

REVISED 19 JAN. 2010 RM (VERS. 4.0)

NOT FOR SALE IN THE USA

1 INTRODUCTION

1.1 Intended Use

The **DRG CA 72-4 ELISA** is an enzyme immunoassay for the quantitative *in vitro* measurement of CA 72-4 (TAG-72) in serum and plasma.

1.2 Summary and Explanation

CA 72-4 (Cancer antigen 72-4) was originally described as an antigenic determinant recognized by B 72.3, a murine monoclonal antibody raised against a membrane extract of mamacarcinoma metastases (1). CA 72-4 was identified as a 1 MDa mucine-like Glycoprotein complex termed TAG-72 (tumor associated antigen 72) (2). The molecular weight of the TAG-72 protein is 48 kD. Elevated CA 72-4 levels in serum and plasma have been reported in various malignant diseases including carcinomas of pancreas, stomach, gall, colon, mamma, ovaries, cervix and endometrium (3). The highest diagnostic sensitivities are found for carcinomas of the gastrointestinal tract and ovaries. Although some benign diseases such as rheumatic diseases or ovary cysts may also result in elevated levels of CA 72-4, clinical studies demonstrated diagnostic specificities of more than 95% for gastrointestinal and ovarian malignancies (4). There is a good correlation between CA 72-4 levels and tumor stage and size (3). CA 72-4 is the marker of choice for the therapeutic monitoring and follow-up care of gastrointestinal cancer patients. Suitable second markers are CA 19-9 or CEA. Additionally, CA 72-4 has been used as an independent marker for the therapeutic monitoring and follow-up care of ovarian cancer patients, in particular in CA 125 negative patients (3, 5).

2 PRINCIPLE OF THE TEST

The DRG CA 72-4 ELISA Kit is a solid phase enzyme-linked immunosorbent assay (ELISA) based on the sandwich principle.

The microtiter wells are coated with a monoclonal [mouse] antibody directed towards a unique antigenic site on a CA 72-4 molecule. An aliquot of patient sample containing endogenous CA 72-4 is incubated in the coated well with enzyme conjugate, which is an anti- CA 72-4 antibody conjugated with horseradish peroxidase. After incubation the unbound conjugate is washed off.

The amount of bound peroxidase is proportional to the concentration of CA 72-4 in the sample.

Having added the substrate solution, the intensity of colour developed is proportional to the concentration of CA 72-4 in the patient sample.

3 WARNINGS AND PRECAUTIONS

1. This kit is for in vitro use only. For professional use only.
2. All reagents of this test kit which contain human serum or plasma have been tested and confirmed negative for HIV I/II, HBsAg and HCV by FDA approved procedures. All reagents, however, should be treated as potential biohazards in use and for disposal.
3. Before starting the assay, read the instructions completely and carefully. Use the valid version of the package insert provided with the kit. Be sure that everything is understood.
4. The microplate contains snap-off strips. Unused wells must be stored at 2 °C to 8 °C in the sealed foil pouch and used in the frame provided.
5. Pipetting of samples and reagents must be done as quickly as possible and in the same sequence for each step.

REVISED 19 JAN. 2010 RM (VERS. 4.0)

NOT FOR SALE IN THE USA

6. Use reservoirs only for single reagents. This especially applies to the substrate reservoirs. Using a reservoir for dispensing a substrate solution that had previously been used for the conjugate solution may turn solution colored. Do not pour reagents back into vials as reagent contamination may occur.
7. Mix the contents of the microplate wells thoroughly to ensure good test results. Do not reuse microwells.
8. Do not let wells dry during assay; add reagents immediately after completing the rinsing steps.
9. Allow the reagents to reach room temperature (21-26°C) before starting the test. Temperature will affect the absorbance readings of the assay. However, values for the patient samples will not be affected.
10. Never pipet by mouth and avoid contact of reagents and specimens with skin and mucous membranes.
11. Do not smoke, eat, drink or apply cosmetics in areas where specimens or kit reagents are handled.
12. Wear disposable latex gloves when handling specimens and reagents. Microbial contamination of reagents or specimens may give false results.
13. Handling should be done in accordance with the procedures defined by an appropriate national biohazard safety guideline or regulation.
14. Do not use reagents beyond expiry date as shown on the kit labels.
15. All indicated volumes have to be performed according to the protocol. Optimal test results are only obtained when using calibrated pipettes and microtiterplate readers.
16. Do not mix or use components from kits with different lot numbers. It is advised not to exchange wells of different plates even of the same lot. The kits may have been shipped or stored under different conditions and the binding characteristics of the plates may result slightly different.
17. Avoid contact with *Stop Solution* containing 0.5 M H₂SO₄. It may cause skin irritation and burns.
18. Some reagents contain Proclin 300, BND and/or MIT as preservatives. In case of contact with eyes or skin, flush immediately with water.
19. TMB substrate has an irritant effect on skin and mucosa. In case of possible contact, wash eyes with an abundant volume of water and skin with soap and abundant water. Wash contaminated objects before reusing them. If inhaled, take the person to open air.
20. Chemicals and prepared or used reagents have to be treated as hazardous waste according to the national biohazard safety guideline or regulation.
21. For information on hazardous substances included in the kit please refer to Material Safety Data Sheets. Material Safety Data Sheets for this product are available upon request directly from DRG.

