

LSBio™ Rabbit Fibrinogen ELISA Kit

Catalog No. LS-F10457

User Manual

**Please Read the Manual Carefully
Before Starting your Experiment**



For research use only. Not approved for use in humans or for clinical diagnosis.

INTENDED USE

This rabbit fibrinogen antigen assay is intended for the quantitative determination of total fibrinogen antigen in rabbit plasma and serum. **For research use only.**

BACKGROUND

Fibrinogen is a soluble glycoprotein that circulates in the blood and is converted to insoluble fibrin by thrombin in the final step of the coagulation cascade [1]. Hepatic expression of fibrinogen increases two to four hundred fold during the acute phase response to infection or inflammation [2]. Elevated fibrinogen levels are correlated with cardiovascular disease [3] and atherosclerosis [4].

ASSAY PRINCIPLE

Rabbit fibrinogen will bind to the affinity purified capture antibody coated on the microtiter plate. After appropriate washing steps, biotin labeled polyclonal anti-rat fibrinogen primary antibody binds to the captured protein. Excess antibody is washed away and bound polyclonal antibody is reacted with streptavidin conjugated to horseradish peroxidase. TMB substrate is used for color development at 450nm. A standard calibration curve is prepared along with the samples to be measured using dilutions of rabbit fibrinogen. Color development is proportional to the concentration of fibrinogen in the samples.

REAGENTS PROVIDED

- **96-well antibody coated microtiter strip plate** (removable wells 8x12) containing anti-rabbit fibrinogen antibody, blocked and dried.
- **10X Wash buffer:** 1 bottle of 50ml
- **5X Diluent:** 1 bottle of 50ml
- **Rabbit fibrinogen standard:** 1 vial lyophilized standard
- **Anti-rabbit fibrinogen primary antibody:** 1 vial lyophilized polyclonal antibody
- **Horseradish peroxidase-conjugated streptavidin:** 1 vial concentrated HRP labeled streptavidin
- **TMB substrate solution:** 1 bottle of 10ml solution
- **Stop solution:** 1 bottle of 6ml 1N H₂SO₄

STORAGE AND STABILITY

Store all kit components at 4°C upon arrival. Return any unused microplate strips to the plate pouch with desiccant. Reconstituted standards and primary may be stored at -80°C for later use. Do not freeze-thaw the standard and primary antibody more than once. Store all other unused kit components at 4°C. This kit should not be used beyond the expiration date.

OTHER REAGENTS AND SUPPLIES REQUIRED

- Microtiter plate shaker capable of 300 rpm uniform horizontally circular movement
- Manifold dispenser/aspirator or automated microplate washer
- Microplate reader capable of measuring absorbance at 450 nm
- Pipettes and Pipette tips
- Deionized or distilled water
- Polypropylene tubes for dilution of standard
- Paper towels or laboratory wipes

PRECAUTIONS

- FOR LABORATORY RESEARCH USE ONLY. NOT FOR DIAGNOSTIC USE.
- Do not mix any reagents or components of this kit with any reagents or components of any other kit. This kit is designed to work properly as provided.
- Always pour peroxidase substrate out of the bottle into a clean test tube. Do not pipette out of the bottle as contamination could result.
- Keep plate covered except when adding reagents, washing, or reading.
- DO NOT pipette reagents by mouth and avoid contact of reagents and specimens with skin.
- DO NOT smoke, drink, or eat in areas where specimens or reagents are being handled.

PREPARATION OF REAGENTS

- **1X Diluent:** 5X Diluent may contain precipitate. Warm to redissolve before use. Dilute 50ml of 5X diluent concentrate with 200ml of deionized water.
- **1X Wash buffer:** Dilute 50ml of 10X wash buffer concentrate with 450ml of deionized water.

SAMPLE COLLECTION

Collect plasma using EDTA or citrate as an anticoagulant. Centrifuge for 15 minutes at 1000xg within 30 minutes of collection. Assay immediately or aliquot and store at $\leq -20^{\circ}\text{C}$. Avoid repeated freeze-thaw cycles.

ASSAY PROCEDURE

Perform assay at room temperature. Vigorously shake plate (300rpm) at each step of the assay.

