Testosterone GENLISA™ ELISA



Enzyme Immunoassay for Quantitative determination of Testosterone in serum.

IVD	For In-vitro Diagnostic Use	REF	Catalog Number
X	Store At	LOT	Batch Code
	Manufactured By	D	Biological Risk
	Expiry Date	Ĩ	Consult Operating Instructions

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Introduction:

Testosterone is a steroid hormone belonging to an androgen group. It is the principal male sex hormone and the "original" anabolic steroid. It is derived from cholesterol. The largest amounts of testosterone are synthesized by testes, but is also synthesized in smaller quantities by the theca cells of the ovaries, the zona reticulosa of the adrenal cortex, and the placenta. Substantial amounts of the testosterone in women are also produced from estradiol by reverse aromatization in the liver, adipose cells, and other peripheral tissues.

The mechanism includes: by activation of the androgen receptor (directly or as DHT), and by conversion to estradiol and activation of certain estrogen receptors. Free testosterone is transported into the cytoplasm of target tissue cells, where it can bind to the androgen receptor, or can be reduced to dihydrotestosterone (DHT) by the cytoplasmic enzyme. It plays a major role in maintaining the secondary sexual characteristics in males, which are considered as virilizing effect; whereas anabolic effects include growth of muscle mass and strength, increased bone density and strength, etc.

Intended Use:

The Testosterone GENLISA[™] ELISA is intended for the quantitative determination of Testosterone concentration in serum.

Principle:

Testosterone GENLISA[™] ELISA method is a quantitative determination based on competitive enzyme-linked immunosorbent assay (ELISA) to determine the level of Testosterone present in human serum. Standards, Samples are added to the microtiter well which is pre-coated with anti-Testosterone antibody. Enzyme conjugate antigen is added to the microplate to compete with the Testosterone molecules present in the samples to form a complex. After incubation and a washing step, Substrate solution, is added. Blue color develops on incubation and the reaction is stopped with a Stop Solution to form a yellow color. The concentration of Testosterone molecules in the samples is inversely proportional to the yellow color developed (absorbance) in the wells.

Materials Provided:

- 1. Coated Microtiter Plate (96 wells) 1 no
- 2. Standards (0.5 ml/vial) 0, 0.35, 4.10, 9.20, 21, 44 nmol/l
- 3. Control Serum 0.5 ml
- 4. HRP:Conjugate 12 ml
- 5. (20X) Wash Buffer 2 x 25 ml
- 6. TMB Substrate 12 ml
- 7. Stop Solution 12 ml
- 8. Instruction Manual

Materials to be provided by the End-User:

- 1. Microtiter Plate Reader able to measure absorbance at 450 nm.
- 2. Adjustable pipettes and multichannel pipettor to measure volumes ranging from 25 ul to 1000 ul
- 3. Deionized (DI) water
- 4. Wash bottle or automated microplate washer
- 5. Graph paper or software for data analysis
- 6. Timer
- 7. Absorbent Paper

Handling/Storage:

- 1. Store main kit components at recommended storage temperature indicated on the component label.
- 2. Before using, bring all components to room temperature (18-25°C). Upon assay completion return all components to appropriate storage conditions.

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3. The Substrate is light-sensitive and should be protected from direct sunlight or UV sources.

Health Hazard Warnings:

- 1. Reagents that contain preservatives may be harmful if ingested, inhaled or absorbed through the skin. Refer to the MSDS online for details.
- 2. To reduce the likelihood of blood-borne transmission of infectious agents, handle all serum and/or plasma in accordance with NCCLS regulations.

Specimen Collection and Handling:

Serum- Coagulate at room temperature for 10 - 20 minutes; centrifuge for 20 minutes at 2000-3000 rpm. Remove the supernatant. If precipitation appears, recentrifuge.

Note: Do not use sera preserved with sodium azide or thiomersal. Store samples at 2–8 °C within 72 hours or at -20°C for longer. Do not freeze/thaw more than once.

Reagent Preparation:

- 1. Allow all components to reach RT (Room Temperature) prior to use in the assay.
- 2. (1X) Wash Buffer Dilution: To make (1X) Wash Buffer, add 25 ml of (20X) Wash Buffer to 475 ml of DI water. This is the working solution.

Test Procedure:

- 1. All reagents should be allowed to reach room temperature before use.
- 2. Add **25 ul Sample, Control Serum and Standards** into appropriate wells.
- 3. Add 100 ul HRP:Conjugate into each well. Mix well.
- 4. Seal the plate and incubate at 37°C for 30 minutes on shaker (500 800 rpm approx.)
- 3. Aspirate and wash plate 5 times with **(1X) Wash Buffer** and blot residual buffer by firmly tapping plate upside down on absorbent paper. Wipe of any liquid from the bottom outside of the microtiter wells as any residue can interfere in the reading step. All the washes should be performed similarly.
- 4. Add 100 ul of TMB Substrate to all wells.
- 5. Incubate at room temperature (20-25°C) for 25 minutes in a dark place.
- 6. Add **100 ul** of **Stop Solution**. Read result with an ELISA reader at 450 nm within 20 minutes of stopping the reaction.

