



EAGLE  
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# Human Pentraxin 3 ELISA Kit

Catalog Number:

PTX39-K01 (1 x 96 wells)

PTX39-K02 (2 x 96 wells)

*For Research Use Only. Not for use in diagnostic procedures.*

*v. 1.0*

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## INTENDED USE

The Eagle Biosciences Human Pentraxin 3 ELISA Kit is to be used for the quantitative determination of human Pentraxin 3 in plasma samples and cell culture supernatant. The Eagle Biosciences Human Pentraxin 3 ELISA Kit is for research use only and not for diagnostic or therapeutic procedures.

## INTRODUCTION

Pentraxins are a superfamily of acute phase reactants characterized by a pentameric structure. The C-reactive protein (CRP) and serum amyloid P-component (SAP) are well-characterized short Pentraxins, which are produced in the liver in response to inflammatory mediators. Pentraxin 3 (PTX3), also known as Tumor necrosis factor-Stimulated Gene 14 (TSG-14), is the prototypic long Pentraxin, with a high degree of conservation from mouse to man. Human PTX3 encodes a 45 kDa secretory glycoprotein with a 162 amino acid N-terminal extension and a 202 amino acid C-terminal Pentraxin domain. The protein is locally produced and released by a variety of cell types including macrophages, neutrophils, myeloid-derived mesangial cells, synovial cells, smooth muscle cells, alveolar epithelium, and glial cells. PTX3 is induced in response to either inflammatory cytokines interleukin-1  $\beta$  (IL-1  $\beta$ ) and tumor necrosis factor  $\alpha$  (TNF $\alpha$ ) or the selected associated molecular patterns (PAMPs). PTX3 has a dual role in the regulation of the innate immune response. Via its C-terminal Pentraxin domain, immobilized PTX3 will bind complement component C1q to induce classical complement activation. However, fluid-phase PTX3 inhibits classical complement activation. Furthermore PTX3 participates in the clearance of apoptic cells. PTX3 is elevated in critically ill patients, with a gradient from systematic inflammatory response syndrome to septic shock, and in several other diseases, such as myocardial infarction, rheumatoid arthritis, atherosclerosis, small vessel vasculitis and psoriasis. Furthermore serum levels of PTX3 are higher in preeclamsia compared with normal pregnancies.

## PRINCIPLE OF THE ASSAY

The human pentraxin 3 ELISA is a ready-to-use solid-phase enzyme-linked immunosorbent assay based on the sandwich principle with a working time of 3½ hours. The efficient format of 2 plates with twelve disposable 8-well strips allows free choice of batch size for the assay. Samples and standards are captured by a solid bound specific antibody. Biotinylated tracer antibody will bind to captured human pentraxin 3. Streptavidin-peroxidase conjugate will bind to the biotinylated tracer antibody. Streptavidin-peroxidase conjugate will react with the substrate, tetramethylbenzidine (TMB). The enzyme reaction is stopped by the addition of oxalic acid. The absorbance at 450 nm is measured with a spectrophotometer. A standard curve is obtained by plotting the absorbance (linear) versus the corresponding concentrations of the human pentraxin 3 standards (log). The human pentraxin 3 concentration of samples, which are run concurrently with the standards, can be determined from the standard curve.

