Progesterone Receptor (PR) [16]

Concentrated and Prediluted Monoclonal Antibody

Control Number: 902-424-061615

Catalog Number:	**CM 424 A, C**	**OAR 424 T60**
Description:	0.1, 1.0 ml, concentrated	60 tests, prediluted
Dilution:	1:50-1:100	Ready-to-use
Diluent:	Van Gogh Yellow	N/A

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

Summary and Explanation:
Progesterone Receptor (PGR) content of breast cancer tissue is an important parameter in the prediction of prognosis and response to endocrine therapy (5). Studies have shown PGR clone 16 is directed against the human progesterone receptor molecule (1 -5). A prokaryotic recombinant protein, corresponding to the N-terminal region of the A form of human progesterone receptor, was used as the immunogen. Antibody characterization studies demonstrated that PGR clone 16 reacts with both A and B forms of human progesterone receptor by Western blotting procedure (4).

Source: Mouse monoclonal
Species Reactivity: Human; others not tested
Clone: 16
Isotype: IgG1
Total Protein Concentration: ~10 mg/ml. Call for lot specific Ig concentration.
Epitope/Antigen: Progesterone receptor
Cellular Localization: Nuclear
Positive Control: Progesterone Receptor positive breast carcinoma
Known Applications:
Immunohistochemistry (formalin-fixed paraffin-embedded tissues)
Supplied As: Buffer with protein carrier and preservative
Storage and Stability:
Store at 2ºC to 8ºC. 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 2ºC to 8ºC.

Staining Protocol Recommendations (manual use):
Peroxide Block: Block for 5 minutes with Biocare's Peroxidazed 1.
Pretreatment Solution: Diva
Pretreatment Protocol:
Retrieve sections under pressure using Biocare's NxGen Decloaking Chamber at 110°C for 20 minutes; alternatively, follow the recommendations in the Decloaking Chamber User Manual if using a different model.
Protein Block: Incubate for 15 minutes at RT with Biocare's Background Punisher.
Primary Antibody: Incubate for 45 minutes at RT.
Probe: Incubate for 10 minutes at RT with a secondary probe.
Polymer: Incubate for 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.

Protocol Recommendations (ONCORE Automated Slide Staining System):
OAR424 is intended for use with the ONCORE Automated Slide Staining System. Refer to the ONCORE Automated Slide Staining System User Manual for specific instructions on its use. Protocol parameters in the ONCORE Automated Slide Stainer Protocol Editor should be programmed as follows:

Protocol Name: PR
Protocol Template (Description): Ms HRP Template 1
Dewaxing (DS Option): DS Buffer
Antigen Retrieval (AR Option): AR2, low pH; 103°C
Reagent Name, Time, Temp.: PR, 30 min., 25°C

Technical Note:
This antibody has been optimized for use with Biocare's MACH 4 Universal HRP-Polymer Detection and ONCORE HRP Detection. Other Biocare polymer detection kits may be used; however, users must validate incubation times and protocols for their specific application. Use TBS for washing steps.

Limitations:
This product is provided for Research Use Only (RUO) and is not for use in diagnostic procedures. Suitability for specific applications may vary and it is the responsibility of the end user to determine the appropriate application for its use.

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 (NaN_3) 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) (6)
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. (7)
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.

Technical Support:
Contact Biocare's Technical Support at 1-800-542-2002 for questions regarding this product.

References:

1. Qiu J, *et al.* Effect of delayed formalin fixation on estrogen and progesterone receptors in breast cancer: a study of three different clones. Am J Clin Pathol. 2010 Nov; 134(5):813-9.
2. Arihito K, *et al*. Comparison of evaluations for hormone receptors in breast carcinomas using two manual and three automated immunohistochemical assays. Am J Clin Pathol. 2007 Mar; 127(3):356-65.
3. Press M, *et al.* Comparison of different antibodies for detection of progesterone receptor in breast cancer steroids. Steroids. 2002 Aug; 67(9):799-813.
4. Mote P, *et al.* Detection of progesterone receptor forms A and B by immunohistochemical analysis. J Clin Pathol. 2001 Aug; 54(8):624-30.
5. Bevitt D, *et al*. New monoclonal antibodies to oestrogen and progesterone receptors effective for paraffin section immunohistochemistry. J Pathol. 1997 Oct; 183(3):228 -32.
6. Center for Disease Control Manual. Guide: Safety Management, NO. CDC-22, Atlanta, GA. April 30, 1976 "Decontamination of Laboratory Sink Drains to Remove Azide Salts."
7. Clinical and Laboratory Standards Institute (CLSI). Protection of Laboratory Workers from Occupationally Acquired Infections; Approved Guideline-Fourth Edition CLSI document M29-A4 Wayne, PA 2014.

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