

# **EDI™** Human Pepsinogen II ELISA Kit

Enzyme Linked ImmunoSorbent Assay (ELISA) for the measurement of Human Pepsinogen II Levels in Serum



#### **INTENDED USE**

This ELISA (enzyme-linked immunosorbent assay) kit is intended for the quantitative determination of human pepsinogen II levels in serum. Determination of human serum pepsinogen II level would be a useful tool in the aid of diagnosing the functional states of acid-secreting gastric mucosa. This kit is for in vitro diagnostic use only.

## **SUMMARY OF PHYSIOLOGY**

Pepsinogen consists of a single polypeptide chain of 375 amino acids with an average molecular weight of 42 kDa. Pepsinogen II is synthesized at gastric chief cells and mucous neck cells, while pepsinogen I is produced not only by gastric chief cells and mucous neck cells, but also by clear mucous cells of antrum, etc. The clinical applications of measuring pepsinogen II and pepsinogen I are a useful aid in diagnosing severe atrophic gastritis and stomach cancer. It was suggested that the measurement of serum pepsinogens served as a "serological biopsy" for predicting the presence of atrophic gastritis or superficial gastritis.

Atrophic Gastritis: It was found that serum pepsinogen II levels falling to less than 20 ng/ml was highly specific for severe atrophic gastritis. It is also observed that serum pepsinogen II levels fell with increasing severity of mucosal damage in atrophic gastritis. The diagnostic sensitivity and specificity of serum pepsinogen II level for advanced atrophic corpus gastritis are about 92% and 90% respectively. On the other hand, the decrease in serum pepsinogen II levels in patients with pernicious anemia and atrophic gastritis was found to be associated with normal or raised pepsinogen I levels. Therefore, a pepsinogen II/Pepsinogen I ratio is significantly lower than those with superficial gastritis or normal remnant mucosa.

Stomach Cancer: Low serum pepsinogen II levels were found in patients with gastric cancer, with a threefold higher incidence. Other studies have concluded that low serum pepsinogen II levels may identify persons at increased risk for intestinal types of stomach cancer

Duodenal Ulcer: A low serum pepsinogen II level can exclude a diagnosis of duodenal ulcer. Although a high pepsinogen II level has less clinical use for establishing the diagnosis of a duodenal ulcer, the combination of hypergastrinemia and a highly elevated serum pepsinogen II strongly suggests the possibility of the Zollinger-Ellison syndrome.

## **ASSAY PRINCIPLE**

This ELISA is designed, developed and produced for the quantitative measurement of human pepsinogen II level in serum sample. The assay utilizes the two-site "sandwich" technique with two selected monoclonal antibodies that bind to different epitopes of human pepsinogen II without any cross-reaction to human pepsinogen I.

Assay calibrators, controls and patient serum samples containing human pepsinogen II are added directly to microtiter wells of microplate that was coated with streptavidin. Simultaneously, a biotinylated antibody and a horseradish peroxidase-conjugated antibody are added to each microwell. After the first incubation period, the wall of microtiter well captures the biotinylated antibody as well as an immuno complex in the form of "streptavidin – biotin-antibody – pepsinogen II– HRP-antibody". Unbound proteins as well as unbound KT-811/V19/IVD/2020-01

HRP-conjugated antibody in each microtiter well are removed in the subsequent washing step. The microwell is incubated with a substrate solution in a timed reaction and then measured in a spectrophotometric microplate reader. The enzymatic activity of the tracer antibody bound to the pepsinogen II on the wall of the microtiter well is directly proportional to the amount of pepsinogen II in the sample. A calibration curve is generated by plotting the absorbance versus the respective human pepsinogen II concentration for each calibrator on Point-to-Point, CubicSpline or 4-Parameter plot. The concentration of human pepsinogen II in test samples is determined directly from this calibration curve.

## **REAGENTS: PREPARATION AND STORAGE**

This test kit must be stored at  $2-8^{\circ}$ C upon receipt. For the expiration date of the kit refer to the label on the kit box. All components are stable until this expiration date.

Prior to use allow all reagents to come to room temperature. Reagents from different kit lot numbers should not be combined or interchanged.

## 1. Streptavidin Coated Microplate (10040)

Microplate coated with streptavidin.

Qtv: 1 x 96 well microplate

Storage: 2 – 8°C Preparation: Ready to Use.