## KIT FEATURES

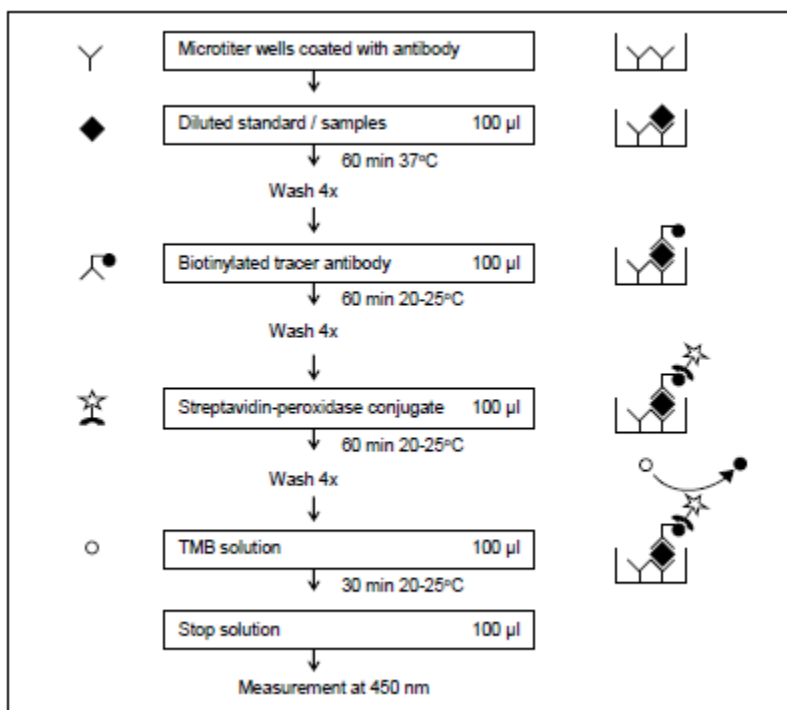
- Working time of 3 ½ hours.
- Minimum concentration which can be measured is 0.4 ng/ml.
- Measurable concentration range of 0.4 – 10 ng/ml.
- Working volume of 100  $\mu$ l/well.



## CROSS REACTIVITY

Cross-reactivity for other species or proteins/peptides has not been tested.

## PROTOCOL OVERVIEW



- The human Pentraxin 3 ELISA is a ready-to-use solid-phase enzyme-linked immunosorbent assay based on the sandwich principle with a working time of 3½ hours.
- The efficient format of a plate with twelve disposable 8-well strips allows free choice of batch size for the assay.
- Samples and standards are incubated in microtiter wells coated with antibodies recognizing human Pentraxin 3.
- Biotinylated tracer antibody will bind to captured human Pentraxin 3.
- Streptavidin-peroxidase conjugate will bind to the biotinylated tracer antibody.
- Streptavidin-peroxidase conjugate will react with the substrate, tetramethylbenzidine (TMB).
- The enzyme reaction is stopped by the addition of oxalic acid.
- The absorbance at 450 nm is measured with a spectrophotometer. A standard curve is obtained by plotting the absorbance (linear) versus the corresponding concentrations of the human Pentraxin 3 standards (log).
- The human Pentraxin 3 concentration of samples, which are run concurrently with the standards, can be determined from the standard curve.

## KIT COMPONENTS AND STORAGE INSTRUCTIONS

Kit Component	Quantity PTX39-K01	Quantity PTX39-K02	Color Code
Wash buffer 20x	1 vial (60 ml)	1 vial (60 ml)	Colorless
Dilution Buffer 10x	1 vial (15 ml)	1 vial (15 ml)	Green



Standard	2 vials, lyophilized	4 vials, lyophilized	White
Tracer, biotinylated	1 vial, 1 ml lyophilized	2 vials, 1 ml lyophilized	White
Streptavidin-peroxidase 100x	1 tube, 0.25 ml in solution	1 tube, 0.25 ml in solution	Brown
TMB substrate	1 vial (11 ml)	1 vial (22 ml)	Brown
Stop solution	1 vial (20 ml)	1 vial (20 ml)	Red
12 Microtiter strips, pre-coated	1 plate	2 plates	
Certificate of Analysis	1	1	
Manual	1	1	
Data collection sheet	2	2	

- Upon receipt, store individual components at 2 - 8°C. Do not freeze.
- Do not use components beyond the expiration date printed on the kit label.
- The standard and conjugate in lyophilized form and the streptavidin-peroxidase in concentrated solution are stable until the expiration date indicated on the kit label, if stored at 2 - 8°C.
- The exact amount of standard is indicated on the label of the vial and the Certificate of Analysis.
- Once reconstituted the standard is stable for 1 hour. The standard is single use. After reconstitution the standard cannot be stored.
- Once reconstituted the tracer is stable for 1 month if stored at 2 - 8°C.
- The streptavidin-peroxidase can only be stored in concentrated solution and is not stable when stored diluted.
- Upon receipt, foil pouch around the plates should be vacuum-sealed and unpunctured. Any irregularities to aforementioned conditions may influence plate performance in the assay.
- Return unused strips immediately to the foil pouch containing the desiccant pack and reseal along the entire edge of the zip-seal. Quality guaranteed for 1 month if stored at 2 - 8°C.