Calculations:

Determine the Mean Absorbance (net of Blank) for each set of duplicate Standards and Samples. Using graph paper, plot the average value (absorbance 450 nm) of each standard on the Y-axis versus the corresponding concentration of the standards on the X-axis. Draw the best fit curve through the standard points. To determine the unknown Testosterone concentrations, find the unknown's Mean Absorbance value on the Y-axis and draw a horizontal line to the standard curve. At the point of intersection, draw a vertical line to the X-axis and read the Testosterone Concentration. If samples were diluted, multiply by the appropriate dilution factor. Software which is able to generate a 4-PL or a polynomial curve is best recommended for automated results.

If the determination value is higher or lower than normal range, it means there is an abnormal result. The final result should be diagnosed in correlation with the clinical symptoms and other diagnostic methods.

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Assay validation:

Result of an assay is valid if the following criteria are met.

The absorbance (OD) of control serum should be 3.30 - 6.50 nmol/ml. The absorbance (OD) of standard 0 should be greater than 1.300

Limitations of Method:

Any clinical diagnosis should not be based on the results of in-vitro diagnostic methods alone. Physicians are supposed to consider all clinical and laboratory findings possible to state a diagnosis.

Performance Characteristics:

Sensitivity:

Limit of Detection: It was determined by calculating concentration of Mean O.D of Standard 0 based on 11 replicate analysis minus 2 x SD and was found to be 0.2 nmol/l.

Specificity:

Steroid	Concentration ng/ml	Cross Reactivity %
Progesterone	3.74	0.056
Cortisol	50.00	0.004
Estradiol (E2)	41.60	0.005
Dihydrotestosterone	0.04	4.80
Androstendione	0.06	3.60
Androsterone	4.37	0.048
Cortisone	53.70	0.004
Estriol	88.08	0.002
Estrone	30.84	0.007

Precision:

Steroid	Mean, nmol/l	SD	CV %
Intra-assay sample 1	4.00	0.128	32
Intra-assay sample 2	20.60	0.371	18
Inter-assay sample 1	4.00	0.096	24
Inter-assay sample 2	20.60	0.236	12

Expected normal value:

	Range, nmol/l
Males	6.40 - 31.80
Females	0.20 - 4.40

It is recommended that each laboratory establishes its own normal and pathological reference ranges, as usually done for other diagnostic parameters, too. Therefore, the above-mentioned reference values provide only a guide to values which might be expected.

Safety Precautions:

- This kit is For In-vitro Diagnostic Use only. Follow the working instructions carefully.
- The expiration dates stated on the kit are to be observed. The same relates to the stability stated for reagents
- Do not use or mix reagents from different lots.

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- Do not use reagents from other manufacturers.
- Avoid time shift during pipetting of reagents.
- All reagents should be kept in the original shipping container.
- Some of the reagents contain small amount of sodium azide (< 0.1 % w/w) as preservative. They must not be swallowed or allowed to come into contact with skin or mucosa.
- Source materials maybe derived from human body fluids or organs used in the preparation of this kit were
 tested and found negative for HBsAg and HIV as well as for HCV antibodies. However, no known test
 guarantees the absence of such viral agents. Therefore, handle all components and all patient samples as if
 potentially hazardous.
- Since the kit contains potentially hazardous materials, the following precautions should be observed
- Do not smoke, eat or drink while handling kit material
- Always use protective gloves
- Never pipette material by mouth
- Wipe up spills promptly, washing the affected surface thoroughly with a decontaminant.
- In any case GLP should be applied with all general and individual regulations to the use of this kit.

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Regulatory Status:

CE Marked	Europe
FDA registered	USA
CDSCO registered	India



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SCHEMATIC ASSAY PROCEDURE

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4	Aspirate and wash plate 5 times with (1x) Wash Buffer and blot residual buffer by firmly tapping plate upside down on absorbent paper. Wipe of any liquid from the bottom outside of the microtiter wells as any residue can interfere in the reading step. All the washes should be performed similarly.
5	Add 100 ul of TMB Substrate to all wells.
6	Incubate on shaker at RT for 25 minutes in a dark place.
7	Add 100 ul of plasma Stop Solution . Read result with an ELISA reader at 450 nm within 20 minutes of stopping the reaction.