#### 2. Pepsinogen II Tracer Antibody (30101)

HRP-conjugated anti-human tracer antibody in a stabilized protein matrix.

Qty: 1 x 0.6 mL Storage: 2 – 8°C

Preparation: 21X Concentrate. The contents must be

diluted with tracer antibody diluent (30017)

and mixed well before use.

#### 3. Tracer Antibody Diluent (30017)

Buffer for antibody dilution according to the assay

procedures. .

Qty: 1 x 12 mL Storage: 2 – 8°C Preparation: Ready to use

## 4. Pepsinogen II Capture Antibody (30102)

Biotinylated anti-human pepsinogen II capture antibody in a stabilized protein matrix.

Qty:  $1 \times 0.6 \text{ mL}$ Storage:  $2 - 8^{\circ}\text{C}$ 

Preparation: 21X Concentrate. The contents must be

diluted with tracer antibody diluent (30017)

and mixed well before use.

## 5. ELISA Wash Concentrate (10010)

Surfactant in a phosphate buffered saline with non-azide

preservative.

Qty:  $1 \times 30 \text{ mL}$ Storage:  $2 - 25^{\circ}\text{C}$ 

Preparation: 30X Concentrate. The contents must be

diluted with 870 mL distilled water and mixed

well before use.

#### 6. ELISA HRP Substrate (10020)

Tetramethylbenzidine (TMB) with stabilized hydrogen

peroxide.

Qty:  $1 \times 12 \text{ mL}$ Storage:  $2 - 8^{\circ}\text{C}$ Preparation: Ready to Use.

#### 7. ELISA Stop Solution (10030)

0.5 M sulfuric acid

Qty:  $1 \times 12 \text{ mL}$ Storage:  $2 - 25^{\circ}\text{C}$ Preparation: Ready to Use.

## 8. Pepsinogen II Calibrators Levels 1 to 6 (30093 - 30098)

Lyophilized human pepsinogen II in a bovine serum albumin-based matrix with a non-azide preservative. Refer to vials for exact concentration.

Qty: 6 x vials

Storage:  $2 - 8^{\circ}\text{C}$ , <-20°C for long term storage

Do not exceed 3 freeze-thaw cycles.

Preparation: Must be reconstituted with 0.5 mL of

demineralized water, allowed to sit for 10 minutes, and then mixed by inversions or gentle vortexing. Make sure that all solids are dissolved completely prior to use.

## 9. Pepsinogen II Controls (30099 - 30100)

Lyophilized human pepsinogen II in a bovine serum albumin-based matrix with a non-azide preservative. Refer to vials for exact concentration

Qty: 2 x vials

Storage:  $2 - 8^{\circ}\text{C}$ , <-20°C for long term storage

Do not exceed 3 freeze-thaw cycles.

Preparation: Must be reconstituted with 0.5 mL of

demineralized water, allowed to sit for 10 minutes, and then mixed by inversions or gentle vortexing. Make sure that all solids are dissolved completely prior to use.

## **SAFETY PRECAUTIONS**

The reagents are for in vitro diagnostic use only. Source material which contains reagents of bovine serum albumin was derived in the contiguous 48 United States. It was obtained only from healthy donor animals maintained under veterinary supervision and found free of contagious diseases. Wear gloves while performing this assay and handle these reagents as if they were potentially infectious. Avoid contact with reagents containing hydrogen peroxide, or sulfuric acid. Do not get in eyes, on skin, or on clothing. Do not ingest or inhale fumes. On contact, flush with copious amounts of water for at least 15 minutes. Use Good Laboratory Practices.

## MATERIALS REQUIRED BUT NOT PROVIDED

- 1. Precision single channel pipettes capable of delivering 20  $\mu L,\,25$   $\mu L,\,100$   $\mu L,\,$  and 1000  $\mu L,\,$  etc.
- 2. Repeating dispenser suitable for delivering 100 μL.
- 3. Disposable pipette tips suitable for above volume dispensing.
- 4. Disposable 12 x 75 mm or 13 x 100 glass tubes.
- 5. Disposable plastic 1000 mL bottle with caps.
- 6. Aluminum foil.
- 7. Deionized or distilled water.
- 8. Plastic microtiter well cover or polyethylene film.
- ELISA multichannel wash bottle or automatic (semi-automatic) washing system.
- Spectrophotometric microplate reader capable of reading absorbance at 450 nm.

