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Product Data Sheet: HUMAN INTERLEUKIN-17F ELISA

Catalogue number: RAF043R

For research use only!



#### BioVendor – Laboratorní medicína a.s.

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# 1. INTENDED USE

The human IL-17F ELISA is an enzyme-linked immunosorbent assay for the quantitative detection of human IL-17F. The human IL-17F ELISA is for research use only.

Not for diagnostic or therapeutic procedures.

# 2. SUMMARY

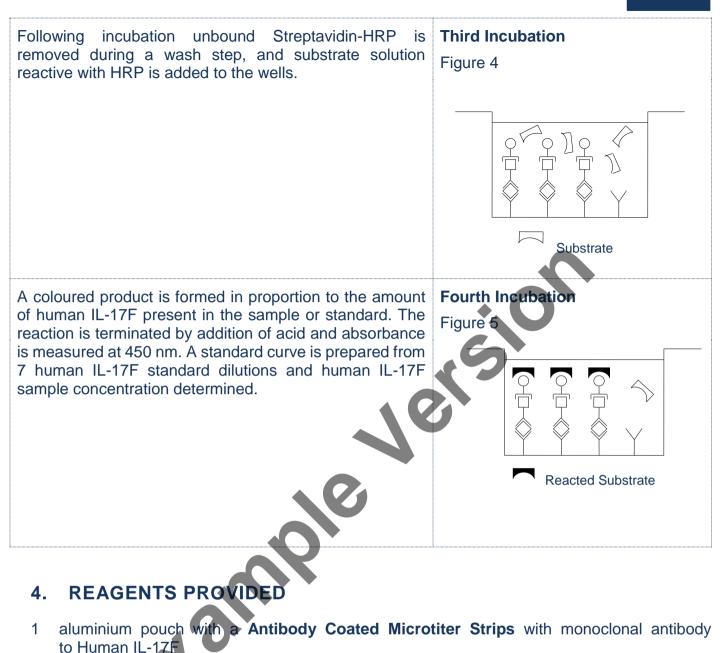
Interleukins 17F (IL-17F) and 17A (IL-17A) are closely related members of the IL-17 cytokine family, sharing about 50% amino acid identity. Studies in the mouse have identified Th17 cells as a distinct CD4+ T cell lineage that is defined by the production of IL-17F and IL-17A. IL-6 and transforming growth factor beta are required for the differentiation of naïve CD4+ T cells to Th17 cells, which are maintained in the presence of IL-23 and IL-1 beta. Conversely, IL-4 and interferon gamma can inhibit the development of Th17 cells. Th17 cells have been implicated in the pathology of mouse autoimmune disease models.

Expression of IL-17F and IL-17A has been detected in activated human peripheral blood lymphocytes. It has been shown that the cytokines are expressed in activated human CD4+ T cells. Expression of IL-17F and IL-17A has also been observed in tissue samples from various autoimmune diseases such as rheumatoid arthritis, multiple sclerosis, psoriasis, inflammatory bowel disease, and asthma.

The crystal structure of IL-17F has been solved and shows that the protein forms a disulfidelinked dimeric glycoprotein. IL-17A is also a disulfide-linked homodimeric glycoprotein. The IL-17F homodimer includes a classical cysteine knot motif, which is found in the TGF beta, bone morphogenetic protein, and nerve growth factor superfamilies. One difference in the cysteine knot motif of IL-17F compared with the other known cysteine knot protein families is that it only utilizes four cysteines instead of the classical six cysteines to form the knot. IL-17F and IL-17A have been shown to form biologically active IL-17F/IL-17A heterodimers, in addition to the IL-17F and IL-17A homodimers.

# 3. PRINCIPLES OF THE TEST

An anti-human IL-17F coating antibody is adsorbed onto microwells.	Coated Microwell Figure 1
Human IL-17F present in the sample or standard binds to antibodies adsorbed to the microwells and a biotin-conjugated anti-human IL-17F antibody is added and binds to human IL-17F captured by the first antibody	First Incubation Figure 2
Following incubation unbound biotin-conjugated anti- human IL-17F antibody is removed during a wash step Streptavidin-HRP is added and binds to the biotin- conjugated anti-human IL-17F antibody.	Second Incubation Figure 3



