3 Do not mix or substitute reagents or materials from other kit lots or other sources.

5.4 Be sure to wear protective equipment such as gloves, masks and goggles during the experiment.

5.5 When using an automated plate washer, adding a 30 second soak period following the addition of Wash Buffer to improve assay precision

6. Sample Collection and Storage

6.1 Serum: Allow blood samples to clot for 30 minutes, followed by centrifugation for 15 minutes at 1000xg. Clear serum can be assayed immediately or aliquoted and stored at -20°C. Avoid repeated freeze-thaw cycles.

6.2 Plasma: Use EDTA, heparin, or citrate as an anticoagulant for plasma collection. Centrifuge for 15 minutes at 1000xg within 30 minutes of collection. The plasma can be assayed immediately or aliquoted and stored at -20°C. Avoid repeated freeze-thaw cycles.

6.3 Cell Culture Supernatant: Remove particulates by centrifugation for 5 minutes at 500xg and assay immediately or aliquot and store samples at \leq -20°C. Avoid repeated freeze-thaw cycles.

6.4 Urine: Collect urine samples and centrifuge for 20 minutes at 1000xg. Collect the aqueous layer, assay immediately or aliquot and store samples at \leq -20°C. Avoid repeated freeze-thaw cycles.



7. Regent Preparation

7.1 Wash Buffer (1X): If crystals have formed in the concentrate, warm to room temperature and mix gently until the crystals have completely dissolved. Add 30 mL of Wash Buffer Concentrate(20X) to 570 mL deionized or distilled water to prepare 1X Wash Buffer.

7.2 Detection Antibody (1X): Dilute 100X Detection Antibody 1:100 using Detection Diluent prior to assay. Suggested 1:100 dilution: 10 µL 100X Detection Antibody + 990 µL Detection Diluent (Centrifuge the 100 X Detection Antibody solution for a few seconds prior to use).

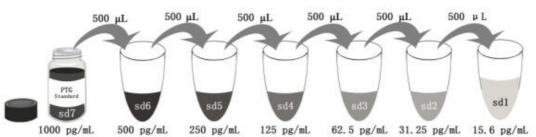
7.3 Streptavidin-HRP (1X): Dilute 100X Streptavidin-HRP 1:100 using Detection Diluent prior to assay. Suggested 1:100 dilution: 10 µL 100X Streptavidin-HRP + 990 µL Detection Diluent (Centrifuge the 100X Streptavidin-HRP solution for a few seconds prior to use).

7.4 Sample Dilution: Different samples should be diluted with corresponding Sample Diluent, samples may require further dilution if the readout values are higher than the highest standard OD reading. Variations in sample collection, processing and storage may affect the results of the measurement.

Recommended Dilution for different sample types: The human serum, plasma is better to be diluted 1:200,000 and 1:2 dilution is recommended for cell culture supernatant, the urine is better to be diluted 1:4 or 1:8 before assay.

7.5 Standard Serial Dilution:

For human serum, plasma and cell culture supernatant, add 1 mL Sample Diluent PT 1-ef in protein standard; For urine sample, add 1 mL Sample Diluent PT 3-ef in protein standard.



Add # µL of Standard diluted in the previous step	-	500 μL	500 μL	500 µL	500 µL	500 µL	500 µL
#μL of Sample Diluent PT 1-ef or PT 3-ef	1000 μL	500 μL	<mark>500 μL</mark>				
	"sd7"	"sd6"	"sd5"	"sd4"	"sd3"	"sd2"	"sd1"

8. Assay Procedure Summary

Bring all reagents to room temperature before use (Detection antibody and Streptavidin-HRP can be used immediately). To avoid cross-contamination, change pipette tips between additions of each standard level, between sample additions, and between reagent additions. Also, use separate reservoirs for each reagent. 8.1 Take out the required number of microplate strips and return excess strips to the foil pouch containing the drying reagent pack and reseal; store at 4°C immediately. Microplate strips should be used in one week.