#### **MATERIALS REQUIRED BUT NOT PROVIDED**

- Calibrated micropipettes and disposable tips.
- Distilled or de-ionized water.
- Plate washer: automatic or manual.
- Polypropylene tubes.
- Calibrated ELISA plate reader capable of measuring absorbance at 450 nm.
- Adhesive covers.
- Centrifuge for 1 ml tubes.

#### **WARNINGS AND PRECAUTIONS**

- For research use only, not for diagnostic or therapeutic use.
- This kit should only be used by qualified laboratory staff.
- Do not under any circumstances add sodium azide as preservative to any of the components.
- Do not use kit components beyond the expiration date.
- Do not mix reagents from different kits and lots. The reagents have been standardized as a unit for a given lot. Use only the reagents supplied by manufacturer.
- The assay has been optimized for the indicated standard range. Do not change the standard range.



- Open vials carefully: vials are under vacuum.
- It is advised to spin down streptavidin-peroxidase tubes before use.
- Do not ingest any of the kit components.
- Kit reagents contain 2-chloroacetamide as a preservative. 2-Chloroacetamide is harmful in contact with skin and toxic if swallowed. In case of accident or if you feel unwell, seek medical advice immediately.
- The TMB substrate is light sensitive, keep away from bright light. The solution should be colorless until use.
- The stop solution contains 2% oxalic acid and can cause irritation or burns to respiratory system, skin and eyes. Direct contact with skin and eyes should be strictly avoided. If contact occurs, rinse immediately with plenty of water and seek medical advice.
- Incubation times, incubation temperature and pipetting volumes other than those specified may give erroneous results.
- Do not reuse micro wells or pour reagents back into their bottles once dispensed.
- Handle all biological samples as potentially hazardous and capable of transmitting diseases.
- Hemolyzed, hyperlipemic, heat-treated or contaminated samples may give erroneous results.
- Use polypropylene tubes for preparation of standard and samples. Do not use polystyrene tubes or sample plates.
- The standard is of human origin. It was tested for various viruses and found negative. Since no test method can offer complete assurance that infectious agents are absent, this reagent should be handled as any potentially infectious human serum or blood specimen. Handle all materials in contact with this reagent according to guide-lines for prevention of transmission of blood-borne infections.

## **SAMPLE PREPARATION**

### **Collection and handling**

#### **Plasma**

Please be aware that human Pentraxin 3 is released from neutrophils into serum in the process of blood coagulation. This will lead to false positive results. It is therefore advised to use 'careful plasma', which can be obtained as follows.

Keep freshly collected blood on ice. Within 20 minutes after blood sampling, separate plasma by centrifugation (1500xg at 4°C for 15 min). Remove plasma and transfer to fresh polypropylene tube. Be careful to not disturb white cells in the buffy coat. Recentrifuge the transferred plasma in order to avoid every contamination with white blood cells (1500xg at 4°C for 15 min). Most reliable results are obtained if EDTA plasma is used.

#### **Storage**

Store samples below -20°C, preferably at -70°C in polypropylene tubes. Storage at -20°C can affect recovery of human Pentraxin 3. Use samples within 24 hours after thawing. Avoid multiple freeze-thaw cycles which may cause loss of human Pentraxin 3 activity and give erroneous results.

Do not use hemolyzed, hyperlipemic, heat-treated or contaminated samples.

Before performing the assay, samples should be brought to room temperature (18 – 25°C) and mixed gently. Prepare all samples (controls and test samples) prior to starting the assay procedure. Avoid foaming.