- 1 vial (70 µl) Biotin-Conjugate anti-Human IL-17F monoclonal antibody
- 1 vial (150 µl) Streptavidin-HRP
- 2 vials Human IL-17F Standard lyophilized, 1000 ng/ml upon reconstitution
- 1 vial (12 ml) **Sample Diluent**
- 1 vial (5 ml) Assay Buffer Concentrate 20x (PBS with 1% Tween 20 and 10% BSA)
- 1 vial (15 ml) Calibrator Diluent
- 1 bottle (50 ml) Wash Buffer Concentrate 20x (PBS with 1% Tween 20)
- 1 vial (15 ml) **Substrate Solution** (tetramethyl-benzidine)
- 1 vial (15 ml) **Stop Solution** (1M Phosphoric acid)
- 4 Adhesive Films

# 5. STORAGE INSTRUCTIONS – ELISA KIT

Store kit reagents between 2°C and 8°C. Immediately after use remaining reagents should be returned to cold storage (2°C to 8°C). Expiry of the kit and reagents is stated on labels.

Expiry of the kit components can only be guaranteed if the components are stored properly, and if, in case of repeated use of one component, this reagent is not contaminated by the first handling.

# 6. SPECIMEN COLLECTION AND STORAGE INSTRUCTIONS

Cell culture supernatant, serum and plasma (citrate, heparin) were tested with this assay. Other biological samples might be suitable for use in the assay. Remove serum or plasma from the clot or cells as soon as possible after clotting and separation.

Pay attention to a possible "Hook Effect" due to high sample concentrations (see chapter 11)

Samples containing a visible precipitate must be clarified prior to use in the assay. Do not use grossly hemolyzed or lipemic specimens.

Samples should be aliquoted and must be stored frozen at -20°C to avoid loss of bioactive human IL-17F. If samples are to be run within 24 hours, they may be stored at 2° to 8°C (for stability refer to 13.5).

Avoid repeated freeze-thaw cycles. Prior to assay, the frozen sample should be brought to room temperature slowly and mixed gently.

# 7. MATERIALS REQUIRED BUT NOT PROVIDED

- 5 ml and 10 ml graduated pipettes
- 5 µl to 1000 µl adjustable single channel micropipettes with disposable tips
- 50 µl to 300 µl adjustable multichannel micropipette with disposable tips
- Multichannel micropipette reservoir
- Beakers, flasks, cylinders necessary for preparation of reagents
- Device for delivery of wash solution (multichannel wash bottle or automatic wash system)
- Microwell strip reader capable of reading at 450 nm (620 nm as optional reference wave length)
- Glass-distilled or deionized water
- Statistical calculator with program to perform regression analysis

# 8. PRECAUTIONS FOR USE

All reagents should be considered as potentially hazardous. We therefore recommend that this product is handled only by those persons who have been trained in laboratory techniques and that it is used in accordance with the principles of good laboratory practice. Wear suitable protective clothing such as laboratory overalls, safety glasses and gloves. Care should be taken to avoid contact with skin or eyes. In the case of contact with skin or eyes wash immediately with water. See material safety data sheet(s) and/or safety statement(s) for specific advice.

Reagents are intended for research use only and are not for use in diagnostic or therapeutic procedures.

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

Do not use kit reagents beyond expiration date on label.

Do not expose kit reagents to strong light during storage or incubation. Do not pipette by mouth.

Do not eat or smoke in areas where kit reagents or samples are handled.

Avoid contact of skin or mucous membranes with kit reagents or specimens.

Rubber or disposable latex gloves should be worn while handling kit reagents or specimens.

Avoid contact of substrate solution with oxidizing agents and metal.

Avoid splashing or generation of aerosols.

In order to avoid microbial contamination or cross-contamination of reagents or samples which may invalidate the test use disposable pipette tips and/or pipettes.

Use clean, dedicated reagent trays for dispensing the conjugate and substrate reagent.

Exposure to acid inactivates the conjugate.

Glass-distilled water or deionized water must be used for reagent preparation.

Substrate solution must be at room temperature prior to use.

Decontaminate and dispose specimens and all potentially contaminated materials as they could contain infectious agents. The preferred method of decontamination is autoclaving for a minimum of 1 hour at 121.5°C.

Liquid wastes not containing acid and neutralized waste may be mixed with sodium hypochlorite in volumes such that the final mixture contains 1.0% sodium hypochlorite. Allow 30 minutes for effective decontamination. Liquid waste containing acid must be neutralized prior to the addition of sodium hypochlorite.

