

# AssayMax™ Human Prealbumin ELISA Kit

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For any questions regarding troubleshooting or performing the assay, please contact our support team at support@assaypro.com.

Thank you for choosing Assaypro.

## **Assay Summary**

**Step 1**. Add 50 μl of Standard or Sample per well. Incubate 2 hours.

**Step 2.** Wash, then add 50  $\mu$ l of Biotinylated Antibody per well. Incubate 1 hour.

**Step 3**. Wash, then add 50  $\mu$ l of SP Conjugate per well. Incubate 30 minutes.

**Step 4.** Wash, then add 50  $\mu$ l of Chromogen Substrate per well. Incubate 20 minutes.

**Step 5.** Add 50  $\mu$ l of Stop Solution per well. Read at 450 nm immediately.

# **Symbol Key**

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Consult instructions for use.

# **Assay Template**

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# AssayMax™ Human Prealbumin (Transthyretin, TTR) ELISA Kit

Catalog No. EP3010-7

Sample insert for reference use only
Positive Control Included

#### Introduction

Prealbumin (transthyretin, TTR, ATTR, TBPA) is a hepatic secretory protein thought to be important in the evaluation of nutritional deficiency and nutrition support (1). Prealbumin plays an important physiological role as a transporter of thyroxine and retinol-binding protein (2). Decreased prealbumin levels have been suggested to associate with malnutrition (3) and chronic kidney disease (4).

#### Principle of the Assay

The AssayMax™ Human Prealbumin ELISA (Enzyme-Linked Immunosorbent Assay) Kit is designed for detection of prealbumin in human plasma, serum, milk, urine, saliva, and CSF samples. This assay employs a quantitative sandwich enzyme immunoassay technique that measures human prealbumin in approximately 4 hours. A polyclonal antibody specific for human prealbumin has been pre-coated onto a 96-well microplate with removable strips. Prealbumin in standards and samples is sandwiched by the immobilized antibody and a biotinylated polyclonal antibody specific for human prealbumin, which is recognized by a streptavidin-peroxidase (SP) conjugate. All unbound material is washed away and a peroxidase enzyme substrate is added. The color development is stopped and the intensity of the color is measured.

#### **Caution and Warning**

- This product is for Research Use Only and is not intended for use in diagnostic procedures.
- Prepare all reagents (diluent buffer, wash buffer, standard, biotinylated antibody, and SP conjugate), as instructed, prior to running the assay.
- Prepare all samples prior to running the assay. The dilution factors for the samples are suggested in this insert. However, the user should determine the optimal dilution factor.
- Spin down the SP conjugate vial and the biotinylated antibody vial before opening and using contents.

- The Stop Solution is an acidic solution.
- The kit should not be used beyond the expiration date.

#### Reagents

- Human Prealbumin Microplate: A 96-well polystyrene microplate (12 strips of 8 wells) coated with a polyclonal antibody against human prealbumin.
- Sealing Tapes: Each kit contains 3 precut, pressure sensitive sealing tapes that can be cut to fit the format of the individual assay.
- Human Prealbumin Standard: Human prealbumin in a buffered protein base (43.75 ng, lyophilized).
- **Biotinylated Human Prealbumin Antibody (50x):** A 50-fold concentrated biotinylated polyclonal antibody against human prealbumin (120 μl).
- MIX Diluent Concentrate (10x): A 10-fold concentrated buffered protein base (30 ml).
- Wash Buffer Concentrate (20x): A 20-fold concentrated buffered surfactant (30 ml, 2 bottles).
- SP Conjugate (100x): A 100-fold concentrate (80 μl).
- Chromogen Substrate (1x): A stabilized peroxidase chromogen substrate tetramethylbenzidine (7 ml).
- Stop Solution (1x): A 0.5 N hydrochloric acid solution to stop the chromogen substrate reaction (11 ml).
- **Positive Control:** 1 vial, lyophilized. See insert CEP30101.

#### **Storage Condition**

- Upon arrival, immediately store components of the kit at recommended temperatures up to the expiration date.
- Store Standard, SP Conjugate, and Biotinylated Antibody at -20°C.
- Store Microplate, Diluent Concentrate (10x), Wash Buffer, Stop Solution, and Chromogen Substrate at 2-8°C.
- Unused microplate wells may be returned to the foil pouch with the desiccant packs and resealed. May be stored for up to 30 days in a vacuum desiccator.

