

Anti-CD22 [BLCAM/1785]

Catalog No.	Description		
AM962-5M	6 ml of Ready-to-Use Antibody for use with BioGenex Super Sensitive TM Detection Systems OR equivalent detection system		
AM962-10M	10 ml of Ready-to-Use Antibody in a barcode labeled vial for use with BioGenex Super Sensitive TM Detection Systems and i6000 TM Automated Staining Systems		
MU962-UC	1 ml of Concentrated Antibody for use with BioGenex Super Sensitive TM Detection Systems OR equivalent detection system		
MU962-5UC	0.5 ml of Concentrated Antibody for use with BioGenex Super Sensitive TM Detection Systems OR equivalent detection system		
AX962-YCD	AX962-YCD Ready-to-Use Antibody in Barcode labeled vial for use on the Xmatrx® Elite/Ultra Staining System, 160 tests		
AX962-50D	Ready-to-Use Antibody in Barcode labeled vial for use on the Xmatrx® Elite/Ultra Staining System, 50 tests		

Clone	Species	Ig Class
BLCAM/1785	Mouse	IgG1

Intended Use

For Research Use. This antibody is designed for the specific localization of CD22 in formalin-fixed, paraffin-embedded (FFPE) tissue sections. Evaluation must be performed by a qualified pathologist.

Summary and Explanation

CD-22, a B-cell transmembrane glycoprotein, is part of the immunoglobulin superfamily. The Ig domain of the CD-22 molecule binds to the Sialic acid particularly. It has been shown that CD-22 is a negative regulator of the BCR signal and therefore has a role in suppression of the immune response. CD-22 has also been linked to having a role in TLR signaling and B- cell survival. Defects in CD-22 has been linked to poor regulation of BCR and thus causing hyper responsive B-cells that lead to autoimmune diseases like Systemic Lupus erythematoses.

Storage and Handling

Store at 2-8°C. Fresh dilutions, if required, should be prepared prior to use and are stable and steady for up to one day at room temperature (20-26°C). Diluted antibody preparations can be refrigerated or frozen for extended shelf life.

Principles of the Procedure

Antigen detection by immunohistochemistry (IHC) is a two-step process wherein the primary antibody binds to the antigen of interest and that binding is detected by a chromogen. The primary antibody may be used in IHC using manual techniques or BioGenex Automated Staining System. Positive and negative controls should always be run simultaneously with all patient specimens.

Reagents Provided

Mouse Monoclonal Antibody CD22is affinity purified and diluted in PBS, pH 7.2, containing 1% BSA and 0.09% sodium azide

Dilution of Primary Antibody

BioGenex Ready-to-Use antibodies have been optimized for use with the recommended BioGenex Detection System and should not require further dilution.

BioGenex concentrated antibodies must be diluted in accordance with the recommended protocol when used with the recommended BioGenex Detection System.

Recommended Protocol

Refer to the following table for conditions specifically recommended for this antibody. Refer to the BioGenex website for guidance on specific staining protocols or other requirements.

Parameter	BioGenex Recommendations		
Control Tissue	Tonsil tissue as available with Biogenex FB-962M* & FG-962M*		
Recommended Dilution for Concentrated Antibody	1:20-50 in HK941		
Recommended Pretreatment (Manual/i6000)**	EZ-AR1 (HK521-XAK)		
Recommended	EZ-AR1 Elegance		
Pretreatment (Xmatrx)	(HX031-YCD)		
Antibody Incubation (Manual/i6000)	30-60 Min at RT		
Antibody Incubation (Xmatrx)	45-60 Min at 25°C		
	Use BioGenex Two-Step OR		
Detection System for	One-Step Super Sensitive TM		
Manual, Xmatrx & i6000	Polymer-HRP IHC Detection		
systems***	System/DAB; see p. 2 for more		
	information		

^{*}FB: positive control barrier slides, FG: positive control non-barrier slides. Xmatrx requires barrier slides.

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^{**}Pretreatment times will vary based on individual microwave power.



***For automation systems (Xmatrx-Elite, Xmatrx-Ultra & i6000 Diagnostics), refer to the factory protocols provided with the instrument.

Detection System	Two-Step HRP Kit	One-Step HRP Kit	Link and Label Kit
Manual	QD440-XAKE (1000 Test) QD430-XAKE (1000 Test)	QD630-XAKE (1000 Test)	QP300-XAKE (1000 Test)
Manuai	QD420-YIKE (500 Test) QD400-60KE (60 Test)	QD620-XAKE (500 Test)	QP900-9LE (500 Test)
Xmatrx - Automation	QD550-YCDE (200 Test)	QD610-YADE (200 Test)	N/A
i6000 - Automation	QD410-YAXE (200 Test)	QD610-YAXE (200 Test)	N/A
For more information, visit <u>www.biogenex.com</u> .			

Precautions

This product contains sodium azide at concentrations of less than 0.1%. Sodium azide is not classified as a hazardous chemical at the product concentrations, but proper handling protocols should be observed. For more information, a Safety Data Sheet (SDS) for sodium azide is available upon request. Dispose of unused reagents according to Local, State and Federal Regulations. Wear suitable Personal Protective Equipment, do not pipette reagents by mouth, and avoid contact of reagents and specimens with skin and mucous membranes. If reagents or specimens come in contact with sensitive area, wash with copious amounts of water.

Quality Control

Refer to BioGenex detection system documents for guidance on general quality control procedures.

Troubleshooting

Refer to the troubleshooting section in the documentation for BioGenex Detection Systems (or equivalent detection systems) for remedial actions on detection system related issues, or contact BioGenex Technical Support Department at 1-800-421-4149 or support@biogenex.com or your local distributor to report unusual staining.

Expected Results

This antibody stains membrane in positive cells in formalinfixed, paraffin embedded tissue sections. An example image of a tissue section stained with this antibody can be found on the product page on the BioGenex website. Interpretation of the staining result is solely the responsibility of the user. Experimental results should be confirmed by a medicallyestablished diagnostic product or procedure.

Limitations of the Procedure

Improper tissue handling and processing prior to immunostaining can lead to inconsistent results. Variations in embedding and fixation or the nature of the tissue may lead to variations in results. Endogenous peroxidase activity or pseudo peroxidase activity in erythrocytes and tissue biotin may result in non-specific staining based on the detection system employed. Tissues containing Hepatitis B Surface Antigen (HBsAg) may give false positive with horseradish peroxidase systems. Improper counterstaining and mounting may compromise the interpretation of results.

Bibliography

- Hatta Y, Tsuchiya N, Matsushita M, Shiota M, Hagiwara K, Tokunaga K. Identification of the Gene Variations in Human CD22. Immunogenetics. 1999 Apr; 49(4):280-6.
- Lee, Mike, et al. Transcriptional Programs of the Lymphoid Tissue Capillary and High Endothelium Reveal Control Mechanisms for Lymphocyte Homing. Nat Immunol. 2014 Oct;15(10):982-95
- 3. Edward A. Clark and Natalia V. Giltiay. CD22: A Regulator of Innate and Adaptive B cell Responses and Autoimmunity. Front Immunol. 2018 Sep 28;9:2235

2°C 8°C	Temperature Limitation	LOT	Batch Code
\boxtimes	Use By Date	[]i	Consult Instructions for Use
NON	Non-Sterile		Manufacturer

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