# 9. PREPARATION OF REAGENTS

**Buffer Concentrates** should be brought to room temperature and should be diluted before starting the test procedure.

If crystals have formed in the **Buffer Concentrates**, warm them gently until they have completely dissolved.

## 9.1 Wash Buffer (1x)

Pour entire contents (50 ml) of the **Wash Buffer Concentrate** (20x) into a clean 1000 ml graduated cylinder. Bring to final volume of 1000 ml with glass-distilled or deionized water. Mix gently to avoid foaming.

Transfer to a clean wash bottle and store at 2°C to 25°C. Please note that Wash Buffer (1x) is stable for 30 days.

Wash Buffer (1x) may also be prepared as needed according to the following table:

Number of Strips	Wash Buffer Concentrate (20x) (ml)	Distilled Water (ml)
1 - 6	25	475
1 - 12	50	950

# 9.2 Assay Buffer (1x

Pour the entire contents (5 ml) of the Assay Buffer Concentrate (20x) into a clean 100 ml graduated cylinder. Bring to final volume of 100 ml with distilled water. Mix gently to avoid foaming.

Store at 2°C to 8°C Please note that the Assay Buffer (1x) is stable for 30 days.

Assay Buffer (1x) may also be prepared as needed according to the following table:

Number of Strips	Assay Buffer Concentrate (20x) (ml)	Distilled Water (ml)
1 - 6	2.5	47.5
1 - 12	5.0	95.0

# 9.3 Biotin-Conjugate

#### Please note that the Biotin-Conjugate should be used within 30 minutes after dilution.

Make a 1:100 dilution of the concentrated **Biotin-Conjugate** solution with Assay Buffer (1x) in a clean plastic tube as needed according to the following table:

Number of Strips	Biotin-Conjugate (ml)	Assay Buffer (1x) (ml)
1 - 6	0.03	2.97
1 - 12	0.06	5.94

#### 9.4 Streptavidin-HRP

#### Please note that the Streptavidin-HRP should be used within 30 minutes after dilution.

Make a 1:100 dilution of the concentrated **Streptavidin-HRP** solution with Assay Buffer (1x) in a clean plastic tube as needed according to the following table:

Number of Strips	Streptavidin-HRP (ml)	Assay Buffer (1x) (ml)
1 - 6	0.06	5.94
1 - 12	0.12	11.88

# 9.5 Human IL-17F Standard

Reconstitute human IL-17F standard by addition of Calibrator Diluent.

Reconstitution volume is stated on the label of the standard vial. Swirl or mix gently to insure complete and homogeneous solubilization (concentration of reconstituted standard = 1000 pg/ml).

Allow the standard to reconstitute for 10-30 minutes. Mix well prior to making dilutions.

The standard has to be used immediately after reconstitution and cannot be stored.

#### 9.5.1 External Standard Dilution

Label 6 tubes, one for each standard point.

S2, S3, S4, S5, S6, S7

The reconstituted standard serves as S1.

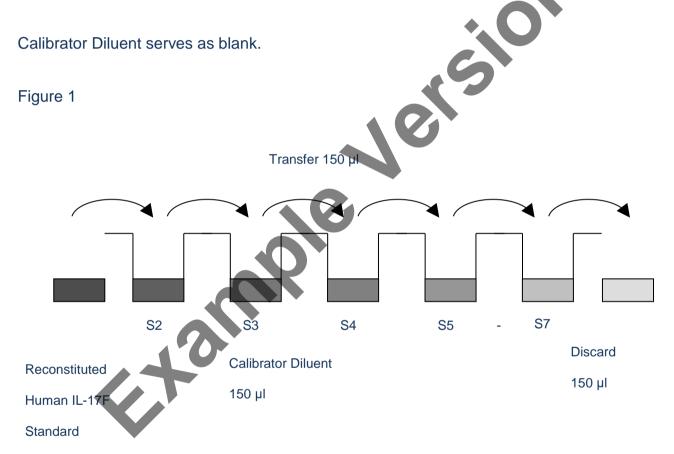
Then prepare 2-fold serial dilutions for the standard curve as follows:

Pipette 150 µl of Calibrator Diluent into each tube S2-S7.

Pipette 150  $\mu$ l of reconstituted standard (concentration = 1000 pg/ml) into the first tube, labelled S2, and mix (concentration of S2 = 500 pg/ml.