DRG® CA 72-4 ELISA (Cancer Antigen) (EIA-3942)



REVISED 19 JAN. 2010 RM (VERS. 4.0)

NOT FOR SALE IN THE USA

4 REAGENTS

4.1 Reagents provided

1. **Microtiterwells**, 12x8 (break apart) strips, 96 wells;
Wells coated with anti-CA 72-4 antibody (monoclonal).
2. **Standard (Standard 0-4)**, 5 vials, 0.5 mL, ready to use
Concentration: 0, 3, 20, 50, 100 U/mL
Contain non-mercury preservative.
3. **Control**, 1 vial (lyophilized), 0.5 mL,
see „Reagent Preparation“
Control values and ranges please refer to vial label or QC-Datasheet.
Contains non-mercury preservative.
4. **Sample Diluent**, 1 vial, 3 mL, ready to use,
Contains non-mercury preservative.
5. **Enzyme Conjugate 10X concentrate**, 1 vial, 1.4 mL,
anti-CA 72-4 antibody conjugated to horseradish peroxidase;
see „Preparation of Reagents“.
Contains non-mercury preservative.
6. **Conjugate Diluent**, 1 vial, 14 mL, ready to use
Contains non-mercury preservative.
7. **Substrate Solution**, 1 vial, 14 mL, ready to use,
Tetramethylbenzidine (TMB).
8. **Stop Solution**, 1 vial, 14 mL, ready to use,
contains 0.5M H₂SO₄,
Avoid contact with the stop solution. It may cause skin irritations and burns.
9. **Wash Solution**, 1 vial, 30 mL (40X concentrated),
see „Preparation of Reagents“.

Note: Additional *Sample Diluent* for sample dilution is available upon request.

4.2 Materials required but not provided

- A microtiter plate calibrated reader (450±10 nm) (e.g. the DRG Instruments Microtiter Plate Reader).
- Calibrated variable precision micropipettes.
- Absorbent paper.
- Distilled or deionized water
- Timer
- Semi logarithmic graph paper or software for data reduction

4.3 Storage Conditions

When stored at 2 °C to 8 °C unopened reagents will retain reactivity until expiration date. Do not use reagents beyond this date.

Opened reagents must be stored at 2 °C to 8 °C. Microtiter wells must be stored at 2 °C to 8 °C. Once the foil bag has been opened, care should be taken to close it tightly again.

REVISED 19 JAN. 2010 RM (VERS. 4.0)

NOT FOR SALE IN THE USA

4.4 Reagent Preparation

Bring all reagents and required number of strips to room temperature prior to use.

Control

Reconstitute the lyophilized content with 0.5 mL Aqua dest. and let stand for 10 minutes in minimum. Mix the control several times before use.

Note: *The reconstituted control should be apportioned and stored at –20°C.*

Wash Solution

Add deionized water to the 40X concentrated Wash Solution.

Dilute 30 ml of concentrated Wash Solution with 1170 ml deionized water to a final volume of 1200 ml.

The diluted Wash Solution is stable for 2 weeks at room temperature.

Enzyme Conjugate

Dilute *Enzyme Conjugate* concentrate 1:10 in *Conjugate Diluent*.

Stability of the prepared Enzyme-Conjugate: 1 weeks at 2–8°C in a sealed container.

