



ClinMax™ Human TARC/CCL17 ELISA Kit

Catalog Number: CEA-C029

Assay Tests: 96 tests

For Research Use Only. Not For Use in Diagnostic or Therapeutic Procedures

IMPORTANT: Please carefully read this user guide before performing your experiment.

Product information

This kit is specifically designed for the accurate quantitation of human TARC/CCL17 from cell culture supernates,

serum and plasma.

The principle of this assay employs a quantitative sandwich enzyme immunoassay approach. Initially, a microplate

is coated with a capture antibody. Then, samples and biotinylated capture antibody are added to the wells. After

the removal of any unbound materials through washing, streptavidin-HRP (SA-HRP) conjugate is added to the

wells. Streptavidin has a very high affinity for biotin, so it binds to the biotinylated capture antibody that is already

bound to the target antigen. After washing, a substrate specific to HRP is added to the wells. HRP catalyzes a

reaction that converts the substrate into a detectable signal, often a color change or luminescence, depending

on the substrate used. This enzymatic reaction amplifies the signal, allowing for higher sensitivity in detecting the

target analyte. The intensity of the signal is measured using a spectrophotometer.

NOTE:

1. This kit is for research use only and is not for use in diagnostic or therapeutic applications.

2. Please do not use the kit after the expiration date indicated on the kit label.

3. Do not mix or substitute reagents with those from other lots or sources.

Manufactured and distributed by

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Contents

The kit contains sufficient reagents for 96 wells.

Catalog	Contents	Amount
CEA029-C01	Pre-coated Anti-CCL17 Antibody Microplate	1 plate
CEA029-C02	Human CCL17 Standard	500 μL
CEA029-C03	Biotin-Anti-CCL17 Antibody Con. Solution	100 μL
CEA029-C04	Biotin-Antibody Dilution Buffer	8 mL
CEA029-C05	Streptavidin-HRP Con. Solution	500 μL
CEA029-C06	Streptavidin-HRP Dilution Buffer	15 mL
CEA029-C07	20× Washing Buffer	50 mL
CEA029-C08	Sample Dilution Buffer	15 mL×2
CEA029-C09	Substrate Solution 12 mL	
CEA029-C10	Stop Solution 6 mL	

Storage

Keep the unopened kit stored at 2-8 °C. Avoid using the kit beyond its expiration date. For opened kit and reconstituted reagents, with the exception of the two contents listed in following table, others can be stored for up to 30 days at 2-8 °C.

Contents	Storage conditions
Pre-coated Anti-CCL17 Antibody Microplate	Return unused wells to the foil pouch, reseal along entire edge of zip-seal. May be stored for up to 1 month at 2-8°C.
Human CCL17 Standard	Aliquot and store at -70°C. Avoid repeated freeze-thaw cycles.

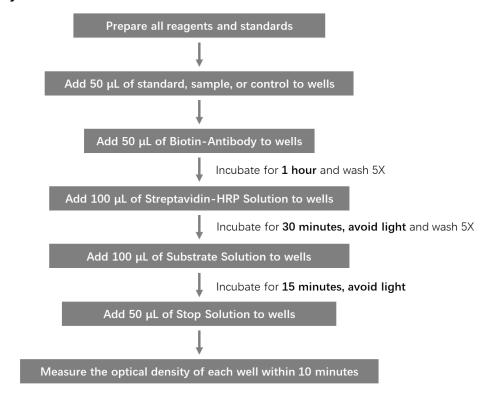
NOTE: Streptavidin-HRP Con. Solution and Substrate Solution should avoid light.

Required materials not supplied.

Instrument	Microplate reader capable of measuring absorbance at 450 nm	
Reagents	Deionized or distilled water	
	50 mL and 500 mL graduated cylinders	
Consumables	Pipettes and pipette tips	
	Tubes to prepare standard dilutions.	

Workflow

Analyte: CCL17



NOTE: Incubation temperature is 18 $^{\circ}$ C-25 $^{\circ}$ C

Prepare the working buffers and standard dilutions.

IMPORTANT: Bring all reagents to room temperature before use. If crystals have formed in buffer solution, place the buffer solution in an 37°C incubator until the crystals have completely dissolved and bring the solution back to room temperature before use.

Prepare the working buffers.

- 1. 1×Washing Buffer: Dilute 50 mL 20×Washing Buffer with deionized or distilled water to 1000 mL.
- 2. Biotin-Anti-CCL17 Antibody Solution: Add 60 μ L of Biotin-Anti-CCL17 Antibody Con. Solution to 6 mL Biotin-Antibody Dilution Buffer, thoroughly mix. The solution was freshly prepared just before use.
- 3. CCL17 Streptavidin-HRP Solution: Add 240 μ L of CCL17 Streptavidin-HRP Con. Solution to 12 mL of Streptavidin-HRP Dilution Buffer, thoroughly mix. The solution was freshly prepared just before use.

