VENTANA®



CONFIRM anti-CD23 (SP23) Rabbit Monoclonal Primary Antibody

REF

790-4408

05479258001

IVD



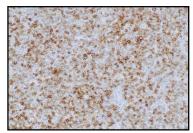


Figure 1. CONFIRM anti-CD23 (SP23) antibody staining of B-cell lymphoma.

INTENDED USE

CONFIRM anti-CD23 (SP23) Rabbit Monoclonal Primary Antibody is intended for laboratory use in the qualitative immunohistochemical detection of CD23 by light microscopy in sections of formalin-fixed, paraffinembedded tissue stained on a Benchmark IHC/ISH instrument.

This product should be interpreted by a qualified pathologist in conjunction with histological examination, relevant clinical information, and proper controls.

This antibody is intended for in vitro diagnostic (IVD) use.

SUMMARY AND EXPLANATION

CONFIRM anti-CD23 (SP23) Rabbit Monoclonal Primary Antibody (CONFIRM anti-CD23 (SP23) antibody) detects the presence of CD23 expression in chronic lymphocytic leukemia/small lymphocytic lymphoma and the absence of CD23 expression in mantle cell lymphoma. CD23 is a transmembrane glycoprotein which functions as a low affinity receptor for surface IgE on a population of B-cells. In secondary lymphoid organs, complex interactions between immune cells leads to the activation and proliferation of B cells (CD23 positive) that form a germinal center and become surrounded by a mantle zone of non-proliferating naïve B cells (CD23 negative). Page 12.

Expression of CD23 has been detected in neoplastic cells from cases of B-cell chronic lymphocytic leukemias and B-cell small lymphocytic lymphomas. Additionally, absence of CD23 is commonly associated with mantle cell lymphomas. Therefore, CD23 staining may be used in the classification of chronic lymphocytic leukemia/small lymphocytic lymphoma (CD23 positive) and mantle cell lymphomas (CD23 negative). The detection of CD23 by immunohistochemistry (IHC) with CONFIRM anti-CD23 (SP23) antibody may be used to aid in the classification of chronic lymphocytic leukemia/small lymphocytic lymphoma from other small B-cell lymphomas including mantle cell lymphoma.

PRINCIPLE OF THE PROCEDURE

CONFIRM anti-CD23 (SP23) antibody binds to the CD23 antigen in formalin-fixed, paraffin-embedded (FFPE) tissues. This antibody can be visualized using *ultra*View Universal DAB Detection Kit (Cat. No. 760-500 / 05269806001), or OptiView DAB IHC Detection Kit (Cat. No. 760-700 / 06396500001). Refer to the respective method sheets for further information.

MATERIAL PROVIDED

CONFIRM anti-CD23 (SP23) antibody contains sufficient reagent for 50 tests.

One 5 mL dispenser of CONFIRM anti-CD23 (SP23) antibody contains approximately 2.5 μg of a rabbit monoclonal antibody.

The antibody is diluted in 0.05 M Tris-HCI with 2% carrier protein, and 0.10% ProClin 300, a preservative.

Specific antibody concentration is approximately 0.5 $\mu g/mL$. There is no known non-specific antibody reactivity observed in this product.

CONFIRM anti-CD23 (SP23) antibody is a recombinant rabbit monoclonal antibody produced as purified cell culture supernatant material.

Refer to the appropriate VENTANA detection kit method sheet for detailed descriptions of: Principles of the Procedure, Materials and Methods, Specimen Preparation and Preparation for Analysis, Quality Control Procedures, Troubleshooting, Interpretation of Results, and Limitations.

MATERIALS REQUIRED BUT NOT PROVIDED

Staining reagents, such as VENTANA detection kits and ancillary components, including negative and positive tissue control slides, are not provided.

Not all products listed in the method sheet may be available in all geographies. Consult your local support representative.

The following reagents and materials may be required for staining but are not provided:

- Recommended control tissue
- 2. Microscope slides, positively charged
- 3. Rabbit Monoclonal Negative Control Ig (Cat. No. 790-4795 / 06683380001)
- 4. *ultra*View Universal DAB Detection Kit (Cat. No. 760-500 / 05269806001)
- 5. OptiView DAB IHC Detection Kit (Cat. No. 760-700 / 06396500001
- 6. EZ Prep Concentrate (10X) (Cat. No. 950-102 / 05279771001)
- 7. Reaction Buffer Concentrate (10X) (Cat. No. 950-300 / 05353955001)
- 8. LCS (Predilute) (Cat. No. 650-010 / 05264839001)
- 9. ULTRA LCS (Predilute) (Cat. No. 650-210 / 05424534001)
- 10. Cell Conditioning Solution (CC1) (Cat. No. 950-124 / 05279801001)
- 11. ULTRA Cell Conditioning Solution (ULTRA CC1) (Cat. No. 950-224 / 05424569001)
- 12. Hematoxylin II (Cat. No. 790-2208 / 05277965001)
- 13. Bluing Reagent (Cat. No. 760-2037 / 05266769001)
- 14. Permanent mounting medium
- 15. Cover glass
- 16. Automated coverslipper
- 7. General purpose laboratory equipment
- 18. BenchMark IHC/ISH instrument

STORAGE AND STABILITY

Upon receipt and when not in use, store at 2-8°C. Do not freeze.

To ensure proper reagent delivery and stability of the antibody, replace the dispenser cap after every use and immediately place the dispenser in the refrigerator in an upright position.

Every antibody dispenser is expiration dated. When properly stored, the reagent is stable to the date indicated on the label. Do not use reagent beyond the expiration date.

SPECIMEN PREPARATION

Routinely processed FFPE tissues are suitable for use with this primary antibody when used with VENTANA detection kits and BenchMark IHC/ISH instruments. The

recommended tissue fixative is 10% neutral buffered formalin. 5 Sections should be cut at approximately 4 μm in thickness and mounted on positively charged slides. Slides should be stained immediately, as antigenicity of cut tissue sections may diminish over time. Ask your Roche representative for a copy of "Recommended Slide Storage and Handling" for more information.

It is recommended that positive and negative controls be run simultaneously with unknown specimens.

WARNINGS AND PRECAUTIONS

- 1. For in vitro diagnostic (IVD) use.
- 2. For professional use only
- $\label{eq:condition} 3. \qquad \text{Do not use beyond the specified number of tests.}$
- 4. ProClin 300 solution is used as a preservative in this reagent. It is classified as an irritant and may cause sensitization through skin contact. Take reasonable precautions when handling. Avoid contact of reagents with eyes, skin, and mucous membranes. Use protective clothing and gloves.
- Positively charged slides may be susceptible to environmental stresses resulting in inappropriate staining. Ask your Roche representative for more information on how to use these types of slides.
- Materials of human or animal origin should be handled as biohazardous materials and disposed of with proper precautions. In the event of exposure, the health directives of the responsible authorities should be followed.^{6,7}
- 7. Avoid contact of reagents with eyes and mucous membranes. If reagents come in contact with sensitive areas, wash with copious amounts of water.
- 8. Avoid microbial contamination of reagents as it may cause incorrect results.





- For further information on the use of this device, refer to the BenchMark IHC/ISH instrument User Guide, and instructions for use of all necessary components located at navifyportal.roche.com.
- Consult local and/or state authorities with regard to recommended method of disposal.
- 11. Product safety labeling primarily follows EU GHS guidance. Safety data sheet available for professional user on request.
- To report suspected serious incidents related to this device, contact the local Roche representative and the competent authority of the Member State or Country in which the user is established.

This product contains components classified as follows in accordance with the Regulation (EC) No. 1272/2008:

Table 1. Hazard information.

Hazard	Code	Statement
WARNING	H317	May cause an allergic skin reaction.
	H412	Harmful to aquatic life with long lasting effects
$\langle \cdot \rangle$	P261	Avoid breathing mist or vapours.
	P273	Avoid release to the environment.
	P280	Wear protective gloves.
	P333 + P313	If skin irritation or rash occurs: Get medical advice/ attention.
	P362 + P364	Take off contaminated clothing and wash it before reuse.
	P501	Dispose of contents/ container to an approved waste disposal plant.

This product contains CAS # 55965-84-9, a reaction mass of: 5-chloro-2-methyl-2H-isothiazol-3-one and 2-methyl-2H-isothiazol-3-one (3:1).

STAINING PROCEDURE

VENTANA primary antibodies have been developed for use on BenchMark IHC/ISH instruments in combination with VENTANA detection kits and accessories. Refer to the tables below for recommended staining protocols.

This antibody has been optimized for specific incubation times but the user must validate results obtained with this reagent.

The parameters for the automated procedures can be displayed, printed and edited according to the procedure in the instrument User Guide. Refer to the appropriate VENTANA detection method sheet for more details regarding IHC staining procedures. For more details on the proper use of this device, refer to the inline dispenser method sheet associated with P/N 790-4408.