Pipette 150 µl of this dilution into the second tube, labelled S3, and mix thoroughly before the next transfer.

Repeat serial dilutions 4 more times thus creating the points of the standard curve (see Figure 6).



# **10. TEST PROTOCOL**

#### Note: Shaking is absolutely necessary for an optimal test performance.

- a. Determine the number of microwell strips required to test the desired number of samples plus appropriate number of wells needed for running blanks and standards. Each sample, standard, blank and optional control sample should be assayed in duplicate. Remove extra microwell strips from holder and store in foil bag with the desiccant provided at 2°C-8°C sealed tightly.
- b. Prepare **Biotin-Conjugate** and **Standards** (refer to 9.3 and 9.5).
- c. Wash the microwell strips twice with approximately 400 µl Wash Buffer per well with thorough aspiration of microwell contents between washes. Allow the Wash Buffer to sit in the wells for about 10 15 seconds before aspiration. Take care not to scratch the surface of the microwells.

After the last wash step, empty wells and tap microwell strips on absorbent pad or paper towel to remove excess Wash Buffer. Use the microwell strips immediately after washing. Alternatively microwell strips can be placed upside down on a wet absorbent paper for not longer than 15 minutes. **Do not allow wells to dry**.

#### Table 1

Example of the arrangement of blanks, standards and samples in the microwell strips:

	r			
	1	2	3	4
Α	Standard 1 (1000.0 pg/ml)	Standard 1 (1000.0 pg/ml)	Sample 1	Sample 1
В	Standard 2 (500.0 pg/ml)	Standard 2 (500.0 pg/ml)	Sample 2	Sample 2
С	Standard 3 (250.0 pg/ml)	Standard 3 (250.0 pg/ml)	Sample 3	Sample 3
D	Standard 4 (125.0 pg/ml)	Standard 4 (125.0 pg/ml)	Sample 4	Sample 4
Е	Standard 5 (62.5 pg/ml)	Standard 5 (62.5 pg/ml)	Sample 5	Sample 5
F	Standard 6 (31.3 pg/ml)	Standard 6 (31.3 pg/ml)	Sample 6	Sample 6
G	Standard 7 (15.6 pg/ml)	Standard 7 (15.6 pg/ml)	Sample 7	Sample 7
Η	Blank	Blank	Sample 8	Sample 8

- d. Add 50 µl of Sample Diluent to all wells.
- e. Add 50 µl of externally diluted standards to the standard wells according to Table 1.
- f. Add 50 µl of Calibrator Diluent in duplicate to the **blank wells**.
- g. Add 50 µl of each sample in duplicate to the **sample wells**.
- h. Add 50 µl of diluted Biotin-Conjugate to all wells, including the blank wells.
- i. Cover with an adhesive film and incubate at room temperature (18°C to 25°C) for 2 hours on a microplate shaker. (Shaking is absolutely necessary for an optimal test performance.)
- j. Prepare **Streptavidin-HRP** (see Preparation of Streptavidin-HRP 9.4)
- k. Remove adhesive film and empty wells. **Wash** microwell strips 4 times according to point b of the test protocol. Proceed immediately to the next step.
- I. Add 100 µl of diluted **Streptavidin-HRP** to all wells, including the blank wells.
- m. Cover with an adhesive film and incubate at room temperature (18°C to 25°C) for 1 hour on a microplate shaker. (Shaking is absolutely necessary for an optimal test performance.)
- n. Remove adhesive film and empty wells. **Wash** microwell strips 4 times according to point b of the test protocol. Proceed immediately to the next step.
- o. Pipette 100 µl of **TMB Substrate Solution** to all wells.
- p. Incubate the microwell strips at room temperature (18°C to 25°C) for 30 minutes. Avoid direct exposure to intense light.

# The colour development on the plate should be monitored and the substrate reaction stopped (see next point of this protocol) before positive wells are no longer properly recordable.

# Determination of the ideal time period for colour development has to be done individually for each assay.

It is recommended to add the stop solution when the highest standard has developed a dark blue colour. Alternatively the colour development can be monitored by the ELISA reader at 620 nm. The substrate reaction should be stopped as soon as Standard 1 has reached an OD of 0.9 - 0.95.

