

# Human T3 / Triiodothyronine (total) ELISA Kit

Enzyme Immunoassay for the quantification of T3 / triiodothyronine (total) in Human serum and plasma (EDTA, heparin).

Catalog number: ARG82801

Package: 96 wells

For research use only. Not for use in diagnostic procedures.

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# **Human T3 / Triiodothyronine (total) ELISA kit ARG82801**

## INTRODUCTION

Triiodothyronine, also known as T3, is a thyroid hormone. It affects almost every physiological process in the body, including growth and development, metabolism, body temperature, and heart rate.

Production of T3 and its prohormone thyroxine (T4) is activated by thyroid-stimulating hormone (TSH), which is released from the anterior pituitary gland. This pathway is part of a closed-loop feedback process: Elevated concentrations of T3, and T4 in the blood plasma inhibit the production of TSH in the anterior pituitary gland. As concentrations of these hormones decrease, the anterior pituitary gland increases production of TSH, and by these processes, a feedback control system stabilizes the level of thyroid hormones in the bloodstream.

T3 is the true hormone. Its effects on target tissues are roughly four times more potent than those of T4. Of the thyroid hormone that is produced, just about 20% is T3, whereas 80% is produced as T4. Roughly 85% of the circulating T3 is later formed in the liver and anterior pituitary by removal of the iodine atom from the carbon atom number five of the outer ring of T4. In any case, the concentration of T3 in the human blood plasma is about one-fortieth that of T4. The half-life of T3 is about 2.5 days. The half-life of T4 is about 6.5 days. [Provided by Wikipedia: Triiodothyronine]

#### PRINCIPLE OF THE ASSAY

This assay employs the competitive quantitative enzyme immunoassay technique. A highly specific antibody for Triiodothyronine (T3) has been precoated onto a microplate. Total Triiodothyronine containing samples, Controls or Standards and T3-HRP conjugate are given into the wells of the microtiter plate. Enzyme labeled and Triiodothyronine compete for the antibody binding sites. After incubation at room temperature, the wells are washed with diluted Wash Buffer to remove unbound material. Then TMB substrate is added to the wells and color develops in inversely proportion to the amount of T3 present in the samples. The color development is stopped by the addition of STOP solution and the intensity of the color is measured at a wavelength of 450 nm. The concentration of T3 in the samples is then determined by comparing the O.D of samples to the standard curve.

# **MATERIALS PROVIDED & STORAGE INFORMATION**

Store all other components at 2-8°C. Use the kit before expiration date.

Component	Quantity	Storage information
Antibody Coated microplate	8 X 12 strips	4°C
Standards A to F (0, 0.5, 1, 2.5, 5, 10 ng/mL)	0.75 mL each (ready to use)	4°C
Control Low & High (1.34-2.78 ng/mL; 3.08-6.40 ng/mL)	0.75 mL each (ready to use)	4°C
Diluent Buffer	6 mL (ready to use)	4°C
T3-HRP Conjugate	6 mL (ready to use)	4°C
40X Wash Buffer	30 mL	4°C
TMB substrate	12 mL (ready to use)	4°C (protect from light)
STOP solution	14 mL (ready to use)	4°C

# **MATERIALS REQUIRED BUT NOT PROVIDED**

- Microplate reader capable of reading at 450 nm (620 nm as optional reference wave length)
- Deionized or distilled water
- Mixer or Ultra-Turrax
- Microplate shaker
- Pipettes and pipette tips
- Microtiter plate washer (recommended)

## **TECHNICAL NOTES AND PRECAUTIONS**

- Wear protective gloves, clothing, eye, and face protection especially while handling blood or body fluid samples.
- Store the kit at 2-8°C at all times.
- Prior to beginning the assay procedure, bring all reagents and required number of strips to room temperature (25°C) before use.
- Avoid air bubbles in the wells as this could result in lower binding efficiency and higher CV% of duplicate reading.
- Briefly spin down the all vials before use.
- If crystals are observed in the 40X Wash Buffer, warm to 37°C until the crystals are completely dissolved.
- Minimize lag time between wash steps to ensure the plate does not become completely dry during the assay.
- Ensure complete reconstitution and dilution of reagents prior to use.
- Take care not to contaminate the TMB Substrate. Do not expose the TMB solution to glass, foil or metal. If the solution is blue before use, DO NOT USE IT.
- Do NOT return leftover TMB Substrate to bottle. Do NOT contaminate the unused TMB Substrate. If the solution is blue before use, DO NOT USE IT.
- Change pipette tips between the addition of different reagent or samples.
- Taping the well strips together with lab tape can be done as an extra
  precaution to avoid plate strips from coming loose during the procedure.
- Include a standard curve and controls each time the assay is performed.
- Run both standards and samples in at least duplicates (triplicate is recommended).

## SAMPLE COLLECTION & STORAGE INFORMATION

The following recommendations are only guidelines and may be altered to optimize or complement the user's experimental design.

<u>Serum:</u> Collect blood in a tube with no anticoagulant. Allow the blood to clot at room temperature for 30 minutes. Centrifuge at 2500 x g for 20 minutes.

<u>Plasma:</u> Plasma: Collect blood with EDTA, heparin or citrate and centrifuge at  $2000 \times g$  and  $4^{\circ}C$  for 10 minutes. Collect the plasma layer and store on ice.

