

Human IL-2 ELISA Set

Catalog No. CDK079A

Quantity: 5 x 96 tests

PRODUCT SPECIFICATIONS :

Specificity: Recognizes both natural and recombinant human IL-2

Range: 31.25 pg / ml - 1000 pg / ml

Sensitivity: < 10 pg / ml

Incubation: From sample to end, 1 hour, 45 min

Sample Types: Serum
Plasma
Cell culture supernatant

Sample Size: 100 µl

Cross Reaction: No cross reactivity with other human cytokines

Kit Contents: Capture antibody, Biotinylated detection antibody, Standard, Streptavidin-HRP, TMB

1. INTENDED USE

The Cell Sciences® Human IL-2 ELISA Set is intended for use in a 'do it yourself' solid phase sandwich ELISA for the *in-vitro* qualitative and quantitative determination of IL-2 in supernatants, buffered solutions, serum, plasma samples and other body fluids. This assay will recognize both natural and recombinant human IL-2. This kit has been configured for research use only.

2. PRINCIPLE OF THE METHOD

A capture antibody highly specific for IL-2 is coated to the wells a microtiter strip plate. Binding of IL-2 samples and known standards to the capture antibodies and subsequent binding of the biotinylated anti-IL-2 secondary antibody to the analyte is completed during the same incubation period. Any excess unbound analyte and secondary antibody is removed. The HRP conjugate solution is then added to every well, including the zero wells. Following incubation, excess conjugate is removed by careful washing. A chromogen substrate is added to the wells resulting in the progressive development of a blue colored complex with the conjugate. The color development is then stopped by the addition of acid turning the resultant final product yellow. The intensity of the produced colored complex is directly proportional to the concentration of IL-2 present in the samples and standards. The absorbance of the color complex is then measured and the generated OD values for each standard are plotted against expected concentration forming a standard curve. This standard curve can then be used to accurately determine the concentration of IL-2 in any sample tested.

3. REAGENTS PROVIDED AND RECONSTITUTION

Reagents (Store @ 2-8°C)	Quantity 5 x 96 well kit	Reconstitution
A: IL-2 Standard: 1000 pg/ml	5 vials	Reconstitute as directed on the vial (see Assay preparation, section 9).
B: Capture Antibody	1 vial (0.5 ml)	Sterile, dilute prior to use (see Plate preparation, section 8).
C: Biotinylated anti-IL-2 Detection Antibody	1 vial	Reconstitute with 0.55 ml of reconstitution buffer prior to use (see Assay preparation, section 9)



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D: Streptavidin-HRP	1 vial (25 µl)	Dilute prior to use (see Assay preparation, section 9).
E: TMB Substrate	2 vials (25 ml)	Ready to use.

4. MATERIAL REQUIRED BUT NOT PROVIDED

- 96 well Microtiter plates
- Reconstitution Buffer (1 x PBS, 0.09% Azide)
- Coating Buffer (1 x PBS, pH 7.2-7.4)
- Wash Buffer (1 x PBS, 0.05% Tween20)
- Blocking Buffer (1 x PBS, 5% BSA)
- Standard and Secondary Antibody Dilution Buffer (1 x PBS, 1% BSA)
- HRP Diluent Buffer (1 x PBS, 1% BSA, 0.1% Tween 20)
- Stop Reagent (1 M Sulphuric Acid)
- Microtiter plate reader with appropriate filters (450 nm required with optional 620 nm reference filter)
- Microplate washer or wash bottle
- 10, 50, 100, 200 and 1,000 µl adjustable single channel micropipettes with disposable tips
- 50-300 ml multi-channel micropipette with disposable tips
- Multichannel micropipette reagent reservoirs
- Distilled water
- Vortex mixer
- Miscellaneous laboratory plastic and/or glass, if possible sterile

5. STORAGE INSTRUCTIONS

Store the kit reagents between 2 and 8°C. Immediately after use, remaining reagents should be returned to cold storage (2-8°C). The expiration date of the kit and reagents is stated on box front labels. The expiry date of the kit components can only be guaranteed if the components are stored properly, and if, in case of repeated use of one component, the reagent is not contaminated by the first handling.