Example:

If the whole plate is used, dilute 1.2 mL *Enzyme Conjugate* with 10.8 mL *Conjugate Diluent* to a total volume of 12 mL.

If the whole plate is not used at once prepare the required quantity of Enzyme Conjugate by mixing 100 µL of *Enzyme Conjugate 10X conc.* with 0.9 mL of *Conjugate Diluent* per strip (see table below):

No. of strips	<i>Enzyme Conjugate 10X conc.</i> (µL)	<i>Conjugate Diluent</i> (mL)
1	100	0.9
2	200	1.8
3	300	2.7
4	400	3.6
5	500	4.5
6	600	5.4
7	700	6.3
8	800	7.2
9	900	8.1
10	1000	9.0
11	1100	9.9
12	1200	10.8

4.5 Disposal of the Kit

The disposal of the kit must be made according to the national regulations. Special information for this product is given in the Material Safety Data Sheets (see chapter 13).



REVISED 19 JAN. 2010 RM (VERS. 4.0)

NOT FOR SALE IN THE USA

4.6 Damaged Test Kits

In case of any severe damage to the test kit or components, DRG has to be informed in writing, at the latest, one week after receiving the kit. Severely damaged single components should not be used for a test run. They have to be stored until a final solution has been found. After this, they should be disposed according to the official regulations.

5 SPECIMEN COLLECTION AND PREPARATION

Serum or plasma (EDTA-, Heparin- or citrat plasma) can be used in this assay.

Do not use haemolytic, icteric or lipaemic specimens.

Please note: Samples containing sodium azide should not be used in the assay.

5.1 Specimen Collection

Serum:

Collect blood by venipuncture (e.g. Sarstedt Monovette # 02.1388.001), allow to clot, and separate serum by centrifugation at room temperature. Do not centrifuge before complete clotting has occurred. Patients receiving anticoagulant therapy may require increased clotting time.

Plasma:

Whole blood should be collected into centrifuge tubes containing anti coagulant and centrifuged immediately after collection.

(E.g. for EDTA plasma Sarstedt Monovette – red cap - # 02.166.001;
for Heparin plasma Sarstedt Monovette – orange cap - # 02.165.001;
for Citrate plasma Sarstedt Monovette – green cap - # 02.167.001.)

5.2 Specimen Storage and Preparation

Specimens should be capped and may be stored for up to 5 days at 2 °C to 8 °C prior to assaying.

Specimens held for a longer time should be frozen only once at -20°C prior to assay. Thawed samples should be inverted several times prior to testing.

5.3 Specimen Dilution

If in an initial assay, a specimen is found to contain more than the highest standard, the specimens can be diluted with *Sample Diluent* and reassayed as described in Assay Procedure.

For the calculation of the concentrations this dilution factor has to be taken into account.

Example:

- a) dilution 1:10: 10 µL Serum + 90 µL *Sample Diluent* (mix thoroughly)
- b) dilution 1:100: 10 µL dilution a) 1:10 + 90 µL *Sample Diluent* (mix thoroughly).

6 ASSAY PROCEDURE

6.1 General Remarks

- All reagents and specimens must be allowed to come to room temperature before use. All reagents must be mixed without foaming.
- Once the test has been started, all steps should be completed without interruption.
- Use new disposal plastic pipette tips for each standard, control or sample in order to avoid cross contamination

REVISED 19 JAN. 2010 RM (VERS. 4.0)

NOT FOR SALE IN THE USA

- Absorbance is a function of the incubation time and temperature. Before starting the assay, it is recommended that all reagents are ready, caps removed, all needed wells secured in holder, etc. This will ensure equal elapsed time for each pipetting step without interruption.
- As a general rule the enzymatic reaction is linearly proportional to time and temperature.

6.2 Test Procedure

Each run must include a standard curve.

1. Secure the desired number of Microtiter wells in the holder.
2. Dispense **20 µL** of each *Standard*, *Control* and samples with new disposable tips into appropriate wells.
3. Dispense **100 µL** freshly diluted Enzyme Conjugate (see „Preparation of Reagents“) into each well.
4. Thoroughly mix for 10 seconds. It is important to have a complete mixing in this step.
5. Incubate for **120 minutes** at room temperature (without covering the plate).
6. Briskly shake out the contents of the wells.
Rinse the wells 5 times with diluted *Wash Solution* (400 µL per well). Strike the wells sharply on absorbent paper to remove residual droplets.
Important note:
The sensitivity and precision of this assay is markedly influenced by the correct performance of the washing procedure!
7. Add **100 µL** of *Substrate Solution* to each well.
8. Incubate for **30 minutes** at room temperature.
9. Stop the enzymatic reaction by adding **100 µL** of *Stop Solution* to each well.
10. Determine the absorbance (OD) of each well at **450 ± 10 nm** with a microtiter plate reader.
It is recommended that the wells be read **within 10 minutes** after adding the *Stop Solution*.