Preparation of Standard

Reconstitute standard by adding 2ml of diluent directly to the vial and agitate gently to completely dissolve contents. This will result in a 500ng/ml standard solution.

Dilution table for preparation of rabbit fibrinogen standard:

| Fibrinogen concentration (ng/ml) | Dilutions |
|----------------------------------|---|
| 500 | From standard vial |
| 200 | 600 μl Diluent + 400 μl (500ng/ml) |
| 100 | 500 μl Diluent + 500 μl (200ng/ml) |
| 50 | 500 μl Diluent + 500 μl (100ng/ml) |
| 20 | 600 μl Diluent + 400 μl (50ng/ml) |
| 10 | 500 μl Diluent + 500 μl (20ng/ml) |
| 5 | 500 μl Diluent + 500 μl (10ng/ml) |
| 2 | 600 μl Diluent + 400 μl (5ng/ml) |
| 1 | 500 μl Diluent + 500 μl (2ng/ml) |
| 0.5 | 500 μl Diluent + 500 μl (1ng/ml) |
| 0 | 500 μl Diluent Zero point to determine background |

NOTE: DILUTIONS FOR THE STANDARD CURVE AND ZERO STANDARD MUST BE MADE AND APPLIED TO THE PLATE IMMEDIATELY.

Standard and Unknown Addition

Remove microtiter plate from bag and add 100 μl fibrinogen standards (in duplicate) and unknowns to wells. Carefully record position of standards and unknowns. Shake plate at 300rpm for 30 minutes. Wash wells three times with 300 μl wash buffer. Remove excess wash by gently tapping plate on paper towel or kimwipe.

NOTE: The assay measures fibrinogen antigen in the 0.5-500 ng/ml range. If the unknown is thought to have high fibrinogen levels, dilutions may be in diluent. A 1:500,000-1:1,000,000 dilution for normal rabbit plasma is suggested for best results.

Primary Antibody Addition

Reconstitute primary antibody by adding 10ml of diluent directly to the vial and agitate gently to completely dissolve contents. Add 100 μl to all wells. Shake plate at 300rpm for 30 minutes. Wash wells three times with 300 μl wash buffer. Remove excess wash by gently tapping plate on paper towel or kimwipe.

Streptavidin-HRP Addition

Briefly centrifuge vial before opening. Dilute 2.5 μl of HRP conjugated streptavidin into 2.5ml diluent to generate a 1:1,000 dilution. Add 0.2ml of 1:1,000 dilution to 9.8ml of diluent to generate a 1:50,000 dilution. Add 100 μl of the 1:50,000 dilution to all wells. Shake plate at 300rpm for 30 minutes. Wash wells three times with 300 μl wash buffer. Remove excess wash by gently tapping plate on paper towel or kimwipe.

Substrate Incubation

Add 100 μl TMB substrate to all wells and shake plate for 2-5 minutes. Substrate will change from colorless to different strengths of blue. Quench reaction by adding 50 μl of 1N H_2SO_4 stop solution to all wells when samples are visually in the same range as the standards. Add stop solution to wells in the same order as substrate upon which color will change from blue to yellow. Mix thoroughly by gently shaking the plate.

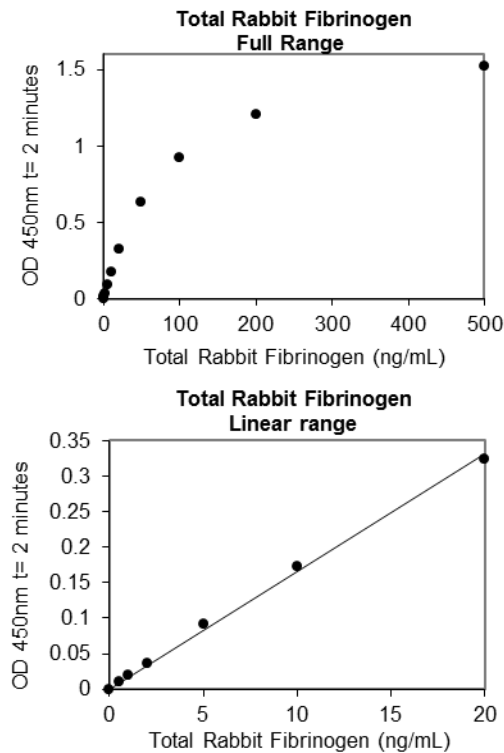
Measurement

Set the absorbance at 450nm in a microtiter plate spectrophotometer. Measure the absorbance in all wells at 450nm. Subtract zero point from all standards and unknowns to determine corrected absorbance (A_{450}).

