

**FLEX**  
**Monoclonal Rabbit**  
**Anti-Human PMS2**  
 Clone EP51  
**Ready-to-Use**  
 (Dako Omnis)

**Code GA087**

<b>Intended use</b>	<p>For in vitro diagnostic use.</p> <p>FLEX Monoclonal Rabbit Anti-Human PMS2, Clone EP51, Ready-to-Use (Dako Omnis), is intended for use in immunohistochemistry (IHC) together with the Dako Omnis instrument. This antibody labels PMS2-expressing cells in formalin-fixed, paraffin-embedded (FFPE) tissue. Results aid in the classification of colorectal cancer (CRC). Differential classification is aided by the results from a panel of antibodies. The clinical interpretation of any staining or its absence should be complemented by morphological studies using proper controls and should be evaluated within the context of the patient's clinical history and other diagnostic tests by a qualified pathologist. This antibody is intended to be used after the primary diagnosis of tumor has been made by conventional histopathology using nonimmunologic histochemical stains.</p>
<b>Summary and explanation</b>	<p>Antibodies to PMS2 are useful for identifying PMS2 (postmeiotic segregation increased 2) protein in tumors of the gastrointestinal tract and associated extracolonic cancers by IHC. The absence of PMS2 expression as determined by IHC has been reported in colon carcinoma associated with hereditary nonpolyposis colorectal cancer (1).</p> <p>Refer to our <i>General Instructions for Immunohistochemical Staining</i> and the visualization system instructions of IHC procedures for: Principle of Procedure; Materials Required, Not Supplied; Storage; Specimen Preparation; Staining Procedure; Quality Control; Troubleshooting; Interpretation of Staining; General Limitations.</p>
<b>Reagent provided</b>	<p>Ready-to-use monoclonal antibody provided in liquid form in a buffer containing stabilizing protein and 0.015 mol/L sodium azide.</p> <p><u>Clone:</u> EP51. <u>Isotype:</u> Rabbit IgG.</p>
<b>Reagent required, but not provided</b>	<p>Refer to our <i>General Instructions for Immunohistochemical Staining</i> and the visualization system instructions of IHC procedures.</p> <p>EnVision FLEX, High pH (Dako Omnis) (Code GV800 or GV823)          EnVision FLEX+ Mouse LINKER (Dako Omnis) (Code GV821)          EnVision FLEX+ Rabbit LINKER (Dako Omnis) (Code GV809)          Wash Buffer (20x) (Dako Omnis) (Code GC807)          Dako Omnis Sulfuric Acid, 0.3 M (Code GC203)          Hematoxylin (Dako Omnis) (Code GC808) or equivalent          Clarify Clearing Agent (Code GC810)          Distilled or de-ionized water (Reagent-grade quality water)*          Drying oven, capable of maintaining 60 °C or less          Ethanol, absolute and 95%          Xylene, or xylene substitute          Bright field microscope (4–20x objective magnification)          Coverslips          Permanent mounting medium and ancillary reagents required for mounting coverslips          Microscope slides: FLEX IHC Microscope Slides (Code K8020) or SuperFrost Plus slides          Tissues to use as process controls (see Quality control section)</p> <p>*Note: Not all sources of distilled or de-ionized water may be of sufficient quality for IHC reagent preparation. Agilent recommends reagent-grade distilled or de-ionized water [corresponding to Clinical Laboratory Reagent Water (CLRW) standard as specified by CLSI (2)], or water similar in quality to be used for reagent preparation.</p>
<b>Immunogen</b>	<p>Synthetic peptide corresponding to residues in human PMS2 protein.</p>
<b>Specificity</b>	<p>In Western blotting of human Colo-205 cell lysate, the antibody labels a major band at 96 kDa corresponding to the expected molecular weight of PMS2.</p>