6.3 Calculation of Results

1. Calculate the average absorbance values for each set of standards, controls and patient samples.
2. Using semi-logarithmic graph paper, construct a standard curve by plotting the mean absorbance obtained from each standard against its concentration with absorbance value on the vertical (Y) axis and concentration on the horizontal (X) axis.
3. Using the mean absorbance value for each sample determine the corresponding concentration from the standard curve.
4. Automated method: The results in the IFU have been calculated automatically using a 4 PL (4 Parameter Logistics) curve fit. 4 Parameter Logistics is the preferred method. Other data reduction functions may give slightly different results.
5. The concentration of the samples can be read directly from this standard curve. Samples with concentrations higher than that of the highest standard have to be further diluted or reported as > 100 U/mL. For the calculation of the concentrations this dilution factor has to be taken into account.

6.3.1 Example of Typical Standard Curve

The following data is for demonstration only and **cannot** be used in place of data generations at the time of assay.

REVISED 19 JAN. 2010 RM (VERS. 4.0)

NOT FOR SALE IN THE USA

Standard	Optical Units (450 nm)
<i>Standard 0</i> (0 U/mL)	0.05
<i>Standard 1</i> (3 U/mL)	0.14
<i>Standard 2</i> (20 U/mL)	0.65
<i>Standard 3</i> (50 U/mL)	1.25
<i>Standard 4</i> (100 U/mL)	2.04

7 EXPECTED NORMAL VALUES

It is strongly recommended that each laboratory should determine its own normal and abnormal values.

In a study conducted with apparently normal healthy adults, using the DRG CA 72-4 ELISA the following values are observed:

Population	Valid N	5% - 95% Percentile	Median
apparently healthy subjects	55	0 – 3.5 U/mL	0.492 U/mL

The results are in good agreement with published cut-offs (< 4-6 U/ml).

The results alone should not be the only reason for any therapeutic consequences. The results should be correlated to other clinical observations and diagnostic tests.

8 QUALITY CONTROL

Good laboratory practice requires that controls be run with each calibration curve. A statistically significant number of controls should be assayed to establish mean values and acceptable ranges to assure proper performance.

It is recommended to use control samples according to state and federal regulations. The use of control samples is advised to assure the day to day validity of results. Use controls at both normal and pathological levels.

The controls and the corresponding results of the QC-Laboratory are stated in the QC certificate added to the kit. The values and ranges stated on the QC sheet always refer to the current kit lot and should be used for direct comparison of the results.

It is also recommended to make use of national or international Quality Assessment programs in order to ensure the accuracy of the results.

Employ appropriate statistical methods for analysing control values and trends. If the results of the assay do not fit to the established acceptable ranges of control materials patient results should be considered invalid.

In this case, please check the following technical areas: Pipetting and timing devices; photometer, expiration dates of reagents, storage and incubation conditions, aspiration and washing methods.

After checking the above mentioned items without finding any error contact your distributor or DRG directly.

REVISED 19 JAN. 2010 RM (VERS. 4.0)

NOT FOR SALE IN THE USA

9 PERFORMANCE CHARACTERISTICS**9.1 Assay Dynamic Range**

The range of the assay is between 0.3 – 100 U/mL.

9.2 Specificity of Antibodies (Cross Reactivity)

Sera of healthy individuals did not react with the DRG CA 72-4 ELISA.

9.3 Sensitivity

The analytical sensitivity was calculated by adding 2 standard deviations to the mean of 20 replicate analyses of *Standard 0* and was found to be < 0.31 U/mL.

9.4 Reproducibility**9.4.1 Intra Assay**

The within assay variability is shown below:

Sample	n	Mean (U/mL)	CV (%)
1	20	9.48	4.54
2	20	22.14	3.34
3	20	65.31	3.84

9.4.2 Inter Assay

The between assay variability is shown below:

Sample	Mean (U/mL)	CV (%)
1	9.99	7.81
2	23.65	5.32
3	69.80	6.35

9.5 Recovery

Samples have been spiked by adding CA 72-4 solutions with known concentrations in a 1:1 ratio.