Prepare the standard serial dilutions.

- 1. Label a tube "Cm". Add 100 μ L of the reconstituted human CCL17 Standard and 150 μ L of Sample Dilution Buffer to tube Cm, gently mix well.
- 2. Label 7 tubes, one for each standard point: Std.-1, Std.-2, Std.-3, Std.-4, Std.-5, Std.-6, Std.-7.
- 3. Add 5 μ L of the liquid from **Cm** and 995 μ L of Sample Dilution Buffer to tube Std.-1, thoroughly mix (Std.-1 = 2000 pg/mL).
- 4. Prepare 1:1 serial dilutions for the standard curve as follows: Add 500 μL of Sample Dilution Buffer to each tube (Std.-2, Std.-3, Std.-4, Std.-5, Std.-6, Std.-7).
- 5. Transfer 500 μ L of liquid from Std.-1 to the tube Std.-2, and thoroughly mix (Std.-2 = 1000 pg/mL).
- 6. Continue to transfer 500 μ L of liquid from previous dilution tube to the next dilution tube until add liquid to tube Std.-7.
- 7. Sample Dilution Buffer serves as zero standard (blank).

PROCEDURE OF ASSAY

- 1. Add 50 µL of CCL17 Standard, sample, or control to wells.
- 2. Add 50 μL Biotin-Anti-CCL17 Antibody Solution to each well. Seal the plate with microplate sealing film. Incubate at room temperature (18-25 °C) for **1 hours**.
- 3. Aspirate each well and add 300 µL of 1×Washing Buffer to each well, gently tap the plate for **1 minute**. Remove any remaining Washing Buffer by aspirating or decanting. Invert the plate and blot it against clean paper towels. Repeat the wash process four times for a total of five washes.
- 4. Add 100 μ L of CCL17 Streptavidin-HRP Solution to each well. Seal the plate with microplate sealing film. Incubate at room temperature (18-25 °C) for 30 minutes, avoid light.
- 5. Repeat step 3.
- 6. Add 100 μ L of Substrate Solution to each well. Seal the plate with microplate sealing film and incubate at room temperature (18-25 °C) for **15 minutes, avoid light**.
- 7. Add 50 μL of Stop Solution to each well. Tap the plate gently to ensure thorough mixing.

 *Note: the color in the wells should change from blue to yellow.
- 8. Read the absorbance at 450nm and 630nm using Microplate reader within 10minutes.

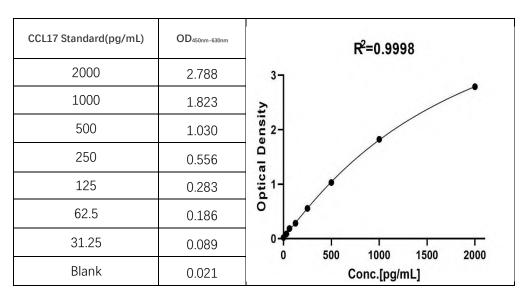
 *Note: To reduce the background noise, subtract the readings at 630nm from the readings at 450nm.

CALCULATION OF RESULTS

- 1. Compute the average of the duplicated readings for every standard, control, and sample. Then, subtract the average optical density (O.D.) of the zero standard(blank).
- 2. Establish a standard curve by processing the data using computer software capable of executing a four-parameter logistic (4-PL) curve fitting.
- 3. Normal range of Standard curve: $R^2 \ge 0.9900$.
- 4. If the OD value of the sample to be tested is higher than the highest standard, the sample shall be diluted with dilution buffer and assay repeated.

Typical data

Note: For each experiment, a standard curve needs to be set for each microplate, and the specific OD value may vary depending on different laboratories, testers, or equipment. The following example data is for reference only. The sample concentration was calculated based on the results of the standard curve.



PERFORMANCE CHARACTERISTICS

1. Sensitivity

The minimum detectable concentration (MDC) of CCL17 is typically less than 3 pg/mL. The MDC was determined by adding two standard deviations to the mean optical density value of twenty zero standard replicates and calculating the corresponding concentration.

TROUBLESHOOTING GUIDE

Problem	Cause	Solution
Poor standard curve	* Inaccurate pipetting	* Check pipettes
Large CV	* Inaccurate pipetting* Air bubbles in wells	* Check pipettes* Remove bubbles in wells
High background	* Plate is insufficiently washed* Contaminated wash buffer	* Review the manual for proper wash. * Make fresh wash buffer
Very low readings across the plate	* Incorrect wavelengths * Insufficient development time	* Check filters/reader * Increase development time
Samples are reading too high, but standard curve looks fine	* Samples contain cytokine levels above assay range	* Dilute samples and run again
Drift	* Interrupted assay set-up * Reagents not at room temperature	* Assay set-up should be continuous - have all standards and samples prepared appropriately before commencement of the assay * Ensure that all reagents are at room temperature before pipetting into the wells unless otherwise instructed in the antibody inserts