## **SPECIMEN COLLECTION & STORAGE**

Only 100  $\mu$ L of human serum is required for human pepsinogen II measurement in duplicate. No special preparation of individual is necessary prior to specimen collection. However, a 10 hour fasting serum sample is recommended for the test. Whole blood should be collected and must be allowed to clot for minimum 30 minutes at room temperature before the serum is separated by centrifugation (850 – 1500xg for 10 minutes). The serum should be separated from the clot within three hours of blood collection and transferred to a clean test tube. Serum samples should be stored at –20°C or below until measurement. Avoid more than three times freeze-thaw cycles of specimen.

## **ASSAY PROCEDURE**

#### 1. Reagent Preparation

- Prior to use allow all reagents to come to room temperature. Reagents from different kit lot numbers should not be combined or interchanged.
- ELISA Wash Concentrate (10010) must be diluted to working solution prior to use. Please see REAGENTS section for details.
- 3. Reconstitute all assay calibrators level 1 to level 6 (30093 30098) and controls (30099 30100) by adding 0.5 mL of deminerialized water to each vial. Allow the calibrators and controls to sit undisturbed for 10 minutes, and then mix well by inversions or gentle vortexing. One must make sure that all solid is dissolved completely prior to use. These reconstituted calibrators and controls may be stored at 2 8°C for up to 3 days or at –20°C or below for long-term storage. Do not exceed 3 freeze-thaw cycles.

## 2. Manual Assay Procedure

 Place a sufficient number of microwell strips (10040) in a holder to run calibrators (30093 - 30098), controls (30099 -30100), and samples in duplicate.

2. Test Configuration

Row	Strip 1	Strip 2	Strip 3
Α	Calibrator Level 1	Calibrator Level 5	SAMPLE 1
В	Calibrator Level 1	Calibrator Level 5	SAMPLE 1
С	Calibrator Level 2	Calibrator Level 6	SAMPLE 2
D	Calibrator Level 2	Calibrator Level 6	SAMPLE 2
E	Calibrator Level 3	Control 1	SAMPLE 3
F	Calibrator Level 3	Control 1	SAMPLE 3
G	Calibrator Level 4	Control 2	SAMPLE 4
Н	Calibrator Level 4	Control 2	SAMPLE 52

 Prepare the <u>antibody working solution</u> by 1:21 fold dilution of the tracer antibody (30101) and capture antibody (30101) with the diluent (30017). For each strip, it is required to mix 1 mL of the diluent (30017) with 50 μL of the tracer antibody (30101) and 50 μL capture antibody (30102) in a clean test tube.

Note: This <u>antibody working solution</u> should be freshly prepared.

- Add 50 µL of calibrators (30093 30098), controls (30099 30100), and samples into the designated microwells. Mix by gently tapping the plate.
- 5. Add 100 μL of antibody working solution to each microwell.

- Cover the plate with one plate sealer and aluminum foil.
   Incubate at room temperature (20-25 °C) for 120 minutes.
- Remove the plate sealer. Aspirate the contents of each microwell. Wash each microwell 5 times by dispensing 350 µL of <u>diluted</u> wash solution (10010) into each microwell, then completely aspirating the contents. Alternatively, an automated microplate washer can be used.
- Add 100 μL of substrate (10020) into each microwell. Mix by gently tapping the plate.
- Cover the plate with one plate sealer and aluminum foil.
   Incubate at room temperature (20-25 °C) for 20 minutes.
- Remove the aluminum foil and plate sealer and add 100 μL
  of Stop Solution (10030) into each of the microwells. Mix by
  gently tapping the plate.
- Read the absorbance at 450 nm within 10 minutes with a microplate reader.