## Precautions

1. For in vitro diagnostic use.
2. For professional users.
3. For prescription use only (Rx Only).
4. This product contains sodium azide (NaN<sub>3</sub>), a chemical highly toxic in pure form. At product concentrations, though not classified as hazardous, sodium azide may react with lead and copper plumbing to form highly explosive build-ups of metal azides. Upon disposal, flush with large volumes of water to prevent metal azide build-up in plumbing (3).
5. As with any product derived from biological sources, proper handling procedures should be used in accordance with local requirements.
6. Wear appropriate Personal Protective Equipment to avoid contact with eyes and skin.
7. Unused solution should be disposed of as chemical/biological waste in accordance with all local, regional, national and international regulations.
8. Incubation times, temperatures, or methods other than those specified may give erroneous results.
9. Reagent has been optimally diluted. Further dilution may result in loss of visible immunoreactivity.
10. Contact Agilent Pathology Support via [www.agilent.com](http://www.agilent.com) to report any unusual staining. Any serious incident that has occurred in relation to the device shall be reported to the manufacturer and the competent authority of the country in which the user and/or the patient is established.
11. Safety Data Sheets are available on [www.agilent.com](http://www.agilent.com) or on request.

## Storage

Store at 2–8 °C when not in use on Dako Omnis. During storage the cap should be closed. Do not use after expiration date stamped on vial. Onboard stability is 375 hours. Onboard time is tracked by the Dako Omnis Software. If reagents are stored under any conditions other than those specified, the conditions must be verified by the user. There are no obvious signs to indicate instability of this product. Therefore, positive and negative controls should be run simultaneously with patient specimens, preferably on the same slide. If unexpected staining is observed which cannot be explained by variations in laboratory procedures and a problem with the antibody is suspected, contact Agilent Pathology Support.

## Staining protocol overview\*

Step	Reagent	Protocol
Deparaffinization	Clearify (Code GC810)	Default
Pre-treatment	EnVision FLEX, High pH (Code GV800 or GV8823 or GV804)	30 min heat-induced epitope retrieval
Primary antibody	Ready-to-Use (Code GA087)	20 min incubation
Negative control reagent	FLEX Negative Control, Rabbit (Code GA600)	20 min incubation
Visualization	EnVision FLEX (Code GV800) + EnVision FLEX+ Rabbit LINKER (Code GV809) + EnVision FLEX+ Mouse LINKER (Code GV821)	Block: 3 min; Rabbit Link: 10 min; Mouse Link: 10 min; Polymer: 20 min; Chromogen: 5 min
Counterstain	Hematoxylin (Code GC808)	3 min incubation
Mounting	Nonaqueous, permanent mounting required	Dehydration, clearing and mounting must be performed after unloading
Slides	FLEX IHC Microscope Slides (Code K8020) or Superfrost Plus slides	Recommended for greater adherence of tissue sections to glass slides
<b>Quality control</b>	<b>Tissue</b>	<b>Staining pattern</b>
Control tissue	Intestinal Tract	Nuclear

\*The user must always read the package inserts for the reagents used and consult the Dako Omnis User Guides for details.

## Specimen preparation

### Paraffin-embedded tissue:

FFPE tissues are suitable for use. Alternative fixatives have not been validated and may give erroneous results. Fixation time for 6–48 hours in 10% neutral buffered formalin (NBF) is recommended. Specimens should be blocked into a thickness of 3 or 4 mm, fixed in formalin and dehydrated and cleared in a series of alcohols and xylene, followed by infiltration with melted paraffin. The paraffin temperature should not exceed 60 °C. Fixation times outside of 6–48 hours should be validated by the user.

Paraffin sections: The antibody can be used for labeling FFPE tissue sections. Tissue specimens should be cut into sections of approximately 4 µm. After sectioning, tissues should be mounted on FLEX IHC Microscope Slides (Code K8020) or SuperFrost Plus microscope slides and then placed in a 58 ± 2 °C calibrated oven for 1 hour.

For greater adherence of tissue sections to glass slides, the use of FLEX IHC Microscope Slides (Code K8020) is recommended.

To preserve antigenicity, tissue sections mounted on slides should be stained within 6 months of sectioning when held in the dark at 2–8 °C (preferred), or at room temperature up to 25 °C.

