



VENTANA ROS1 (SP384) Rabbit Monoclonal Primary Antibody



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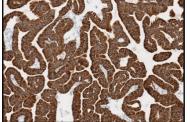


Figure 1. VENTANA ROS1 (SP384) Rabbit Monoclonal Primary Antibodystained NSCLC tissue.

SUMMARY AND EXPLANATION

VENTANA ROS1 (SP384) Rabbit Monoclonal Primary Antibody (VENTANA ROS1 (SP384) antibody) is a rabbit monoclonal antibody produced against the ROS1 protein, a receptor tyrosine kinase of the insulin receptor family. The ROS1 gene is activated by chromosomal rearrangements. These chromosomal rearrangements result in a portion of ROS1, including the kinase domain, fused with 1 of 27 currently known partner genes.¹ The resulting overexpression of ROS1 has been demonstrated to promote tumorigenesis in a variety of cancers.²⁻⁶

PRINCIPLE OF THE PROCEDURE

VENTANA ROS1 (SP384) antibody binds to ROS1 protein in formalin-fixed, paraffinembedded (FFPE) tissue specimens. The specific antibody can be localized using a haptenated secondary antibody followed by a multimer anti-hapten-HRP conjugate (OptiView DAB IHC Detection Kit, Cat. No. 760-700 / 06396500001). The specific antibody-enzyme complex is then visualized with a precipitating enzyme reaction product. Refer to the OptiView DAB IHC Detection Kit package insert for further information. In addition to staining with VENTANA ROS1 (SP384) Rabbit Monoclonal Primary Antibody, a second slide should be stained with Rabbit Monoclonal Negative Control Ig (Cat. No. 790-4795 / 06683380001).

MATERIAL PROVIDED

VENTANA ROS1 (SP384) antibody contains sufficient reagent for 50 tests.

One 5 mL dispenser of VENTANA ROS1 (SP384) antibody contains approximately 1 μg of a rabbit monoclonal antibody.

The antibody is diluted in in a Tris-HCI diluent with carrier protein, 0.1%ProClin 300 preservative and 0.17% Brij-35.

Specific antibody concentration is approximately $0.2 \ \mu g/mL$. There is no known non-specific antibody reactivity observed in this product.

VENTANA ROS1 (SP384) antibody is a recombinant rabbit monoclonal antibody produced as purified cell culture supernatant.

Refer to the appropriate VENTANA detection kit method sheet for detailed descriptions of: Principle of the Procedure, Material and Methods, Specimen Collection 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.

INTENDED USE

VENTANA ROS1 (SP384) Rabbit Monoclonal Primary Antibody is intended for laboratory use in the qualitative detection of ROS1 protein in formalin-fixed, paraffin-embedded tissue stained with VENTANA BenchMark IHC/ISH instruments. 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.

Not all products listed in the package insert 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:

- 1. Recommended control tissue
- 2. Microscope slides, positively charged
- 3. Rabbit Monoclonal Negative Control Ig (Cat. No. 790-4795 / 06683380001)
- 4. OptiView DAB IHC Detection Kit (Cat. No. 760-700 / 06396500001)
- 5. EZ Prep Concentrate (10X) (Cat. No. 950-102 / 05279771001)
- 6. Reaction Buffer Concentrate (10X) (Cat. No. 950-300 / 05353955001)
- 7. LCS (Predilute) (Cat. No. 650-010 / 05264839001)
- 8. ULTRA LCS (Predilute) (Cat. No. 650-210 / 05424534001)
- 9. Cell Conditioning Solution (CC1) (Cat. No. 950-124 / 05279801001)
- 10. ULTRA Cell Conditioning (ULTRA CC1) (Cat. No. 950-224 / 05424569001)
- 11. Hematoxylin II (Cat. No. 790-2208 / 05277965001)
- 12. Bluing Reagent (Cat. No. 760-2037 / 05266769001)
- 13. General purpose laboratory equipment
- 14. 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 the 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.¹⁰ Sections should be cut at approximately 4 μ m 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.