## Other Supplies Required

- Microplate reader capable of measuring absorbance at 450 nm
- Pipettes (1-20 μl, 20-200 μl, 200-1000 μl, and multiple channel)
- Deionized or distilled reagent grade water

#### Sample Collection, Preparation, and Storage

- Plasma: Collect plasma using one-tenth volume of 0.1 M sodium citrate as an anticoagulant. Centrifuge samples at 3000 x g for 10 minutes and collect plasma. An 80000-fold sample dilution is suggested into MIX Diluent; however, user should determine optimal dilution factor depending on application needs. The undiluted samples can be stored at -20°C or below for up to 3 months. Avoid repeated freeze-thaw cycles (EDTA or Heparin can also be used as an anticoagulant).
- **Serum:** Samples should be collected into a serum separator tube. After clot formation, centrifuge samples at 3000 x g for 10 minutes and remove serum. An 80000-fold sample dilution is suggested into MIX Diluent; however, user should determine optimal dilution factor depending on application needs. The undiluted samples can be stored at -20°C or below for up to 3 months. Avoid repeated freeze-thaw cycles.
- Milk: Collect milk using sample tube. Centrifuge samples at 800 x g for 10 minutes. A 1000-fold sample dilution is suggested into MIX Diluent or within the range of 100x – 10000x; however, user should determine optimal dilution factor depending on application needs. The undiluted samples can be stored at -20°C or below for up to 3 months. Avoid repeated freeze-thaw cycles.
- Urine: Collect urine using sample pot. Centrifuge samples at 800 x g for 10 minutes. The sample is suggested for use at 1x or within the range of 2x 10x into MIX Diluent; however, user should determine optimal dilution factor depending on application needs. The undiluted samples can be stored at -20°C or below for up to 3 months. Avoid repeated freeze-thaw cycles.
- Saliva: Collect saliva using sample tube. Centrifuge samples at 800 x g for 10 minutes. A 100-fold sample dilution is suggested into MIX Diluent or within the range of 10x 1000x; however, user should determine optimal dilution factor depending on application needs. The undiluted samples can be stored at -20°C or below for up to 3 months. Avoid repeated freeze-thaw cycles.
- **CSF:** Collect cerebrospinal fluid (CSF) using sample pot. Centrifuge samples at 3000 x g for 10 minutes. A 4000-fold sample dilution is suggested into MIX Diluent or within the range of 400x 40000x; however, user should determine optimal dilution factor depending on application needs. The undiluted samples can be stored at -80°C for up to 3 months. Avoid repeated freeze-thaw cycles.

Applicable samples may also include biofluids, cell culture, and tissue homogenates. If necessary, user should determine optimal dilution factor depending on application needs.

Refer to Dilution Guidelines for further instruction.

	Guidelines for Dilutions of 100-fold or Greater (for reference only; please follow the insert for specific dilution suggested)				
100x			10000x		
A)	4 μl sample : 396 μl buffer (100x) = 100-fold dilution  Assuming the needed volume is less than or equal to 400 μl.	A) B)	4 μl sample : 396 μl buffer (100x) 4 μl of A : 396 μl buffer (100x) = 10000-fold dilution Assuming the needed volume is less than or equal to 400 μl.		
	1000x		100000x		
A) B)	4 μl sample : 396 μl buffer (100x) 24 μl of A : 216 μl buffer (10x) = 1000-fold dilution  Assuming the needed volume is less than	A) B) C)	4 μl sample : 396 μl buffer (100x) 4 μl of A : 396 μl buffer (100x) 24 μl of B : 216 μl buffer (10x) = 100000-fold dilution Assuming the needed volume is less than		
	or equal to 240 µl.		or equal to 240 $\mu$ l.		

#### **Reagent Preparation**

- Freshly dilute all reagents and bring all reagents to room temperature before use.
- MIX Diluent Concentrate (10x): Dilute the MIX Diluent Concentrate 10-fold with reagent grade water to produce a 1x solution. When diluting the concentrate, make sure to rinse the bottle thoroughly to extract any precipitates left in the bottle. Mix the 1x solution gently until the crystals have completely dissolved. Store for up to 30 days at 2-8°C.
- Human Prealbumin Standard: Reconstitute the Human Prealbumin Standard (43.75 ng) with 1.4 ml of MIX Diluent to generate a 31.25 ng/ml standard stock solution. Allow the vial to sit for 10 minutes with gentle agitation prior to making dilutions. Prepare duplicate or triplicate standard points by serially diluting from the standard stock solution (31.25 ng/ml) 4-fold with MIX Diluent to produce 7.813, 1.953, 0.488, and 0.122 ng/ml solutions. MIX Diluent serves as the zero standard (0 ng/ml). Any remaining stock solution should be stored at -20°C and used within 30 days. Avoid repeated freeze-thaw cycles.