- q. Stop the enzyme reaction by quickly pipetting 100 μl of Stop Solution into each well. It is important that the Stop Solution is spread quickly and uniformly throughout the microwells to completely inactivate the enzyme. Results must be read immediately after the Stop Solution is added or within one hour if the microwell strips are stored at 2°C - 8°C in the dark.
- r. Read absorbance of each microwell on a spectro-photometer using 450 nm as the primary wave length (optionally 620 nm as the reference wave length; 610 nm to 650 nm is acceptable) Blank the plate reader according to the manufacturer's instructions by using the blank wells. Determine the absorbance of both the samples and the standards.

# **11. CALCULATION OF RESULTS**

- Calculate the average absorbance values for each set of duplicate standards and samples.
  Duplicates should be within 20 % of the mean value.
- Create a standard curve by plotting the mean absorbance for each standard concentration on the ordinate against the human IL-17F concentration on the abscissa. Draw a best fit curve through the points of the graph (a 5-parameter curve fit is recommended).
- To determine the concentration of circulating human IL-17F for each sample, first find the mean absorbance value on the ordinate and extend a horizontal line to the standard curve. At the point of intersection, extend a vertical line to the abscissa and read the corresponding human IL-17F concentration.
- If instructions in this protocol have been followed, samples have not been diluted and the concentration read from the standard curve must not be multiplied by a dilution factor.
- Calculation of samples with a concentration exceeding standard 1 will result in incorrect, low human IL-17F levels (Hook Effect). Such samples require further external predilution according to expected human IL-17F values with Sample Diluent in order to precisely quantitate the actual human IL-17F level.
- It is suggested that each testing facility establishes a control sample of known human IL-17F concentration and runs this additional control with each assay. If the values obtained are not within the expected range of the control, the assay results may be invalid.
- A representative standard curve is shown in Figure 7.

#### Note:

Do not use this standard curve to derive test results. Each laboratory must prepare a standard curve for each group of microwell strips assayed.

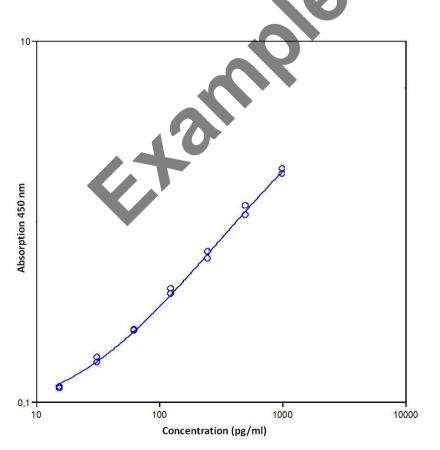


Figure 7 Representative standard curve for human IL-17F ELISA. Human IL-17F was diluted in serial 2 fold steps in Calibrator Diluent

# Table 2

Typical data using the Human IL-17F ELISA Measuring wavelength: 450 nm

Reference wavelength: 620 nm

Standard	human IL-17F Concentration (pg/ml)	O.D. at 450 nm	Mean O.D. at 450 nm	C.V. (%)	
1	1000.0	1.835	1.889	2.9	
	1000.0	1.943	1.005	2.5	
2	500.0	1.219	1.150	6.0	
L		1.081		0.0	
3	250.0	0.674	0.647	4.3	
Ū	200.0	0.619			
4	125.0	0.424	0.410	3.6	
•		Q.395		5.0	
5	62.5	0.250	0.249	0.5	
•		0.248			
6	31.3	0.176	0.171	2.7	
•		0.166			
7	15.6	0.119	0.120	0.8	
'		0.121	0.120	0.0	
Blank	0.0	0.062	0.062	0.2	
Didi in	0.0	0.062	0.002	0.2	

The OD values of the standard curve may vary according to the conditions of assay performance (e.g. operator, pipetting technique, washing technique or temperature effects). Furthermore shelf life of the kit may affect enzymatic activity and thus colour intensity. Values measured are still valid.

# **12. LIMITATIONS**

Since exact conditions may vary from assay to assay, a standard curve must be established for every run.

Bacterial or fungal contamination of either screen samples or reagents or cross-contamination between reagents may cause erroneous results.

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

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

The use of radioimmunotherapy has significantly increased the number of patients with Human anti-mouse IgG antibodies (HAMA). HAMA may interfere with assays utilizing murine monoclonal antibodies leading to both false positive and false negative results. Serum samples containing antibodies to murine immunoglobulins can still be analysed in such assays when murine immunoglobulins (serum, ascitic fluid, or monoclonal antibodies of irrelevant specificity) are added to the sample.