## Dilution procedures

### Plasma samples

Human Pentraxin 3 can be measured accurately if plasma samples are diluted at least 4x with supplied dilution buffer in polypropylene tubes.

Note that most reliable results are obtained with EDTA plasma.

### Comment regarding recommended sample dilution

The mentioned dilution for samples is a minimum dilution and should be used as a guideline.

The recovery of human Pentraxin 3 from an undiluted sample is not 100% and may vary from sample to sample. When testing less diluted samples it is advisable to run recovery experiments to determine the influence of the matrix on the detection of human Pentraxin 3.

Do not use polystyrene tubes or sample plates for preparation or dilution of the samples.

### Guideline for dilution of samples

Please see the table below for recommended sample dilutions. Volumes are based on a total volume of at least 230  $\mu$ l of diluted sample, which is sufficient for one sample in duplicate in the ELISA. For dilution of samples we recommend to use at least 10  $\mu$ l of sample.

Dilution	Pre-dilution	Amount of sample or pre-dilution required	Amount of Dilution buffer required
10x	Not necessary	25 $\mu$ l (sample)	225 $\mu$ l
20x	Not necessary	15 $\mu$ l (sample)	285 $\mu$ l
50x	Not necessary	10 $\mu$ l (sample)	490 $\mu$ l
100x	Not necessary	10 $\mu$ l (sample)	990 $\mu$ l
500x	Recommended: 10x (see nr.1)	10 $\mu$ l (pre-dilution)	490 $\mu$ l
1000x	Recommended: 10x (see nr.1)	10 $\mu$ l (pre-dilution)	990 $\mu$ l
2000x	Recommended: 20x (see nr. 2)	10 $\mu$ l (pre-dilution)	990 $\mu$ l
5000x	Recommended: 50x (see nr.3)	10 $\mu$ l (pre-dilution)	990 $\mu$ l

## REAGENT PREPARATION

Allow all the reagents to equilibrate to room temperature (20 – 25°C) prior to use. Return to proper storage conditions immediately after use.

### Wash buffer

Prepare wash buffer by mixing 60 ml of 20x concentrated wash buffer with 1140 ml of distilled or de-ionized water, which is sufficient for 2 x 96 tests. In case less volume is required, prepare the desired volume of wash buffer by diluting 1 part of the 20x wash buffer with 19 parts of distilled or de-ionized water. Concentrated wash buffer may contain crystals. In case the crystals do not disappear at room temperature within 1 hour, concentrated wash buffer can be warmed up to 37°C.