Slide baking prior to staining will not affect specific ROS1 (SP384) staining when baking does not exceed 60 min at 60°C (oven baking), 32 min at 75°C (baking on instrument), or 60 min at 60°C (oven baking) followed by 32 min at 75°C (baking on instrument). 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.
- CAUTION: In the United States, Federal law restricts this device to sale by or on the order of a physician. (Rx Only)
- 4. Do not use beyond the specified number of tests.
- 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.^{11,12}
- 8. Avoid contact of reagents with eyes and mucous membranes. If reagents come in contact with sensitive areas, wash with copious amounts of water.
- 9. Avoid microbial contamination of reagents as it may cause incorrect results.
- 10. 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 dialog.roche.com.
- 11. Consult local and/or state authorities with regard to recommended method of disposal.





 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.
	P261	Avoid breathing dust/ fume/ gas/ mist/ vapours/ spray.
×	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, 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 Table 1 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 kit method sheet for more details regarding immunohistochemistry staining procedures.

 Table 2.
 Recommended staining protocol for VENTANA ROS1 (SP384) antibody with

 OptiView DAB IHC Detection Kit on BenchMark IHC/ISH instruments. The staining
 procedure OptiView DAB IHC should be used.

	Method			
Procedure Type	GX	ХТ	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)	16 minutes, 37 °C	16 minutes, 37 °C	16 minutes, 36 °C	
OptiView HQ Linker	8 minutes			
OptiView HRP Multimer	8 minutes			
Counterstain	ŀ	Hematoxylin II, 4 mir	nutes	
Post Counterstain		Bluing, 4 minute	S	

^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, detection used, and reader preference. For further information on fixation variables, refer to "Immunohistochemistry Principles and Advances".¹³

NEGATIVE REAGENT CONTROL

In addition to staining with VENTANA ROS1 (SP384) antibody, a second slide should be stained with Rabbit Monoclonal Negative Control Ig.

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.

Examples of positive control tissues for this antibody are known ROS1 positive NSCLC tissues, reactive alveolar type II pneumocytes, and cells lines known to express *ROS1*-fusions such as HCC78.

STAINING INTERPRETATION / EXPECTED RESULTS

The cellular staining pattern for VENTANA ROS1 (SP384) Rabbit Monoclonal Primary Antibody is mainly cytoplasmic and rarely membranous and nuclear.

SPECIFIC LIMITATIONS

This antibody has been optimized for a 16 minute incubation time on the BenchMark IHC/ISH instrument in combination with the OptiView DAB IHC Detection Kit using the parameters listed in 2, but the user must validate results obtained with this reagent. All assays might not be registered on every instrument. Please contact your local Roche representative for more information.

PERFORMANCE CHARACTERISTICS

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

Sensitivity and Specificity

Table 3. Sensitivity/Specificity of VENTANA ROS1 (SP384) antibody was determined by testing FFPE normal tissues.

Tissue	# positive / total cases	Tissue	# positive / total cases
Cerebrum ^a	1/8	Adrenal gland	0/5
Cerebellum ^a	1/4	Ovary	0/5
Pancreas ^b	1/6	Stomach ^e	1/5
Lymph node	0/5	Small intestine f	2/5
Pituitary gland	0/6	Colon	0/6
Testis ^c	2/6	Liver	0/6
Thyroid gland ^d	3/6	Salivary gland	0/6
Breast	0/3	Kidney ^g	5/5
Spleen	0/5	Prostate ^h	2/5
Tonsil	0/5	Endometrium	0/3
Thymus gland	0/5	Cervix	0/3
Parathyroid gland	0/3	Skeletal muscle	0/4
Bladder	0/4	Skin ⁱ	1/12



Tissue	# positive / total cases	Tissue	# positive / total cases
Myeloid (bone marrow)	0/5	Nerve	0/4
Lung	0/16	Mesothelium j	3/4
Heart	1/3	Eye	0/1
Esophagus	0/6	Larynx	0/1

^a Neural cytoplasmic staining; ^b Acinar/islet cytoplasmic staining;

^c Stromal staining; ^d Colloid staining; ^e Focal luminal secretion staining;

f Lymphocyte staining in stroma; 9 Apical membrane staining;

^h Apical membrane and epithelial cytoplasmic staining;

ⁱ Epidermal cytoplasmic and lymphocyte staining;

^j Type II pneumocyte staining in one case

Table 4.	Sensitivity/Specificity of VENTANA ROS1 (SP384) antibody was determined by
testing a v	variety of FFPE neoplastic tissues.