#### 3. Automated Assay Procedure

- Prepare the <u>antibody working solution</u> by 1:21 fold dilution of the tracer antibody (30101) and capture antibody (30102) with the diluent (30017). For each strip, it is required to mix 1 mL of the diluent (30017) with 50 μL of the tracer antibody (30101) and 50 μL capture antibody (30102) in a clean test tube
  - Note: This <u>antibody working solution</u> should be freshly prepared.
- Add 50 µL of calibrators (30093 30098), controls (30099 -30100), and samples into the designated microwells.
- 3. Add 100 µL of antibody working solution to each microwell.
- Incubate plate with initial shaking for 1 minutes and further incubation at 37°C for 60 minutes.
- Aspirate the contents of each microwell. Wash each microwell 5 times by dispensing 350 µL of <u>diluted</u> wash solution (10010) into each microwell, then completely aspirating the contents.
- 6. Add 100 µL of substrate (10020) into each microwell.
- 7. Incubate plate at 37°C for 18 minutes.
- Add 100 µL of Stop Solution (10030) into each of the microwells
- 9. Read the absorbance at 450 nm.

Note: The above automated ELISA procedure has been performed on DS2 system. A satisfactory patient sample correlation was observed between the manual and automated assay procedures (r = 0.943, slope = 1.0958). One may adjust the procedure according to different automated ELISA system used in each laboratory.

#### **PROCEDURAL NOTES**

- It is recommended that all calibrators, controls and unknown samples be assayed in duplicate. The average absorbance reading of each duplicate should be used for data reduction and the calculation of results.
- Keep light-sensitive reagents in the original bottles and avoid unnecessary exposure to the light.
- Store any unused antibody-coated strips in the foil Ziploc bag with desiccant to protect from moisture.
- Careful technique and use of properly calibrated pipetting devices are necessary to ensure reproducibility of the test.
- 5. Incubation times or temperatures other than those stated in this insert may affect the results.
- Avoid air bubbles in the microwell as this could result in lower binding efficiency and higher CV% of duplicate reading.
- All reagents should be mixed gently and thoroughly prior to use. Avoid foaming.

#### INTERPRETION OF RESULTS

- Calculate the average absorbance for each pair of duplicate test results.
- Subtract the average absorbance of the LEVEL 1 (0 ng/mL) from the average absorbance of all other readings to obtain corrected absorbance.
- The calibration curve is generated by the corrected absorbance of all calibrator levels on the ordinate against the calibrator concentration on the abscissa using point-to-point or log-log paper. Appropriate computer assisted data reduction programs may also be used for the calculation of results.
- 4. It is recommended to use following curve fits: (1) Point-to-Point, or (2) 4-Parameter or (3) CubicSpline.
- The human pepsinogen II concentrations for the controls and patient samples are read directly from the calibration curve using their respective corrected absorbance.

## LIMITATIONS OF THE PROCEDURE

- Since there is no Gold Standard concentration available for human pepsinogen II measurement, the values of assay calibrators were established by diluting a highly purified human pepsinogen II in a protein matrix.
- For unknown sample value read directly from the assay that is greater than 300 ng/mL, it is recommended to measure a further diluted sample for more accurate measurement.
- 3. If there is not a microplate reader in your laboratory able to read beyond 2.0 at OD 450 nm, adjust the computer program for an assay without the calibrator level 6 from the calibrator set.
- Bacterial or fungal contamination of serum specimens or reagents, or cross-contamination between reagents may cause erroneous results.
- Water deionized with polyester resins may inactive the horseradish peroxidase enzyme.

#### QUALITY CONTROL

To assure the validity of the results each assay should include adequate controls with known pepsinogen II levels. We recommend that all assays include the laboratory's own human serum based pepsinogen II controls in addition to those provided with this kit.

### **EXPECTED VALUES**

Seventy-three normal adult sera were measured with this human pepsinogen II ELISA. The expected normal range is listed in the following table with different percentile cut-off and the median level of this group of population is 4.9 ng/mL.

Percentile Cut-off	Normal Range (ng/mL)	
95%	2.3 – 20	
90%	2.5 – 15	
85%	3.0 – 12	
80%	3.0 – 11	

The ratio of pepsinogen I/II is calculated from the same group of normal population.

Percentile Cut-off	Normal Range (ng/mL)		
95%	3 – 32		
90%	4 – 25		
85%	4 – 24		
80%	6 – 22		

It is highly recommended that each laboratory should establish their own normal range for pepsinogen II and the ratio of pepsinogen I/II based on local populations.

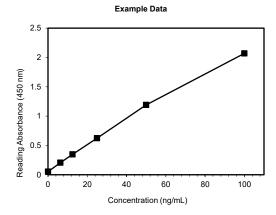
Patients with atrophic gastritis, as well as patients with stomach cancer would have a pepsinogen I/II level below 3. However, gastroendoscopy and tissue biopsy should be used as final and confirmative diagnostic method.