8.2 Preset the layout of the microplate, including control group, standard group and sample group, add 100 µL of each standard and sample to the appropriate wells. (Make sure sample addition is uninterrupted and completed within 5 to 10 minutes, It is recommended to assay all standards, controls, and samples in duplicate).

8.3 Seal plate with cover seal, pressing it firmly onto top of microwells. Incubate the plate for 2 hours at 37°C.8.4 Wash

1) Gently remove the cover seal. Discard the liquid from wells by aspirating or decanting. Remove any residual solution by tapping the plate a few times on fresh paper towels.

2) Wash 4 times with 1X Wash Buffer, using at least 350-400 µL per well. Following the last wash, firmly tap plates on fresh towels 10 times to remove residual Wash Buffer. Avoid getting any towel fibers in the wells or wells drying out completely.
8.5 Add 100 µL of 1X Detection Antibody solution (refer to Reagent Preparation7.2) to each well. Seal plate with cover seal and incubate for 1 hour at 37°C.

8.6 Repeat wash step in 8.4.

8.7 Add 100 μ L of 1X Streptavidin-HRP solution (refer to Reagent Preparation7.3) to each well. Seal plate with cover seal and incubate the plate for 40 minutes at 37°C.

8.8 Repeat wash step in 8.4.

8.9 Signal development: Add 100 μL of TMB substrate solution to each well, protected from light. Incubate for 15 to 20 minutes. Substrate Solution should remain colorless until added to the plate.

8.10 Quenching color development: Add 100 µL of Stop Solution to each well in the same order as addition of the TMB substrate. Mix by tapping the side of the plate gently. NB: Avoid skin and eye contact with the Stop solution.

8.11 Read results: Immediately after adding Stop solution read the absorbance on a microplate reader at a wavelength of 450 nm. If possible, perform a double wavelength readout (450 nm and 630 nm).

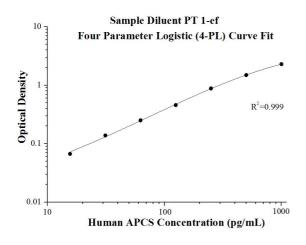
8.12 Data analysis: Calculate the average of the duplicate readings (OD value) for each standard and sample, and subtract the average of the zero standard absorbance. Construct a standard curve by plotting the mean absorbance for each standard on the y-axis against the concentration on the x-axis, use four-parameter logistic curve- fit (4-PL) analysis to do this. If the samples have been diluted, the OD readout from the standard curve must be multiplied by the dilution factor used.

Step	Reagent	Volume	Incubation	Wash	Notes		
1	Standard and Samples	100 µL	120 min	4 times	Cover Wells incubate at 37°C		
2	Diluent Antibody Solution	100 µL	60 min	4 times	Cover Wells incubate at 37°C		
3	Diluent HRP Solution	100 µL	40 min	4 times	Cover Wells incubate at 37°C		
4	TMB Substrate	100 µL	15-20 min	Do not wash	Incubate in the dark at 37°C		
5	Stop Solution	100 µL	0 min	Do not wash	-		
6	Read plate at 450 nm and 630 nm immediately after adding Stop solution. DO NOT exceed 5 minutes.						

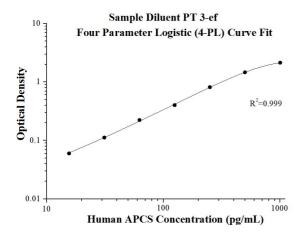
9. Validation Data

9.1 Standard curve

These standard curves are provided for demonstration only. A standard curve should be generated for each set of samples assayed.