The expected values were calculated by addition of half of the values determined for the undiluted samples and half of the values of the known solutions. The % Recovery has been calculated by multiplication of the ratio of the measurements and the expected values with 100.

Sample	Added Concentration 1:1 (v/v) (U/ml)	Measured Conc. (U/ml)	Expected Conc. (U/ml)	Recovery (%)
1	0.0	13.02	13.02	
	3.0	7.34	8.01	91.6
	20.0	17.48	16.51	105.8
	50.0	31.56	31.51	100.2
	100.0	60.01	56.51	106.2

DRG® CA 72-4 ELISA (Cancer Antigen) (EIA-3942)



REVISED 19 JAN. 2010 RM (VERS. 4.0)

NOT FOR SALE IN THE USA

2	0.0	42.79	42.79	
	3.0	21.79	22.90	95.2
	20.0	27.43	31.40	87.4
	50.0	43.00	46.40	92.7
	100.0	70.34	71.40	98.5
3	0.0	64.72	64.72	
	3.0	29.31	33.86	86.6
	20.0	38.15	42.36	90.1
	50.0	52.14	57.36	90.9
	100.0	75.79	82.36	92.0

9.6 Linearity

Sample	Dilution	Mean Conc. (U/ml)	Recovery (%)
1	None	13.02	
	1:2	6.39	98.2
	1:4	2.83	87.0
	1:8	1.47	90.2
	1:16	0.80	98.2
2	None	42.79	
	1:2	22.64	105.8
	1:4	10.30	96.3
	1:8	4.75	88.8
	1:16	2.58	96.3
3	None	64.72	
	1:2	33.82	104.5
	1:4	18.25	112.8
	1:8	8.32	102.9
	1:16	4.51	111.6

10 LIMITATIONS OF USE

Reliable and reproducible results will be obtained when the assay procedure is performed with a complete understanding of the package insert instruction and with adherence to good laboratory practice.

Any improper handling of samples or modification of this test might influence the results.

10.1 Interfering Substances

Haemoglobin (up to 4 mg/mL), Bilirubin (up to 0.5 mg/mL) and Triglyceride (up to 30 mg/mL) have no influence on the assay results.

The assay contains reagents to minimize interference of HAMA and heterophilic antibodies. However, extremely high titers of HAMA or heterophilic antibodies may interfere with the test results.

REVISED 19 JAN. 2010 RM (VERS. 4.0)**NOT FOR SALE IN THE USA****10.2 Drug Interferences**

Until today no substances (drugs) are known to us, which have an influence to the measurement of CA 72-4 in a sample.

10.3 High-Dose-Hook Effect

No hook effect was observed in this test up to 6500 U/mL of CA 72-4.

11 LEGAL ASPECTS**11.1 Reliability of Results**

The test must be performed exactly as per the manufacturer's instructions for use. Moreover the user must strictly adhere to the rules of GLP (Good Laboratory Practice) or other applicable national standards and/or laws. This is especially relevant for the use of control reagents. It is important to always include, within the test procedure, a sufficient number of controls for validating the accuracy and precision of the test.

The test results are valid only if all controls are within the specified ranges and if all other test parameters are also within the given assay specifications. In case of any doubt or concern please contact DRG.

11.2 Therapeutic Consequences

Therapeutic consequences should never be based on laboratory results alone even if all test results are in agreement with the items as stated under point 11.1. Any laboratory result is only a part of the total clinical picture of a patient.

Only in cases where the laboratory results are in acceptable agreement with the overall clinical picture of the patient should therapeutic consequences be derived.

The test result itself should never be the sole determinant for deriving any therapeutic consequences.

11.3 Liability

Any modification of the test kit and/or exchange or mixture of any components of different lots from one test kit to another could negatively affect the intended results and validity of the overall test. Such modification and/or exchanges invalidate any claim for replacement.

Claims submitted due to customer misinterpretation of laboratory results subject to point 11.2. are also invalid. Regardless, in the event of any claim, the manufacturer's liability is not to exceed the value of the test kit. Any damage caused to the test kit during transportation is not subject to the liability of the manufacturer.