Standard Point	Dilution	[Prealbumin] (ng/ml)
P1	1 part Standard (31.25 ng/ml)	31.25
P2	1 part P1 + 3 parts MIX Diluent	7.813
Р3	1 part P2 + 3 parts MIX Diluent	1.953
P4	1 part P3 + 3 parts MIX Diluent	0.488
P5	1 part P4 + 3 parts MIX Diluent	0.122
P6	MIX Diluent	0.0

- Biotinylated Human Prealbumin Antibody (50x): Spin down the antibody briefly and dilute the desired amount of the antibody 50-fold with MIX Diluent to produce a 1x solution. The undiluted antibody should be stored at -20°C.
- Wash Buffer Concentrate (20x): Dilute the Wash Buffer Concentrate 20fold with reagent grade water to produce a 1x solution. When diluting
  the concentrate, make sure to rinse the bottle thoroughly to extract any
  precipitates left in the bottle. Mix the 1x solution gently until the crystals
  have completely dissolved.
- SP Conjugate (100x): Spin down the SP Conjugate briefly and dilute the desired amount of the conjugate 100-fold with MIX Diluent to produce a 1x solution. The undiluted conjugate should be stored at -20°C.

#### **Assay Procedure**

- Prepare all reagents, standard solutions, and samples as instructed. Bring all reagents to room temperature before use. The assay is performed at room temperature (20-25°C).
- Remove excess microplate strips from the plate frame and return them immediately to the foil pouch with desiccants inside. Reseal the pouch securely to minimize exposure to water vapor and store in a vacuum desiccator.
- Add 50 µl of Human Prealbumin Standard or sample to each well. Gently tap plate to thoroughly coat the wells. Break any bubbles that may have formed. Cover wells with a sealing tape and incubate for 2 hours. Start the timer after the last addition.
- Wash the microplate manually or automatically using a microplate washer. Invert the plate and decant the contents; hit 4-5 times on absorbent material to completely remove the liquid. If washing manually, wash five times with 200 μl of Wash Buffer per well. Invert the plate each time and decant the contents; hit 4-5 times on absorbent material to completely remove the liquid. If using a microplate washer, wash six times with 300 μl of Wash Buffer per well; invert the plate and hit 4-5 times on absorbent material to completely remove the liquid.
- Add 50 µl of Biotinylated Human Prealbumin Antibody to each well.
   Gently tap plate to thoroughly coat the wells. Break any bubbles that may have formed. Cover wells with a sealing tape and incubate for 1 hour.
- Wash the microplate as described above.
- Add 50 µl of SP Conjugate to each well. Gently tap plate to thoroughly coat the wells. Break any bubbles that may have formed. Cover wells with a sealing tape and incubate for 30 minutes. Turn on the microplate reader and set up the program in advance.
- Wash the microplate as described above.

- Add 50 µl of Chromogen Substrate to each well. Gently tap plate to thoroughly coat the wells. Break any bubbles that may have formed. Incubate in ambient light for 20 minutes or until the optimal blue color density develops.
- Add 50 µl of Stop Solution to each well. The color will change from blue to yellow. Gently tap plate to ensure thorough mixing. Break any bubbles that may have formed.
- Read the absorbance on a microplate reader at a wavelength of 450 nm immediately. If wavelength correction is available, subtract readings at 570 nm from those at 450 nm to correct optical imperfections.
   Otherwise, read the plate at 450 nm only. Please note that some unstable black particles may be generated at high concentration points after stopping the reaction for about 10 minutes, which will reduce the readings.

#### **Data Analysis**

- Calculate the mean value of the duplicate or triplicate readings for each standard and sample.
- To generate a standard curve, plot the graph using the standard concentrations on the x-axis and the corresponding mean 450 nm absorbance (OD) on the y-axis. The best fit line can be determined by regression analysis using log-log or four-parameter logistic curve fit.
- Determine the unknown sample concentration from the Standard Curve and multiply the value by the dilution factor.

### **Typical Data**

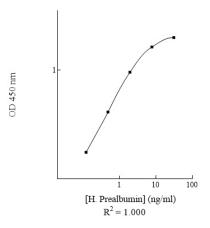
The typical data is provided for reference only. Individual laboratory
means may vary from the values listed. Variations between laboratories
may be caused by technique differences.

Standard Point	ng/ml	OD	Average OD
P1	31.25	2.167 2.111	2.139
P2	7.813	1.727 1.701	1.714
Р3	1.953	0.943 0.965	0.954
P4	0.488	0.383 0.373	0.378
P5	0.122	0.144 0.152	0.148
P6	0.0	0.076 0.072	0.074
Sample: Poo Sodium Citrate I		1.102 1.126	1.114
Sample: Poo Serum (		1.058 1.094	1.076

#### **Standard Curve**

• The curve is provided for illustration only. A standard curve should be generated each time the assay is performed.