Pathology	# positive / total cases
Glioblastoma (Cerebrum)	0/2
Meningioma (Cerebrum)	0/1
Oligodendroglioma (Cerebrum)	0/1
Serous carcinoma (Ovary) ^a	1/2
Neuroendocrine neoplasm (Pancreas)	0/1
Duct adenocarcinoma (Pancreas)	0/1
Seminoma (Testis)	0/1
Embryonal carcinoma (Testis)	0/1
Medullary carcinoma (Thyroid)	0/1
Papillary carcinoma (Thyroid)	0/1
Intraductal carcinoma (Breast) ^b	1/1
Invasive ductal carcinoma (Breast)	0/2
Diffuse B-cell lymphoma (Spleen)	0/1
Small cell carcinoma (Lung) ^a	1/1
Squamous cell carcinoma (Lung)	3/27
Adenocarcinoma (Lung)	4/15
Papillary adenocarcinoma (Lung)	1/2
Mucinous adenocarcinoma (Lung)	0/2
Adenosquamous carcinoma (Lung)	0/1
Squamous cell carcinoma (Esophagus)	0/1
Adenocarcinoma (Esophagus)	0/1
Mucinous adenocarcinoma (Stomach)	0/1
Adenocarcinoma (Gastrointestinal)	0/1
Gastrointestinal stromal tumor (GIST) (Small intestine)	0/1
Adenocarcinoma (Colon)	0/1

Pathology	# positive / total cases
Gastrointestinal stromal tumor (GIST) (Colon)	0/1
Adenocarcinoma (Rectum)	0/1
Gastrointestinal stromal tumor (GIST) (Rectum)	0/1
Hepatocellular carcinoma (Liver)	0/1
Hepatoblastoma (Liver)	0/1
Intrahepatic cholangiocarcinoma (Liver)	12/89
Clear cell carcinoma (Kidney)	0/1
Adenocarcinoma (Prostate)	0/2
Leiomyosarcoma (Uterus)	0/1
Adenocarcinoma (Uterus)	0/1
Clear cell carcinoma (Uterus)	0/1
Squamous cell carcinoma (Cervix)	0/1
Invasive squamous cell carcinoma (Cervix)	0/1
Embryonal rhabdomyosarcoma (Striated muscle)	0/1
Melanoma (Rectum)	0/1
Basal cell carcinoma (Skin)	0/1
Squamous cell carcinoma (Skin)	0/1
Melanoma (Skin)	2/40
Neuroblastoma (Retroperitoneum)	0/1
Mesothelioma (Peritoneum) a	1/1
B-Cell Lymphoma; NOS (Lymph node)	0/2
Hodgkin lymphoma (Lymph node) ^c	1/1
High grade urothelial carcinoma (Bladder)	0/1
Leiomyosarcoma (Bladder)	0/1
Spindle cell rhabdomyosarcoma (Peritoneum)	0/1

^a Lymphocyte staining; ^b Cytoplasmic staining; ^c Staining of Hodgkin cells

Precision

Precision studies for VENTANA ROS1 (SP384) 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 instruments.
- Between platform precision between the BenchMark GX, BenchMark XT, and BenchMark ULTRA instruments.

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.

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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 dialog.roche.com for definition of symbols used):

GTIN UDI

Global Trade Item Number

Unique Device Identification

Indicates the entity importing the medical device into the European Union

REVISION HISTORY

Rev	Updates
В	Updates to Material Provided, Materials Required but Not Provided, Specimen Preparation, Warnings and Precautions, Staining Procedure, Negative Reagent Control, Staining Interpretation / Expected Results, Analytical Performance, Clinical Performance, References, Symbols, and Contact Information sections. Added BenchMark ULTRA PLUS instrument.

INTELLECTUAL PROPERTY

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