Table 2. Recommended staining protocol for CONFIRM anti-CD23 (SP23) antibody with *ultra*View Universal DAB Detection Kit on BenchMark IHC/ISH instruments.

	Method			
Procedure Type	GX	XT	ULTRA or ULTRA PLUS ^a	
Deparaffinization	Selected	Selected	Selected	
Cell Conditioning (Antigen Unmasking)	CC1, Standard	CC1, Standard	ULTRA CC1, 64 minutes (Standard), 95 °C	
Antibody (Primary)	20 minutes, 37 °C	16 minutes, 37 °C	36 minutes, 36 °C	
Counterstain	Hematoxylin II, 4 minutes			
Post Counterstain	Bluing, 4 minutes			

^a Concordance was demonstrated between BenchMark ULTRA and BenchMark ULTRA PLUS instruments using representative assays.

Table 3. Recommended staining protocol for CONFIRM anti-CD23 (SP23) antibody with OptiView DAB IHC Detection Kit on BenchMark IHC/ISH instruments.

	Method			
Procedure Type	GX	XT	ULTRA or ULTRA PLUS ^a	
Deparaffinization	Selected	Selected	Selected	
Cell Conditioning (Antigen Unmasking)	CC1, 64 minutes	CC1, 64 minutes	ULTRA CC1, 64 minutes, 100 °C	
Pre-Primary Peroxidase Inhibitor	Selected	Selected	Selected	
Antibody (Primary)	20 minutes, 37 °C	24 minutes, 37 °C	36 minutes, 36 °C	
Counterstain	Hematoxylin II, 4 minutes			
Post Counterstain		Bluing, 4 minutes		

^a Concordance was demonstrated between BenchMark ULTRA and BenchMark ULTRA PLUS instruments using representative assays.

Due to variation in tissue fixation and processing, as well as general lab instrument and environmental conditions, it may be necessary to increase or decrease the primary antibody incubation, cell conditioning or protease pretreatment based on individual specimens and detection used, and reader preference. For further information on fixation variables, refer to "Immunohistochemistry Principles and Advances".8

POSITIVE TISSUE CONTROL

Optimal laboratory practice is to include a positive control section on the same slide as the test tissue. This helps identify any failures applying reagents to the slide. Tissue with weak positive staining is best suited for quality control. Control tissue may contain both positive and negative staining elements and serve as both the positive and negative control. Control tissue should be fresh autopsy, biopsy, or surgical specimen, prepared or fixed as soon as possible in a manner identical to test sections.

Known positive tissue controls should be utilized only for monitoring performance of reagents and instruments, not as an aid in determining specific diagnosis of test samples. If the positive tissue controls fail to demonstrate positive staining, results of the test specimen should be considered invalid.

An example of positive control tissue for CONFIRM anti-CD23 (SP23) antibody is normal tonsil.

STAINING INTERPRETATION / EXPECTED RESULTS

The cellular staining pattern for CONFIRM anti-CD23 (SP23) antibody is cytoplasmic membrane.

SPECIFIC LIMITATIONS

OptiView detection system is generally more sensitive than *ultra*View Universal DAB Detection Kit. The user must validate the results obtained with this reagent and detection systems

All assays might not be registered on every instrument. Please contact your local Roche representative for more information.

PERFORMANCE CHARACTERISTICS

ANALYTICAL PERFORMANCE

Staining tests for sensitivity, specificity, and precision were conducted and the results are listed below.

Sensitivity and Specificity

Table 4. Sensitivity/Specificity of CONFIRM anti-CD23 (SP23) antibody was determined by testing FFPE normal tissues.

Tissue	# positive / total cases	Tissue	# positive / total cases
Cerebrum	0/3	Thymus	0/3





Tissue	# positive / total cases	Tissue	# positive / total cases
Cerebellum	0/3	Bone marrow	0/3
Adrenal gland	0/3	Lung	0/3
Ovary	0/3	Heart	0/3
Pancreas	0/3	Esophagus	0/3
Lymph node	9/9	Stomach	0/3
Parathyroid gland	0/3	Small intestine	0/3
Pituitary gland	0/3	Colon	0/4
Testis	0/3	Liver	0/3
Thyroid	0/3	Salivary gland	0/3
Breast	0/4	Pharynx, oral cavity	0/3
Spleen	7/7	Kidney	0/3
Tonsil ^a	11/12	Prostate	0/3
Endometrium	0/3	Cervix	0/4
Skeletal muscle	0/3	Skin	0/3
Nerve	0/3	Bladder	0/3
Mesothelium	0/3	Soft Tissue	0/2

^a Tissues evaluated include normal and chronic inflammation.