#### Note:

- 1. Do not use haemolytic, icteric or lipaemic specimens.
- 2. Avoid disturbing the white buffy layer when collection serum/plasma sample.
- 3. Samples containing sodium azide should not be used in the assay.
- 4. Specimens should be capped and may be stored for up to 48 hours at 2-8°C prior to assaying. Specimens stored for a longer time (up to 3 months) should be frozen only once at-20°C prior to assay. Thawed samples should be inverted several times prior to testing.
- 5. If in an initial assay, a specimen is found to contain more than the highest standard, the specimens can be diluted with Standard A and re-assayed. For the calculation of the concentrations this dilution factor has to be taken into account.

## **REAGENT PREPARATION**

• 1X Wash Buffer: Dilute 40X Wash Buffer into distilled water to yield 1X Wash Buffer. (E.g., add 30 mL of 40X Wash Buffer into 1170 mL of distilled water to a final volume of 1200 mL) The 1X Wash Buffer is stable for up to 2 weeks at room temperature.

#### **ASSAY PROCEDURE**

All materials should be equilibrated to room temperature (RT, 20-27°C) before use. Standards and samples should be assayed in duplicates.

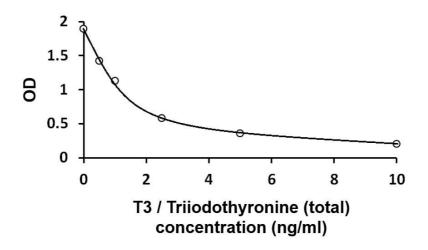
- 1. Add  $50~\mu L$  of Standards, Controls and samples into the appropriate wells of the Antibody Coated Microplate.
- 2. Add  $50 \,\mu\text{L}$  of **Diluent Buffer** to each well. Thoroughly mix for  $10 \,\text{seconds}$ . It is important to have a complete mixing in this step.
- 3. Incubate at **RT** for **30 minutes** on a microplate shaker.
- 4. Add **50 μL** of **T3-HRP Conjugate** into all wells.
- 5. Incubate at **RT** for **30 minutes** on a microplate shaker.
- 6. Aspirate each well and wash, repeating the process 4 times for a total 5 washes. Wash by filling each well with 1× Wash Buffer (300 μL) using a squirt bottle, manifold dispenser, or autowasher. Then complete removal of liquid at each is essential to good performance. After the last wash, remove any remaining Wash Buffer by aspirating, decanting or blotting against clean paper towels.
- 7. Add 100  $\mu$ L of TMB Substrate to each well, including the blank wells. Incubate in the dark for 10 minutes at RT on a microplate shaker.

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- 8. Immediately Add  $100 \, \mu L$  of Stop Solution to each well, including the blank wells. The color of the solution should change from blue to yellow.
- 9. Read the OD with a microplate reader at **450 nm** immediately. (optional: read at 620 nm as reference wavelength) It is recommended reading the absorbance within **10 minutes** after adding the stop solution.

#### **EXAMPLE OF TYPICAL STANDARD VALUES**

The following figures demonstrate typical results with the Human T3 / Triiodothyronine (total) ELISA Kit. One should use the data below for reference only. This data should not be used to interpret actual results.



#### **CALCULATION OF RESULTS**

- 1. Calculate the average absorbance values for each set of Controls, standards and samples.
- 2. Using log-log, semi-log or linear 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. 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.
- arigo provides GainData®, an in-house development ELISA data calculator, for ELISA data result analysis. Please refer our GainData® website for details. (<a href="https://www.arigobio.com/elisa-analysis">https://www.arigobio.com/elisa-analysis</a>)
- 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 > 10 ng/mL. For the calculation of the concentrations this dilution factor has to be taken into account.
- 6. Total serum triiodothyronine concentration is dependent upon a multiplicity of factors: thyroid gland function and its regulation, thyroxine binding globulin (TBG) concentration, and the binding of triiodothyronine to TBG (3, 4). Thus, total Triiodothyronine concentration alone is not sufficient to assess clinical status.

# **QUALITY ASSURANCE**

# Sensitivity

The sensitivity of the Human T3 / Triiodothyronine (total) ELISA kit is 0.1 ng/mL.

# Specificity

Substance	Cross Reactivity (%)	
I-Triiodothyronine	100	
I-Thyroxine	0.37	
Reverse T3	0.75	
D-Thyroxine	0.1	
3,5-Diiodo-L-Thyrosine	0.2	
4-Phenoxyphenol	0.2	

## Intra-assay and Inter-assay precision

The CV value of intra-assay precision was 3.59-6.61% and CV value of inter-assay precision was 5.23-6.73%.

## Recovery

Samples have been spiked by adding T3 solutions with known concentrations in a 1:1 ratio.

		Sample 1	Sample 2	Sample 3
Conc.		1.09	1.38	2.37
Average Recov	ery (%	102.5	103.0	105.3
Range of	From	100.0	94.9	95.1
Recovery (%)	То	111.0	106.8	107.3

# **Expected Normal Values**

Population	Valid N	Range (ng / mL)	Mean (ng / mL)
Males and females	140	0.63-1.99	1.19