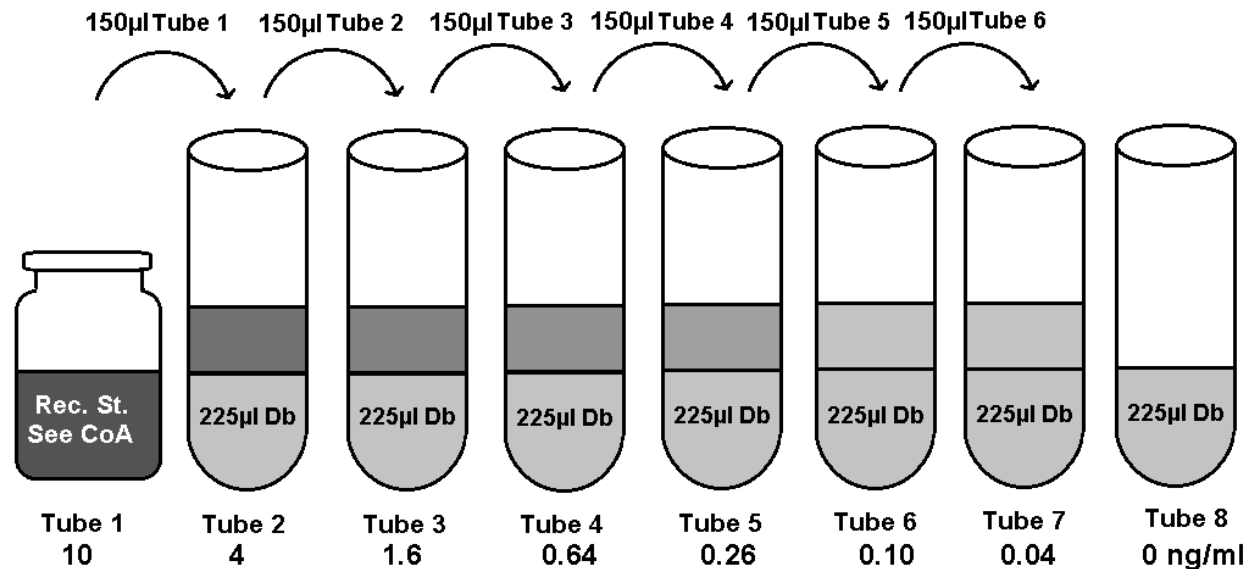
### Dilution buffer

Prepare dilution buffer by mixing 15 ml of the 10x dilution buffer with 135 ml of distilled or de-ionized water, which is sufficient for 2 x 96 tests. In case less volume is required, prepare the desired volume of dilution buffer by diluting 1 part of the 10x dilution buffer with 9 parts of distilled or de-ionized water. Concentrated dilution buffer may contain crystals. In case the crystals do not disappear at room temperature within 1 hour, concentrated dilution buffer can be warmed up to 37°C. Do not shake the solution.



### Standard solution

The standard is reconstituted by pipetting 0.25 ml of distilled or de-ionized water. After reconstitution add the amount of dilution buffer mentioned on the CoA to the vial. Use the standard vial as Tube 1 in Figure 1. Prepare each Human Pentraxin 3 standard in polypropylene tubes by serial dilution of the reconstituted standard with dilution buffer as shown in Figure 1\*. After reconstitution the standard must be used within 1 hour and cannot be stored for repeated use.



### Tracer solution

The tracer is reconstituted by pipetting 1 ml distilled or de-ionized water. Dilute the reconstituted 1 ml tracer with 11 ml dilution buffer, which is sufficient for 1 x 96 tests. Where less volume is required, prepare the desired volume of tracer by diluting 1 part of the reconstituted tracer with 11 parts of dilution buffer.

### Streptavidin-peroxidase solution

It is advised to spin down streptavidin-peroxidase tubes before use. Prepare the streptavidin-peroxidase solution by mixing 0.25 ml of the 100x streptavidin-peroxidase solution with 24.75 ml dilution buffer, which is sufficient for 2 x 96 tests. In case less volume is required, prepare the desired volume of streptavidin-peroxidase solution by diluting 1 part of the 100x streptavidin-peroxidase solution with 99 parts of dilution buffer.

### ELISA PROTOCOL

Bring all reagents to room temperature (20 - 25°C) before use.

1. Determine the number of test wells required, put the necessary microwell strips into the supplied frame, and fill out the data collection sheet. Return the unused strips to the storage bag with desiccant, seal and store at 2 - 8°C.
2. Transfer 100 µl in duplicate of standard, samples, or controls into appropriate wells. Do not touch the side or bottom of the wells.
3. Cover the tray and tap the tray to eliminate any air bubbles. Be careful not to splash liquid onto the cover.
4. Incubate the strips or plate for 1 hour at 37°C.
5. Wash the plates 4 times with wash buffer using a plate washer or as follows\*:



- a. Carefully remove the cover, avoid splashing.
  - b. Empty the plate by inverting plate and shaking contents out over the sink, keep inverted and tap dry on a thick layer of tissues.
  - c. Add 200  $\mu$ l of wash buffer to each well, wait 20 seconds, empty the plate as described in 5b.
  - d. Repeat the washing procedure 5b/5c three times.
  - e. Empty the plate and gently tap on thick layer of tissues.
6. Add 100  $\mu$ l of diluted biotinylated tracer to each well using the same pipetting order as applied in step 2. Do not touch the side or bottom of the wells.
  7. Cover the tray and incubate the tray for 1 hour at room temperature.
  8. Repeat the wash procedure described in step 5.
  9. Add 100  $\mu$ l of diluted streptavidin-peroxidase to each well, using the same pipetting order as applied in step 2. Do not touch the side or bottom of the wells.
  10. Cover the tray and incubate the tray for 1 hour at room temperature.
  11. Repeat the wash procedure described in step 5.
  12. Add 100  $\mu$ l of TMB substrate to each well, using the same pipetting order as applied in step 2. Do not touch the side or bottom of the wells.
  13. Cover the tray and incubate the tray for 30 minutes at room temperature. Avoid exposing the microwell strips to direct sunlight. Covering the plate with aluminium foil is recommended.
  14. Stop the reaction by adding 100  $\mu$ l of stop solution with the same sequence and timing as used in step 12. Mix solutions in the wells thoroughly by gently swirling the plate. Gently tap the tray to eliminate any air bubbles trapped in the wells.
  15. Read the plate within 30 minutes after addition of stop solution at 450 nm using a plate reader, following the instructions provided by the instrument's manufacturer.

\*) In case plate washer is used, please note: use of a plate washer can result in higher background and decrease in sensitivity. We advise validation of the plate washer with the manual procedure.

Make sure the plate washer is used as specified for the manual method.

### **INTERPRETATION OF RESULTS**

- Calculate the mean absorbance for each set of duplicate standards, control and samples.
- If individual absorbance values differ by more than 15% from the corresponding mean value, the result is considered suspect and the sample should be retested.
- The mean absorbance of the zero standard should be less than 0.3.
- Create a standard curve using computer software capable of generating a good curve fit. The mean absorbance for each standard concentration is plotted on the vertical (Y) axis versus the corresponding concentration on the horizontal (X) axis (logarithmic scale).
- If samples have been diluted, the concentration read from the standard curve must be multiplied by the dilution factor.
- Samples that give a mean absorbance above the absorbance for the highest standard concentration are out of range of the assay. These samples should be retested at a higher dilution.

### **TECHNICAL HINTS**

- User should be trained and familiar with ELISA assays and test procedure.





- If you are not familiar with the ELISA technique it is recommended to perform a pilot assay prior to evaluation of your samples. Perform the assay with a standard curve only following the instructions.
- 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 wash buffer, fill with wash buffer as indicated for each cycle and do not allow wells to sit uncovered or dry for extended periods.
- Since exact conditions may vary from assay to assay, a standard curve must be established for every run. Samples should be referred to the standard curve prepared on the same plate.
- Do not mix reagents from different batches, or other reagents and strips. Remainders should not be mixed with contents of freshly opened vials.
- Each time the kit is used, fresh dilutions of standard, sample, tracer, streptavidin-peroxidase and buffers should be made.
- Caps and vials are not interchangeable. Caps should be replaced on the corresponding vials.
- To avoid cross-contaminations, change pipette tips between reagent additions of each standard, between sample additions, and between reagent additions. Also, use separate reservoirs for each reagent.
- The waste disposal should be performed according to your laboratory regulations.

## REFERENCES

1. Peri, G. et al; PTX3, a prototypical long Pentraxin, is an early indicator of acute myocardial infarction in humans. *Circulation* 2000, 102: 636
2. Fazzini, F. et al; PTX3 in small-vessel vasculitides. An independent indicator of disease activity produced at sites of inflammation. *Arthritis Rheum* 2001, 44: 2841
3. Rovere-Querini, P. et al; Plasma and tissue expression of the long Pentraxin 3 during normal pregnancy and preeclampsia. *Obstet Gynecol* 2006, 108:149
4. Kanbay, M et al; Uric Acid and Pentraxin-3 Levels Are Independently Associated with Coronary Artery Disease Risk in Patients with Stage 2 and 3 Kidney Disease. *Am J Nephrol* 2011, 33: 325

## Warranty Information

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