Reconstitution Buffer: Once prepared, store at 2-8°C for up to one week.

Coating Buffer: Once prepared, store at 2-8°C for up to one week.

Wash Buffer: Once prepared, use immediately.

Blocking Buffer: Once prepared, store at 2-8°C for up to one week.

Standard and Secondary Antibody Dilution Buffer: Once prepared store at 2-8°C for up to one week.

HRP Diluent Buffer: Once prepared store at 2-8°C for up to one week.

Reconstituted Biotinylated anti IL-2 Detection Antibody: Once prepared store at 2-8°C for up to one year.

Reconstituted IL-2 Standard: Discard after use.

6. SPECIMEN COLLECTION, PROCESSING & STORAGE

Cell culture supernatants, human serum, plasma or other biological samples are suitable for use in the assay. Remove serum from the clot or red cells respectively, as soon as possible after clotting and separation.

Cell culture supernatants: Remove particulates and aggregates by spinning at approximately 1000 x g for 10 min.

Serum: Use pyrogen/endotoxin free collecting tubes. Serum should be removed rapidly and carefully from the red cells after clotting. After clotting, centrifuge at approximately 1000 x g for 10 min and remove serum.

Plasma: EDTA, citrate and heparin plasma can be assayed. Spin samples at 1000 x g for 30 min. to remove particulates. Harvest plasma.

Storage: If not analyzed shortly after collection, samples should be aliquoted (250-500 µl) to avoid repeated freeze-thaw cycles and stored frozen at -80°C. Avoid multiple freeze-thaw cycles of frozen specimens.



Recommendation: Do not thaw by heating at 37°C or 56°C. Thaw at room temperature, and make sure that the sample is completely thawed and homogeneous before use. When possible, avoid use of badly hemolyzed or lipemic sera. If large amounts of particles are present, these should be removed prior to use by centrifugation or filtration.

7. SAFETY AND PRECAUTIONS FOR USE

- Handling of reagents, serum, or plasma specimens should be in accordance with local safety procedures, e.g. CDC/NIH Health manual: "Biosafety in Microbiological and Biomedical Laboratories" 1984.
- Laboratory gloves should be worn at all times.
- Avoid any skin contact with H₂SO₄ and TMB. In case of contact, wash thoroughly with water.
- Do not eat, drink, smoke or apply cosmetics where kit reagents are used.
- Do not pipette by mouth.
- When not in use, kit components should be stored refrigerated or frozen, as indicated on vial or bottle labels.
- All reagents should be warmed to room temperature before use. Lyophilized standards should be discarded after use.
- Cover or cap all reagents when not in use.
- Do not mix or interchange reagents between different lots.
- Do not use reagents beyond the expiration date of the kit.
- Use a clean, disposable, plastic pipette tip for each reagent, standard, or specimen addition in order to avoid cross contamination. For the dispensing of H₂SO₄ and substrate solution. Avoid pipettes with metal parts.
- Use a clean plastic container to prepare the washing solution.
- Thoroughly mix the reagents and samples before use by agitation or swirling.
- All residual washing liquid must be drained from the wells by efficient aspiration, or by decantation, followed by tapping the plate forcefully on absorbent paper. Never insert absorbent paper directly into the wells.
- The TMB solution is light sensitive. Avoid prolonged exposure to light. Also, avoid contact of the TMB solution with metal to prevent color development. **Warning: TMB is toxic. Avoid direct contact with hands. Dispose of properly.**
- If a dark blue color develops within a few minutes after preparation, this indicates that the TMB solution has been contaminated and must be discarded. Read absorbances within 1 hour after completion of the assay.
- When pipetting reagents, maintain a consistent order of addition from well to well. This will ensure equal incubation times for all wells.
- Follow incubation times described in the assay procedure.
- Dispense the TMB solution within 15 min of the washing of the microtiter plate.