REVISED 19 JAN. 2010 RM (VERS. 4.0)**NOT FOR SALE IN THE USA****12 REFERENCES / LITERATURE**

1. Colcher D., Horand Hand P., Nuti M., Schlom J. A spectrum of monoclonal antibodies reactive with human mammary tumor cells. Proc. Natl. Acad. Sci. 1981, 78:3199- 3208
2. Johnson VG, Schlom J., Paterson AJ, Bennett J, Magnani JL, Colcher D. Analysis of a human tumor associated glycoprotein (TAG-72) identified by monoclonal antibody 72.3. Cancer Res. 1986; 46: 850-857
3. Lamerz R. in Thomas L. (editor) Labor und Diagnose 5. edition, TH-Books Verlagsgesellschaft mbH, Frankfurt/Main 1998, 973-976
4. Guadagni F, Roselli M, Cosimelli M, Ferroni P, Spila A, Cavaliere F, Casaldi V, Wappner G, Abbolito MR, Greiner JW, et al. CA 72-4 serum marker – a new tool in the management of carcinoma patients. Cancer Invest. 1995; 13(2): 227 – 238.
5. Hasholzner U, Baumgartner L, Stieber P, Meier W, Hofmann K, Fateh-Moghadam A. Significance of the tumour markers CA 125 II, CA 72-4, CASA and CYFRA 21-1 in ovarian carcinoma. Anticancer Res. 1994 Nov-Dec;14 (6B):2743-6.











DRG® CA 72-4 ELISA (Cancer Antigen) (EIA-3942)



REVISED 19 JAN. 2010 RM (VERS. 4.0)

NOT FOR SALE IN THE USA

SYMBOLS USED WITH DRG ELISAS




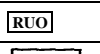


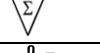
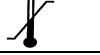


Symbol	English	Deutsch	Français	Español	Italiano
	European Conformity	CE-Konformitäts-kennzeichnung	Conforme aux normes européennes	Conformidad europea	Conformità europea
	Consult instructions for use	Gebrauchsanweisung beachten	Consulter les instructions d'utilisation	Consulte las Instrucciones	Consultare le istruzioni per l'uso
	In vitro diagnostic device	In-vitro-Diagnostikum	Usage Diagnostic in vitro	Para uso Diagnóstico in vitro	Per uso Diagnostica in vitro
	For research use only	Nur für Forschungszwecke	Seulement dans le cadre de recherches	Sólo para uso en investigación	Solo a scopo di ricerca
	Catalogue number	Katalog-Nr.	Référence	Número de catálogo	No. di Cat.
	Lot. No. / Batch code	Chargen-Nr.	No. de lot	Número de lote	Lotto no
	Contains sufficient for <n> tests/	Ausreichend für "n" Ansätze	Contenu suffisant pour "n" tests	Contenido suficiente para <n> ensayos	Contenuto sufficiente per "n" saggi
	Storage Temperature	Lagerungstemperatur	Température de conservation	Temperatura de conservacion	Temperatura di conservazione
	Expiration Date	Mindesthaltbarkeits-datum	Date limite d'utilisation	Fecha de caducidad	Data di scadenza
	Legal Manufacturer	Hersteller	Fabricant	Fabricante	Fabbricante
<i>Distributed by</i>	Distributor	Vertreiber	Distributeur	Distribuidor	Distributore
<i>Content</i>	Content	Inhalt	Contenu	Contenido	Contenuto
<i>Volume/No.</i>	Volume / No.	Volumen/Anzahl	Volume/Numéro	Volumen/Número	Volume/Quantità
<i>Microtiterwells</i>	Microtiterwells	Mikrotiterwells	Plaques de micro-titration	Placas multipocillo	Micropozzetti
<i>Antiserum</i>	Antiserum	Antiserum	Antisérum	Antisuero	Antisiero
<i>Enzyme Conjugate</i>	Enzyme Conjugate	Enzymkonjugat	Conjugué enzymatique	Conjugado enzimático	Tracciante enzimatico
<i>Enzyme Complex</i>	Enzyme Complex	Enzymkomplex	Complexe enzymatique	Complex enzimático	Complesso enzimatico
<i>Substrate Solution</i>	Substrate Solution	Substratlösung	Solution substrat	Solución de sustrato	Soluzione di substrato
<i>Stop Solution</i>	Stop Solution	Stopplösung	Solution d'arrêt	Solución de parada	Soluzione d'arresto
<i>Zero Standard</i>	Zero Standard	Nullstandard	Zero Standard	Estándar cero	Standard zero
<i>Standard</i>	Standard	Standard	Standard	Estándar	Standard
<i>Control</i>	Control	Kontrolle	Contrôle	Control	Controllo
<i>Assay Buffer</i>	Assay Buffer	Assaypuffer	Tampon d'essai	Tampón de ensayo	Tampone del test
<i>Wash Solution</i>	Wash Solution	Waschlösung	Solution de lavage	Solución de lavado	Soluzione di lavaggio
<i>1N NaOH</i>	1N NaOH	1N NaOH	1N NaOH	1N NaOH	1N NaOH (idrossido di sodio 1N)
<i>1 N HCl</i>	1 N HCl	1 N HCl	1N HCl	1 N HCl	
<i>Sample Diluent</i>	Sample Diluent	Probenverdünnungs-medium	Solution pour dilution de l'échantillon	Solución para dilución de la muestra	Diluyente dei campioni
<i>Conjugate Diluent</i>	Conjugate Diluent	Konjugatverdünnungs-medium	Solution pour dilution du conjugué	Solución para dilución del conjugado	Diluyente del tracciante