Calculation of Results

Plot A_{450} against the amount of fibrinogen in the standards. Fit a straight line through the linear points of the standard curve using a linear fit procedure if unknowns appear on the linear portion of the standard curve. Alternatively, create a standard curve by analyzing the data using a software program capable of generating a four parameter logistic (4PL) curve fit. The amount of fibrinogen in the unknowns can be determined from this curve. If samples have been diluted, the calculated concentration must be multiplied by the dilution factor.

A typical standard curve (EXAMPLE ONLY):



EXPECTED VALUES

Fibrinogen is present in normal rabbit plasma at a concentration of 3.07 mg/ml [5].

PERFORMANCE CHARACTERISTICS

Sensitivity: The minimum detectable dose (MDD) was determined by adding two standard deviations to the mean optical density value of twenty zero standard replicates (range OD₄₅₀: 0.087-0.107) and calculating the corresponding concentration. The MDD was 0.161 ng/ml.

Intra-assay Precision: These studies are currently in progress. Please contact us for more information.

Inter-assay Precision: These studies are currently in progress. Please contact us for more information.

Recovery: These studies are currently in progress. Please contact us for more information.

Linearity: These studies are currently in progress. Please contact us for more information.

Specificity: These studies are currently in progress. Please contact us for more information.

DISCLAIMER

This information is believed to be correct but does not claim to be all-inclusive and shall be used only as a guide. The supplier of this kit shall not be held liable for any damage resulting from handling of or contact with the above product.

REFERENCES

1. Kamath S and Lip GYH: QJM. 2003, 96:711-729.
2. Kusher I: Ann New York Acad Sci. 1982, 389:39-48.
3. Kannel WB, *et al.*: J Am Med Assoc. 1987, 258:1183-1186.
4. Handa K, *et al.*: Atherosclerosis. 1989, 77:209-213.
5. Brahmanekar DM and Nath MC: Am J Phys. 1963, 204:653-654.
6. Dorner H, *et al.*: Gerontology. 1995, 41:252-259.

Example of ELISA Plate Layout

96 Well Plate: 22 Standard wells, 74 Sample wells

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 |
|----------|------------|--------------|------------|------------|------------|-------------|-------------|-------------|--------------|--------------|--------------|-----------|
| A | 0 ng/ml | 0.5 ng/ml | 1 ng/ml | 2 ng/ml | 5 ng/ml | 10 ng/ml | 20 ng/ml | 50 ng/ml | 100 ng/ml | 200 ng/ml | 500 ng/ml | |
| B | 0 ng/ml | 0.5 ng/ml | 1 ng/ml | 2 ng/ml | 5 ng/ml | 10 ng/ml | 20 ng/ml | 50 ng/ml | 100 ng/ml | 200 ng/ml | 500 ng/ml | |
| C | | | | | | | | | | | | |
| D | | | | | | | | | | | | |
| E | | | | | | | | | | | | |
| F | | | | | | | | | | | | |
| G | | | | | | | | | | | | |
| H | | | | | | | | | | | | |
| | | | | | | | | | | | | |

Important Note: During shipment, small volumes of product will occasionally become entrapped in the seal of the product vial. We recommend briefly centrifuging the vial to dislodge any liquid in the container's cap prior to opening.

Warning: This reagent may contain sodium azide and sulfuric acid. The chemical, physical, and toxicological properties of these materials have not been thoroughly investigated. Standard Laboratory Practices should be followed. Avoid skin and eye contact, inhalation, and ingestion. Sodium azide forms hydrazoic acid under acidic conditions and may react with lead or copper plumbing to form highly explosive metal azides. On disposal, flush with large volumes of water to prevent accumulation.

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