8. PLATE PREPARATION:

8.1 Capture Antibody

For one plate add 100 µl of Capture Antibody into 10 mL of Coating Buffer.

8.2 Preparation Method

1.	Addition	Add 100 µl of diluted Capture Antibody to every well
2.	Incubation	Cover with a plastic plate cover and incubate at 4 °C overnight
3.	Wash	Remove the cover and wash the plate as follows: a) Aspirate the liquid from each well b) Dispense 0.4 ml of washing solution into each well c) Aspirate the contents of each well d) Repeat step b and c
4.	Addition	Add 250 µl of Blocking Buffer to every well



5.	Incubation	Cover with a plastic plate cover and incubate at room temperature (18 to 25 °C) for 2 hours.
6.	Wash	Remove the cover and wash the plate as follows: a) Aspirate the liquid from each well b) Dispense 0.4 ml of washing solution into each well c) Aspirate the contents of each well d) Repeat step b and c another 2 times

For Immediate use of the plate(s), continue to section 9.

If you wish to store the coated and blocked plates for future use bench dry each plate at room temperature (18 to 25 °C) for 24 hours. Cover the plates and then store at 2-8 °C in a sealed plastic bag with desiccant for up to 12 months.

9. ASSAY PREPARATION

Bring all reagents to room temperature before use.

9.1 Assay Design

Determine the number of microwell strips required to test the desired number of samples, plus appropriate number of wells needed for running zeros and standards. Each sample, standard and zero should be tested **in duplicate**.

Example plate layout (example shown for a 6 point standard curve)

	Standards (pg/ml)		Sample Wells									
	1	2	3	4	5	6	7	8	9	10	11	12
A	1000	1000										
B	500	500										
C	250	250										
D	125	125										
E	62.5	62.5										
F	31.25	31.25										
G	zero	zero										
H												

All remaining empty wells can be used to test samples in duplicate.

9.2 Preparation of Standard

Standard vials must be reconstituted with the volume of standard diluent shown on the vial immediately prior to use. This reconstitution gives a stock solution of 1000 pg/ml of IL-2. **Mix the reconstituted standard gently by inversion only.** Serial dilutions of the standard are made directly in the assay plate to provide the concentration range from 1000 to 31.25 pg/ml. A fresh standard curve should be produced for each new assay.

- Immediately after reconstitution add 200 µl of the reconstituted standard to wells A1 and A2, which provides the highest concentration standard at 1000 pg/ml.
- Add 100 µl of Standard Diluent to the remaining standard wells B1 and B2 to F1 and F2.



- Transfer 100 µl from wells A1 and A2 to B1 and B2. Mix the well contents by repeated aspirations and ejections taking care not to scratch the inner surface of the wells.
- Continue this 1:1 dilution using 100 µl from wells B1 and B2 through to wells F1 and F2, providing a serial diluted standard curve ranging from 1000 pg/ml to 31.25 pg/ml.
- Discard 100 µl from the final wells of the standard curve (F1 and F2).

Alternatively, these dilutions can be performed in separate clean tubes and immediately transferred directly into the relevant wells.

9.3 Preparation Biotinylated anti-IL-2 Detection Antibody

It is recommended this reagent is prepared immediately before use. Dilute the reconstituted biotinylated anti-IL-2 with the Biotinylated Antibody Diluent in an appropriate clean glass vial.

For one plate, add 100 µl of the reconstituted Detection Antibody into 5 mL of Biotinylated Antibody dilution buffer.

9.4 Preparation of Streptavidin-HRP

It is recommended to centrifuge vial for a few seconds in a microcentrifuge to collect all the volume at the bottom.

Dilute 5 µl of Streptavidin-HRP into 0.5 ml of HRP diluent buffer immediately before use. Add 150 µl of the diluted HRP solution into 10 mL of HRP diluent buffer.

Do-not keep these solutions for future experiments.

10. METHOD

We strongly recommend that every vial is mixed thoroughly without foaming prior to use, except the standard vial, which must be mixed gently by inversion only.