DRG® CA 72-4 ELISA (Cancer Antigen) (EIA-3942)



REVISED 19 JAN. 2010 RM (VERS. 4.0)

NOT FOR SALE IN THE USA

Symbol	Portugues	Dansk	Svenska	Ελληνικά
	Conformidade com as normas europeias	Europaeisk overensstemmelse	Europeisk överensstämmelse	Ευρωπαϊκή Συμμόρφωση
	Consulte as instruções de utilização	Se brugsanvisning	Se bruksanvisningen	Εγχειρίδιο χρήστη
	Diagnóstico in vitro	In vitro diagnostik	Diagnostik in vitro	in vitro διαγνωστικό
				
	Catálogo n.º	Katalognummer	Katalog nummer	Αριθμός καταλόγου
	No do lote	Lot nummer	Batch-nummer	Αριθμός Παρτίδος
		Indeholder tilstrækkeligt til "n" test	Innehåller tillräckligt till "n" tester	Περιεχόμενο επαρκές για «n» εξετάσεις
	Temperatura de conservação	Opbevaringstemperatur	Förvaringstemperatur	Θερμοκρασία αποθήκευσης
	Prazo de validade	Udløbsdato	Bäst före datum	Ημερομηνία λήξης
	Fabricante	Producent	Tillverkare	Κατασκευαστής
Distributed by				
Content	Conteúdo	Indhold	Innehåll	Περιεχόμενο
Volume/No.	Volume/Número	Volumen/antal	Volym/antal	Όγκος/αριθ.
Microtiterwells	Alvéolos de microtitulação	Mikrotiterbrønde	Brunnar i Mikrotiterplatta	Πηγαδάκια Μικροτιτλοδοτήσεως
Antiserum	Anti-soro	Antiserum	Antiserum	Αντιορός
Enzyme Conjugate	Conjugado enzimático	Enzymkonjugat	Enzymkonjugat	Συζευγμένο ενζύμο
Enzyme Complex	Complexo enzimático	Enzymkompleks	Enzymkomplex	Σύμπλοκο ενζύμου
Substrate Solution	Solução de substrato	Substratløsning	Substratlösning	Διάλυμα υποστρώματος
Stop Solution	Solução de paragem	Stopopløsning	Stopp lösning	Διάλυμα τερματισμού
Zero Standard	Padrão zero	Standard 0	Standard 0	Πρότυπο Μηδέν
Standard	Calibrador	Standard	Standard	Πρότυπα
Control	Controlo	Kontrol	Kontroll	Έλεγχος
Assay Buffer	Tampão de teste	Assay buffer	Assay Buffer	Ρυθμιστικό Διάλυμα Εξέτασης
Wash Solution	Solução de lavagem	Vaskebuffer	Tvätt lösning	Διάλυμα πλύσεως
1N NaOH	1N NaOH	1N NaOH	1N NaOH	1N NaOH
1 N HCl	1 N HCl	1 N HCl	1 N HCl	1 N HCl
Sample Diluent				
Conjugate Diluent				