# **13. PERFORMANCE CHARACTERISTICS**

#### 13.1 Sensitivity

The limit of detection of human IL-17F defined as the analyte concentration resulting in an absorbance significantly higher than that of the dilution medium (mean plus 2 standard deviations) was determined to be 3.3 pg/ml (mean of 4 independent assays).

#### 13.2 Reproducibility

#### 13.2.1 Intra-assay

Reproducibility within the assay was evaluated in 3 independent experiments. Each assay was carried out with 6 replicates of 8 serum samples containing different concentrations of human IL-17F. 2 standard curves were run on each plate. Data below show the mean human IL-17F concentration and the coefficient of variation for each sample (see Table 3). The calculated overall intra-assay coefficient of variation was 7.3%.

# Table 3

The mean Human IL-17F concentration and the coefficient of variation for each sample

Sample	Experiment	Mean human IL-17F Concentration (pg/ml)	Coefficient of Variation (%)
	1	828.53	4.1
1	2	784.36	5.2
	3	830.86	7.2
	1	662.84	3.8
2	2	624.98	9.5
	3	657.12	9.4
	1	478.50	5.0
3	2	470.23	8.4
	3	523.17	8.6
	1	311.15	7.5
4	2	316.80	8.8
	3	346.88	6.6
	1	244.20	4.6
5	2	270.21	10.9
	3	280.08	8.9
	1	177.79	6.6
6	2	182.26	8.6
	3	192.60	7.2
	1	87.03	6.3
7	2	101.30	6.9
	3	94.92	9.3
	1	49.80	4.4
8	2	66.97	9.5
	3	62.84	8.6

#### 13.2.2 Inter-assay

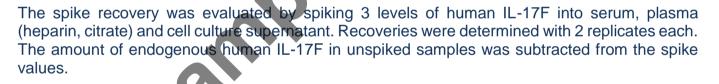
Assay to assay reproducibility within one laboratory was evaluated in 3 independent experiments. Each assay was carried out with 6 replicates of 8 serum samples containing different concentrations of human IL-17F. 2 standard curves were run on each plate. Data below show the mean human IL-17F concentration and the coefficient of variation calculated on 18 determinations of each sample (see Table 4). The calculated overall inter-assay coefficient of variation was 6.5%.

#### Table 4

The mean Human IL-17F concentration and the coefficient of variation of each sample

Sample	Mean human IL-17F Concentration (pg/ml)	Coefficient of Variation (%)
1	814.58	3.2
2	648.32	3.1
3	490.63	5.8
4	324.94	5.9
5	264.83	7.0
6	184.22	4.1
7	94.42	7.6
8	59.87	15.0

# 13.3 Spike Recovery



#### For recovery data see Table 5

#### Table 5

	Spike high Spike mediur	medium	lium Spike low			
Sample matrix	Mean (%)	Range (%)	Mean (%)	Range (%)	Mean (%)	Range (%)
Serum	108	94 - 116	98	87 - 105	113	103 - 122
Plasma (citrate)	113	94 - 132	113	105 - 121	102	81 - 115
Plasma (heparin)	116	106 - 129	118	111 - 131	114	103 - 124
Cell culture supernatant	113	100 - 124	105	103 - 108	100	92 - 108

# 13.4 Dilution Parallelism

Serum, plasma (citrate, heparin), cell culture supernatant samples with different levels of human IL-17F were analysed at serial 2 fold dilutions with 4 replicates each. For data see Table 6.

Somple metrix		Recovery	of Exp. Val.
Sample matrix	Dilution	Mean (%)	Range (%)
	1:2	102	94 - 109
Serum	1:4	109	101 - 114
	1:8	112	103 - 124
	1:2	102	93 - 107
Plasma (citrate)	1:4	115	109 - 122
	1:8	109	99 - 124
Plasma (heparin)	1:2	111	104 - 117
	1:4	113	107 - 120
	1:8	90	82 - 102
	1:2	101	93 - 108
Cell culture supernatant	1:4	99	82 - 108
Supernatant	1:8	106	92 - 122

#### Table 6

# **13.5 Sample Stability**

# 13.5.1 Freeze-Thaw Stability

Aliquots of serum, plasma, cell culture supernatant samples (spiked or unspiked) were stored at -20°C and thawed 3 times, and the human IL-17F levels determined.