## Staining procedure

Deparaffinization, target retrieval, immunohistochemical staining and counterstaining are performed onboard Dako Omnis. The staining steps and incubation times are preprogrammed into the Dako Omnis software. The “PMS2 IHC GA087” protocol is used with the primary antibody PMS2. If the protocol is not available in the Dako Omnis system, it can be downloaded from *Dako Omnis Protocol Update* at [www.agilent.com](http://www.agilent.com) or contact Agilent Pathology Support. Please refer to the Dako Omnis Basic User Guide for detailed instructions on loading slides and reagents.

Pre-treatment: Deparaffinization of FFPE tissue sections is performed using Clearify (Code GC810). Target retrieval with heat-induced epitope retrieval (HIER) using diluted EnVision FLEX Target Retrieval Solution, High pH (50x) (Dako Omnis) (Code GV804) is recommended.

**Visualization:** The recommended visualization system is EnVision FLEX, High pH (Dako Omnis) (Code GV800) in combination with EnVision FLEX+ Mouse (LINKER) (Dako Omnis) (Code GV821) and EnVision FLEX+ Rabbit (LINKER) (Dako Omnis) (Code GV809).

**Counterstaining:** The recommended counterstain is Hematoxylin (Dako Omnis) (Code GC808).

**Mounting:** After staining onboard Dako Omnis the sections must be dehydrated, cleared and mounted using a permanent mounting method. Do not allow sections to dry prior to mounting.

Dako Omnis ensures that the tissue sections do not dry out during the pre-treatment process or during the following immunohistochemical staining procedure.

**Quality control**

Monoclonal Rabbit Anti-Human PMS2, Clone EP51 has been quality-control tested by immunohistochemistry using the required reagents and staining procedures outlined above. Deviations in the recommended procedures for tissue fixation, processing and embedding in the user's laboratory may produce significant variability in results.

*System level controls*

Positive and negative control tissues (lab-supplied) should be run for each staining procedure. These quality controls are intended to ensure the validity of the staining procedure, including reagents, tissue processing and instrument performance. It is recommended that control tissues be stained on the same slide as the patient tissue. The positive control should be a tissue with positive biomarker expression fixed in the same way as the patient tissue. Patient CRC tissues contain positive nonmalignant elements that serve as an internal positive control. Positive nuclear staining of benign or normal epithelium, lymphocytes, and stromal cells should demonstrate moderate to strong staining intensity. The negative control should be a tissue with loss of biomarker expression fixed in the same way as patient tissue. Negative control tissues should exhibit no or equivocal nuclear staining in viable malignant cells compared to moderate or strong nuclear staining in adjacent internal positive controls. If controls are not fixed in the same way as the patient tissue, the control may only be used as a staining control for reagents and instrument performance.

*Negative control reagent*

Negative control reagent (NCR) may be used in place of the primary antibody with a section of each patient specimen to evaluate nonspecific staining and allow better interpretation of specific staining at the antigen site. The recommended negative control reagent is FLEX Negative Control, Rabbit (Dako Omnis) (Code GA600).

**Staining interpretation**

The cellular staining pattern is nuclear.

**Performance characteristics**

Normal tissues:

Tissue Type (# tested)	Labeled Tissue Elements	Tissue Type (# tested)	Labeled Tissue Elements	Tissue Type (# tested)	Labeled Tissue Elements
Adrenal (3)	2/3	Lung (3)	3/3	Salivary gland (3)	3/3
Bladder (3)	3/3	Mesothelial cells (3)	3/3	Skin (3)	3/3
Bone marrow (3)	2/3*	Muscle, cardiac (3)	3/3*	Small intestine (3)	3/3
Breast (3)	2/3	Muscle, skeletal (3)	3/3	Spleen (3)	3/3
Cerebellum (3)	3/3	Nerve, peripheral (3)	3/3	Stomach (3)	3/3
Cerebrum (3)	3/3	Ovary (3)	3/3	Testis (3)	3/3
Cervix (3)	3/3	Pancreas (3)	3/3	Thymus (3)	3/3
Colon (3)	3/3	Parathyroid (3)	3/3	Thyroid (3)	3/3
Esophagus (3)	3/3	Pituitary (3)	3/3	Tonsil (3)	3/3
Kidney (3)	3/3	Prostate (3)	3/3	Uterus (3)	3/3
Liver (3)	3/3*				