Table 5. Sensitivity/Specificity of CONFIRM anti-CD23 (SP23) antibody was determined by testing a variety of FFPE neoplastic tissues.

Pathology	# positive / total cases
Glioblastoma (Cerebrum)	0/1
Meningioma (Cerebrum)	0/1
Ependymoma (Cerebrum)	0/1
Oligodendroglioma (Cerebellum)	0/1
Squamous cell carcinoma (Head and neck)	0/1
Serous carcinoma (Ovary)	0/1
Granulosa cell tumor (Ovary)	0/1
Ductal adenocarcinoma (Pancreas)	0/1
Seminoma (Testis)	0/2
Embryonal carcinoma (Testis)	0/1
Follicular carcinoma (Thyroid)	0/1
Papillary carcinoma (Thyroid)	0/2
Ductal carcinoma in situ (Breast)	0/1
Invasive ductal carcinoma (Breast)	0/2
Small cell carcinoma (Lung)	0/1
Adenocarcinoma (Lung)	0/1
Squamous cell (Esophagus)	0/2
Adenocarcinoma (Esophagus)	0/1
GIST (Stomach)	0/1
Adenocarcinoma (Small intestine)	0/1
Gastrointestinal stromal tumor (Small intestine)	0/1

Pathology	# positive / total cases
Carcinoid tumor (Appendix)	0/1
Hepatocellular carcinoma (Liver)	0/1
Cholangiocarcinoma (Liver)	0/1
Papillary renal adenoma (Kidney)	0/1
Adenocarcinoma (Prostate)	0/2
Leiomyosarcoma (Uterus)	0/1
Endometrioid carcinoma (Uterus)	0/1
Clear cell carcinoma (Uterus)	0/1
Squamous cell carcinoma (Cervix)	0/1
Adenocarcinoma (Cervix)	0/1
Alveolar rhabdomyosarcoma (Muscle)	0/1
Invasive melanoma (Skin)	0/1
Squamous cell carcinoma (Skin)	0/1
Neurofibrosarcoma (Nerve)	0/1
Hodgkin lymphoma	2/20
Diffuse large B-cell lymphoma	17/102
B-cell lymphoma, NOS	7/44
MALT lymphoma	1/8
Mantle cell lymphoma	0/7
Peripheral T-cell lymphoma	0/3
Anaplastic large cell lymphoma	1/7
Lymphoma, NOS	1/22
Follicular lymphoma	6/12
Chronic lymphocytic leukemia (CLL) /small lymphocytic lymphoma (SLL)	8/10
Urothelial cell carcinoma (Bladder)	0/1
Warthin's tumor (Salivary gland)	0/1
Mesothelioma (Mesothelium)	0/1
Pleural solitary fibrous tumor (Mesothelium)	0/1
Angiosarcoma (Soft tissue)	0/1
Liposarcoma (Soft tissue)	0/1

Precision

Precision studies for CONFIRM anti-CD23 (SP23) antibody were completed to demonstrate:

- Between lot precision of the antibody.
- Within run and between day precision on a BenchMark ULTRA instrument.
- Between instrument precision on the BenchMark GX, BenchMark XT, and BenchMark ULTRA instrument.
- Between platform precision between the BenchMark XT, BenchMark GX, and BenchMark ULTRA instrument.

All studies met their acceptance criteria.

Precision on the BenchMark ULTRA PLUS instrument was demonstrated using representative assays. Studies included Within-run Repeatability, Between-day and Between-run Intermediate Precision. All studies met their acceptance criteria.





CLINICAL PERFORMANCE

Clinical performance data relevant to the intended purpose of CONFIRM anti-CD23 (SP23) antibody were assessed by systematic review of the literature. The data gathered support the use of the device in accordance with its intended purpose.

REFERENCES

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NOTE: A point (period/stop) is always used in this document as the decimal separator to mark the border between the integral and the fractional parts of a decimal numeral. Separators for thousands are not used.

The summary of safety and performance can be found here:

https://ec.europa.eu/tools/eudamed

Symbols

Ventana uses the following symbols and signs in addition to those listed in the ISO 15223-1 standard (for USA: see elabdoc.roche.com/symbols for more information).

GTIN

Global Trade Item Number

Rx only

For USA: Caution: Federal law restricts this device to sale by or on the order of a physician.

REVISION HISTORY

Rev	Updates
Ε	Updates to Warnings and Precautions section. Updated to current template.

INTELLECTUAL PROPERTY

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For USA: Rx only

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