There was no significant loss of human IL-17F immunoreactivity detected by freezing and thawing.

#### 13.5.2 Storage Stability

Aliquots of serum, plasma, cell culture supernatant samples (spiked or unspiked) were stored at -20°C, 2°C -8°C, room temperature (RT) and at 37°C, and the human IL-17F level determined after 24 h.

There was no significant loss of human IL-17F immunoreactivity detected at -20°C and 2°C -8°C.

A significant loss of human IL-17F immunoreactivity was detected during storage at room temperature (RT) and at 37°C after 24 h.

# 13.6 Specificity

The assay detects both natural and recombinant human IL-17F.

The cross reactivity and interference of circulating factors of the immune system was evaluated by spiking these proteins at physiologically relevant concentrations into a human IL-17F positive sample.

No crossreactivity to the IL-17A homodimer is observed and 0.24% crossreactivity to recombinant human IL-17AF heterodimer when spiked in excess (100 ng/ml).

#### 13.7 Expected Values

A panel of 40 serum and plasma (each of EDTA, Citrate and Heparin) samples from randomly selected apparently healthy donors was tested for human IL-17F. There were no detectable human IL-17F levels found. Elevated human IL-17F levels depend on the type of immunological disorder.

# **14. REAGENT PREPARATION SUMMARY**

# 14.1 Wash Buffer (1x)

Add Wash Buffer Concentrate 20x (50 ml) to 950 ml distilled water.

Numk	per of Strips	Wash Buffer Concentrate (ml)	Distilled Water (ml)
	1 - 6	25	475
	1 - 12	50	950

# 14.2 Assay Buffer (1x)

Add Assay Buffer Concentrate 20x (5 ml) to 95 ml distilled water.

Number of Strips	Assay Buffer Concentrate (ml)	Distilled Water (ml)
1 - 6	2.5	47.5
1 - 12	5.0	95.0

# 14.3 Biotin-Conjugate

Make a 1:100 dilution of **Biotin-Conjugate** in Assay Buffer (1x):

Number of Strips	Biotin-Conjugate (ml)	Assay Buffer (1x) (ml)
1 - 6	0.03	2.97
1 - 12	0.06	5.94

# 14.4 Streptavidin-HRP

Make a 1:100 dilution of the concentrated **Streptavidin-HRP** solution with Assay Buffer (1x) in a clean plastic tube as needed according to the following table:

Number of Strips	Streptavidin-HRP (ml)	Assay Buffer (1x) (ml)
1 - 6	0.06	5.94
1 - 12	0.12	11.88

# 14.5 Human IL-17F Standard

Reconstitute **human IL-17F standard** with Calibrator Diluent. (Reconstitution volume is stated in the Quality Control Sheet.)

# **15. TEST PROTOCOL SUMMARY**

- 1. Determine the number of microwell strips required.
- 2. Prepare Biotin-Conjugate.
- 3. Wash microwell strips twice with Wash Buffer.
- 4. Add 50 µl of Sample Diluent to all wells.
- 5. Add 50 µl of standard dilutions, in duplicate, to the standard wells.
- 6. Add 50 µl of Calibrator Diluent in duplicate to the blank wells.
- 7. Add 50 µl of each sample in duplicate to the sample wells.
- 8. Add 50 µl diluted Biotin-Conjugate to all wells.
- 9. Cover microwell strips and incubate 2 hours at room temperature (18°C-25°C) on a microplate shaker. (Shaking is absolutely necessary for an optimal test performance.)
- 10. Prepare Streptavidin-HRP.
- 11. Empty and wash microwell strips 4 times with Wash Buffer.
- 12. Add 100 µl diluted Streptavidin-HRP to all wells.
- 13. Cover microwell strips and incubate 1 hour at room temperature (18°C-25°C) on a microplate shaker. (Shaking is absolutely necessary for an optimal test performance.)
- 14. Empty and wash microwell strips 4 times with Wash Buffer.
- 15. Add 100 µl of TMB Substrate Solution to all wells.
- 16. Incubate the microwell strips for about 30 minutes at room temperature (18°C to 25°C)
- 17. Add 100 µl Stop Solution to all wells.
- 18. Blank microwell reader and measure colour intensity at 450 nm.

Note: If instructions in this protocol have been followed, samples have not been diluted and the concentration read from the standard curve must not be multiplied by a dilution factor. <image>ndor – Laboratr K 1767/1, f 3 124

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