(pg/mL)	0.D	Average	Corrected
0	0.032 0.032	0.032	-
15.6	0.089 0.109	0.099	0.067
31.25	0.166 0.175	0.171	0.139
62.5	0.268 0.298	0.283	0.251
125	0.471 0.508	0.490	0.458
250	0.946 0.883	0.915	0.883
500	1.524 1.525	1.525	1.493
1000	2.318 2.337	2.328	2.296



(pg/mL)	0.D	Average	Corrected
0	0.063 0.061	0.062	-
15.6	0.126 0.118	0.122	0.060
31.25	0.167 0.181	0.174	0.112
62.5	0.274 0.297	0.286	0.224
125	0.441 0.488	0.465	0.403
250	0.888 0.870	0.879	0.817
500	1.498 1.556	1.527	1.465
1000	2.236 2.171	2.204	2.142

9.2 Precision

Intra-assay Precision (Precision within an assay) Three samples of known concentration were tested 20 times on one plate to assess intra-assay precision.

Inter-assay Precision (Precision between assays) Three samples of known concentration were tested in 24 separate assays to assess inter-assay precision.

Intra-assay Precision						Inter-assay Precision				
Sample	n	Mean (pg/mL)	SD	CV%		Sample	n	Mean (pg/mL)	SD	CV%
1	20	24.0	2.6	10.9		1	24	28.9	2.9	9.9
2	20	100.4	7.1	7.1		2	24	106.2	10.1	9.5
3	20	432.7	18.2	4.2		3	24	457.7	45.0	9.8

9.3 Recovery

The recovery of human APCS spiked to three different levels throughout the range of the assay in various matrices was evaluated.

Sample Type		Average% of Expected	Range (%)
Human plasma	1:400,000	111	91-120
попан разна	1:800,000	107	90-121
	1:2	94	83-119
Cell culture supernatant	1:4	93	81-126
Urine	1:8	100	75-119
Unite	1:16	106	80-119

9.4 Sample values

Samples from healthy volunteers were evaluated for human APCS in this assay. No medical histories were available for the donors used in this study.

Sample Type	Mean of Detectable (ug/mL)	Range (ug/mL)
Human plasma (n=16)	53	9-118

Sample Type	Mean of Detectable (pg/mL)	Range (pg/mL)
Urine (n=8)	7,011	2,453-18,235

9.5 Sensitivity

The minimum detectable dose of human APCS is 2.6 pg/mL. This was determined by adding two standard deviations to the concentration corresponding to the mean O.D. of 20 zero standard replicates.

9.6 Linearity

To assess the linearity of the assay, cell culture supernatant was spiked with high concentrations of human APCS in various matrices and diluted with the appropriate **Sample Diluent** to produce samples with values within the dynamic range of the assay. Human plasma and urine samples were diluted with the appropriate **Sample Diluent** to produce samples with values within the dynamic range of the assay. (The human plasma samples were initially diluted 1:200,000, the urine samples were initially diluted 1:4)

		Human plasma (Sample Diluent PT 1-ef)	Cell culture supernatant (Sample Diluent PT 1-ef)	Urine (Sample Diluent PT 3-ef)
1:2	Average% of Expected	100	91	100
1.2	Range (%)	-	76-105	-
1./	Average% of Expected	89	94	102
1:4	Range (%)	79-95	73-109	93-112
1:8	Average% of Expected	88	97	102
1.0	Range (%)	76-96	92-104	97-108
1,16	Average% of Expected	98	99	95
1:16	Range (%)	88-104	85-124	88-102

10. References

1. de Haas CJ, et al. New insights into the role of serum amyloid P component, a novel lipopolysaccharide-binding protein. FEMS Immunol Med Microbiol.

26(3-4):197-202 (1999).

2. Pepys MB, et al. Biology of serum amyloid P component. Ann N Y Acad Sci. 389:286-98 (1982).

3. Familian A, et al. Chromatin-independent binding of serum amyloid P component to apoptotic cells. J Immunol. 167(2):647-54 (2001).

4. Pepys MB, et al. Targeted pharmacological depletion of serum amyloid P component for treatment of human amyloidosis. 417(6886):254-9 (2002).

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