\*cytoplasmic staining pattern for at least one case

\*\*cytoplasmic and extracellular staining pattern for at least one case

Abnormal tissues:

Tissue Type (# tested)	Labeled Tissue Elements	Tissue Type (# tested)	Labeled Tissue Elements
Bladder carcinoma (2)	2/2	Ovarian dysgerminoma (1)	1/1
Breast carcinoma (4)	3/4	Ovarian granulosa cell tumor (1)	1/1
Cholangiocarcinoma (1)	1/1	Pleomorphic rhabdomyosarcoma (1)	1/1
Colon adenocarcinoma (1)	0/1	Prostate adenocarcinoma (1)	1/1
Endometrial sarcoma (1)	1/1	Prostate benign prostatic hyperplasia (1)	1/1
Ewing's sarcoma (1)	1/1	Renal cell carcinoma (1)	1/1
Gastric adenocarcinoma (2)	2/2	Squamous carcinoma of ear (1)	1/1
Kidney transitional cell carcinoma (1)	1/1	Testicular embryonal carcinoma (1)	1/1
Lung carcinoma (2)	2/2	Testicular yolk sac tumor (1)	1/1

Lymphoma of cecum (1)	1/1	Thymoma (1)	1/1
Melanoma (3)	3/3	Thyroid medullary carcinoma (1)	1/1
Merkel cell tumor (1)	1/1	Uterine adenomatoid tumor (1)	1/1
Ovarian carcinoma (2)	2/2		

Precision in CRC tissues:









Precision Study	Study Design	% Agreement (95% Confidence Interval)
Intra-rack (Repeatability)	24 CRC specimens (12 PMS2 Intact and 12 PMS2 Loss) were tested with 4 replicates within a rack on the Dako Omnis instrument.	NPA 100% (93.1–100%) PPA 100% (92.0–100%) OA 100% (96.2–100%)
Inter-Rack	24 CRC specimens (12 PMS2 Intact and 12 PMS2 Loss) were tested with a single replicate on 4 different racks within the same Dako Omnis instrument.	NPA 100% (93.1–100%) PPA 100% (92.0–100%) OA 100% (96.2–100%)
Inter-Instrument	24 CRC specimens (12 PMS2 Intact and 12 PMS2 Loss) were tested with 2 replicates on each of 3 Dako Omnis instruments.	NPA 100% (94.9–100%) PPA 98.6% (95.8–100%) OA 99.3% (97.9–100%)
Inter-Day	24 CRC specimens (12 PMS2 Intact and 12 PMS2 Loss) were tested with a single replicate on the Dako Omnis instrument over 5 non-consecutive days.	NPA 100% (94.0–100%) PPA 100% (94.0–100%) OA 100% (96.9–100%)
Inter-Lot	24 CRC specimens (12 PMS2 Intact and 12 PMS2 Loss) were tested with 2 replicates on the Dako Omnis instrument with 3 lots of reagent.	NPA 100% (95.6–100%) PPA 100% (94.0–100%) OA 100% (97.4–100%)

NPA=Negative Percent Agreement; PPA=Positive Percent Agreement; OA=Overall Percent Agreement

**References**

1. Lanza G, Gafá R, Maestri I, Santini A, Matteuzzi M, Cavazzini L. Immunohistochemical pattern of MLH1/MSH2 expression is related to clinical and pathological features in colorectal adenocarcinomas with microsatellite instability. Mod Pathol 2002; 15:741-49.
2. CLSI. Preparation and testing of reagent water in the clinical laboratory: Approved guideline – fourth edition. CLSI document GP40-A4-AMD. Wayne, PA: Clinical and Laboratory Standards Institute; 2012.
3. Department of Health, Education and Welfare, National Institutes for Occupational Safety and Health, Rockville, MD. "Procedures for the decontamination of plumbing systems containing copper and/or lead azides." DHHS (NIOSH) Publ. No. 78-127, Current 13. August 16, 1976.

**Explanation of symbols**

 REF	Catalogue number	 2°C–8°C	Temperature limitation		Use by
 IVD	In vitro diagnostic medical device	 LOT	Batch code		Manufacturer
	Consult instructions for use	 EC REP	Authorized representative in the European Community		



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