Human Prealbumin Standard Curve



#### Reference Value

- Normal human prealbumin plasma and serum levels range from 120 – 450 μg/ml.
- Plasma and serum samples from healthy adults were tested (n=20). On average, human prealbumin level was 197 µg/ml.

Sample	n	Average Value (μg/ml)
Pooled Normal Plasma	10	197
Pooled Normal Serum	10	197

#### **Performance Characteristics**

- The minimum detectable dose of human prealbumin as calculated by 2SD from the mean of a zero standard was established to be 61 pg/ml.
- Intra-assay precision was determined by testing three plasma samples twenty times in one assay.
- Inter-assay precision was determined by testing three plasma samples in twenty assays.

	Intra-Assay Precision			Inter-Assay Precision		
Sample	1	2	3	1	2	3
n	20	20	20	20	20	20
CV (%)	2.2%	4.1%	2.4%	8.8%	11.8%	10.0%
Average CV (%)		2.9%			10.2%	

#### Recovery

Standard Added Value	0.5 – 7.5 ng/ml	
Recovery %	87 – 112%	
Average Recovery %	98%	

#### Linearity

Plasma and serum samples were serially diluted to test for linearity.

Average Percentage of Expected Value (%)			
Sample Dilution	Plasma	Serum	
40000x	102%	110%	
80000x	98%	105%	
160000x	100%	90%	

# **Cross-Reactivity**

Species	Cross-Reactivity (%)
Canine	None
Bovine	None
Equine	None
Monkey	None
Mouse	None
Rat	None
Swine	None
Rabbit	None
Protein	Cross-Reactivity (%)
Albumin	None

# Troubleshooting

Issue	Causes	Course of Action
	Use of improper components	<ul> <li>Check the expiration date listed before use.</li> <li>Do not interchange components from different lots.</li> </ul>
u	Improper wash step	<ul> <li>Check that the correct wash buffer is being used.</li> <li>Check that all wells are empty after aspiration.</li> <li>Check that the microplate washer is dispensing properly.</li> <li>If washing by pipette, check for proper pipetting technique.</li> </ul>
cisio	Splashing of reagents while loading wells	Pipette properly in a controlled and careful manner.
Low Precision	Inconsistent volumes loaded into wells	<ul> <li>Pipette properly in a controlled and careful manner.</li> <li>Check pipette calibration.</li> <li>Check pipette for proper performance.</li> </ul>
7	Insufficient mixing of reagent dilutions	Thoroughly agitate the lyophilized components after reconstitution. Thoroughly mix dilutions.
	Improperly sealed microplate	Check the microplate pouch for proper sealing. Check that the microplate pouch has no punctures. Check that three desiccants are inside the microplate pouch prior to sealing.
High	Microplate was left unattended between steps	Each step of the procedure should be performed uninterrupted.
Low or ensity	Omission of step Steps performed in incorrect order	Consult the provided procedure for complete list of steps.     Consult the provided procedure for the correct order.
Unexpectedly Low or High Signal Intensity	Insufficient amount of reagents added to wells	Check pipette calibration.     Check pipette for proper performance.
xpe Si <sub>l</sub>	Wash step was skipped	Consult the provided procedure for all wash steps.
ne	Improper wash buffer	Check that the correct wash buffer is being used.
n	Improper reagent preparation	<ul> <li>Consult reagent preparation section for the correct dilutions of all reagents.</li> </ul>

	Insufficient or prolonged incubation periods	Consult the provided procedure for correct incubation time.
Deficient Standard Curve Fit	Non-optimal sample dilution	Sandwich ELISA: If samples generate OD values higher than the highest standard point (P1), dilute samples further and repeat the assay. Competitive ELISA: If samples generate OD values lower than the highest standard point (P1), dilute samples further and repeat the assay.  User should determine the optimal dilution factor for samples.
nda	Contamination of	A new tip must be used for each addition of different     samples or reagents during the assay precedure.
ţaı	reagents Contents of wells	samples or reagents during the assay procedure.  • Verify that the sealing film is firmly in place before placing
nt S	evaporate	the assay in the incubator or at room temperature.
Deficie	Improper pipetting	Pipette properly in a controlled and careful manner. Check pipette calibration. Check pipette for proper performance.
	Insufficient mixing of reagent dilutions	Thoroughly agitate the lyophilized components after reconstitution. Thoroughly mix dilutions.

#### References

- (1) Chertow GM et al. (2005) Kidney Int. 68(6):2794-800.
- (2) Hamilton JA et al. (2001) Cell Mol Life Sci. 58(10):1491-521.
- (3) Beck FK et al. (2002) Am Fam Physician. 65(8):1575-8.
- (4) Kaysen GA et al. (2004) J Am Soc Nephrol. 15(3):538-48.

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