Note: Final preparation of Biotinylated Anti-IL-2 and Streptavidin-HRP should occur immediately before use.

Assay Step		Details
1.	Preparation	Prepare Standard curve as shown in section 9.2 above.
2.	Addition	Add 100 µl of each standard, sample and zero (Standard Dilution Buffer) in duplicate to appropriate number of wells.
3.	Addition	Add 50 µl of diluted Detection Antibody to all wells.
4.	Incubation	Cover with a plastic plate cover and incubate at room temperature (18 to 25°C) for 1 hour .
5.	Wash	Remove the cover and wash the plate as follows: a) Aspirate the liquid from each well. b) Dispense 0.4 ml of washing solution into each well. c) Aspirate the contents of each well. d) Repeat step b and c.
6.	Addition	Add 100 µl of Streptavidin-HRP solution into all wells.
7.	Incubation	Cover with a plastic plate cover and incubate at room temperature (18 to 25°C) for 30 min .
8.	Wash	Repeat wash step 5.
9.	Addition	Add 100 µl of ready-to-use TMB Substrate Solution into all wells.
10.	Incubation	Incubate in the dark for 5-15 minutes* at room temperature. Avoid direct exposure to light by wrapping the plate in aluminium foil.



11.	Addition	Add 100 µl of H₂SO₄: Stop Reagent into all wells.
Read the absorbance value of each well (immediately after step 11.) on a spectrophotometer using 450 nm as the primary wavelength and optimally 620 nm as the reference wave length (610 nm to 650 nm is acceptable).		

**Incubation time of the substrate solution is usually determined by the ELISA reader performance. Many ELISA readers only record absorbance up to 2.0 O.D. Therefore, the color development within individual microwells must be observed by the analyst, and the substrate reaction stopped before positive wells are no longer within recordable range.*

11. DATA ANALYSIS

Calculate the average absorbance values for each set of duplicate standards, controls and samples. Ideally duplicates should be within 20% of the mean.

Generate a linear standard curve by plotting the average absorbance of each standard on the vertical axis versus the corresponding IL-2 standard concentration on the horizontal axis.

The amount of IL-2 in each sample is determined by extrapolating OD values against IL-2 standard concentrations using the standard curve.

12. ASSAY LIMITATIONS

Do not extrapolate the standard curve beyond the maximum standard curve point. The dose-response is non-linear in this region, and good accuracy is difficult to obtain. Concentrated samples above the maximum standard concentration must be diluted with Standard diluent or with your own sample buffer to produce an OD value within the range of the standard curve. Following analysis of such samples, always multiply results by the appropriate dilution factor to produce actual final concentration.

The influence of various drugs on end results has not been investigated. Bacterial or fungal contamination and laboratory cross-contamination may also cause irregular results.

Improper or insufficient washing at any stage of the procedure will result in either false positive or false negative results. Completely empty wells before dispensing fresh Washing Buffer, fill with Washing Buffer as indicated for each wash cycle and do not allow wells to sit uncovered or dry for extended periods.

Disposable pipette tips, flasks or glassware are preferred, reusable glassware must be washed and thoroughly rinsed of all detergents before use.

As with most biological assays conditions may vary from assay to assay therefore **a fresh standard curve must be prepared and run for every assay.**

13. PERFORMANCE CHARACTERISTICS

13.1 Sensitivity

The sensitivity or minimum detectable dose of IL-2 using the Cell Sciences IL-2 ELISA kit (which contains the same antibodies) was found to be <7 pg/ml. This was determined by adding 3 standard deviations to the mean OD obtained when the zero standard was assayed 40 times.

13.2. Specificity

The assay recognizes natural human IL-2. To define the specificity of this IL-2 antibody pair, several proteins were tested for cross reactivity using the Cell Sciences IL-2 pre-coated ELISA kit (which contains the same antibodies). There was no cross reactivity observed for any protein tested (IL-1 alpha, IL-1 beta, IL-10 IL-12, IFN gamma, IL-4, IL-6, TNF alpha, IL-8 and IL-13).

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