#### **EXAMPLE DATA**

A typical absorbance data and the resulting calibration curves from are represented.

Note: This curve should not be used in lieu of calibrator curve run with each assay.

Microwell ID	Read	ding Absorbance	Concentration	
illiorowen ib	Readings	Average	Corrected	ng/mL
Calibrator Level 1:	0.053	0.050	0.000	
0 ng/mL	0.050	0.052	0.000	
Calibrator Level 2:	0.201	0.205	0.153	
6.3 ng/mL	0.208	0.205		
Calibrator Level 3:	0.341	0.040	0.349 0.297	
12.5 ng/mL	0.357	0.349	0.297	
Calibrator Level 4:	0.590	0.623	0.571	
25 ng/mL	0.656			
Calibrator Level 5:	1.250	1.191	1.139	
5ng/mL	1.132		1.155	
Calibrator Level 6:	2.064	2.069	2.017	
100 ng/mL	2.074	2.000	2.017	
Control 1	0.218	0.218	0.218 0.166	6.8
Control 1	0.217		0.100	0.0
Control 2	0.619	0.637	0.585	25.6
Oomioi 2	0.655			20.0



## PERFORMANCE CHARACTERISTICS Sensitivity

The sensitivity of this human pepsinogen II ELISA is 0.1 ng/mL as determined by measuring zero calibrator 16 times in the same assay and calculating the detection limit at 3 standard deviations above the pepsinogen II zero calibrator. The assay analytical sensitivity is approximately 0.5 ng/mL.

#### **Hook Effect**

It was determined that this pepsinogen II ELISA did not show any high dose "hook" effect up to 1,000 ng/mL of pepsinogen II.

#### Reproducibility and Precision

The intra-assay precision is validated by measuring two samples in a single assay with 16 replicate determinations. The inter-assay precision is validated by measuring two samples in duplicate in 12 individual assays. The results are as follows:

	Intra-Assay		Inter-Assay		
Sample	1	2	2 1 2		
Mean (ng/mL)	8.7	33.6	8.5	33.0	
CV (%)	3.8	7.1	6.9	5.7	

#### Linearity

Two human serum samples were diluted with assay buffer and assayed. The results are as follows:

Sample	Observed (ng/mL)	Expected (ng/mL)	Recovery (%)
Sample 1	16.2	-	-
50%	8.5	8.1	105
25%	3.9	4.1	95
12.5%	1.9	2.0	95
Sample 2	56.8	-	-
50%	26.7	28.4	94
25%	13.8	14.2	97
12.5%	6.9	7.1	97
6.25%	4.0	3.6	111

## Spike Recovery

Two patient samples were spiked with various amounts of human pepsinogen II and assayed. The results are as follows:

Samples		Observed (ng/mL)	Expected (ng/mL)	Recovery (%)
Sample 1	8.3	-		-
6.3	11.4	8.8		94
12.5	17.6	11.9		96
25.0	6.1	18.1		97
Sample 2	9.3	-		-
6.3	14.9	6.0		102
12.5	8.3	9.1		102
25.0	11.4	15.3		97

## **Specificity**

This assay measures human pepsinogen II without any cross-reaction to human pepsinogen I.

## **WARRANTY**

This product is warranted to perform as described in its labeling and literature when used in accordance with all instructions. Epitope Diagnostics, Inc. DISCLAIMS ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, and in no event shall Epitope Diagnostics, Inc. be liable for consequential damages. Replacement of the product or refund of the purchase price is the exclusive remedy for the purchaser. This warranty gives you specific legal rights and you may have other rights, which vary from state to state.

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## TECHNICAL ASSISTANCE AND CUSTOMER SERVICE

For technical assistance or place an order, please contact Epitope Diagnostics, Inc. at (858) 693-7877 or fax to (858) 693-7678.

This product is developed and manufactured by

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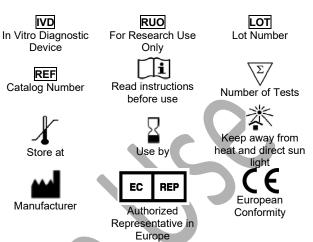
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EC REP

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## GLOSSARY OF SYMBOLS (EN 980/ISO 15223)



## **SHORT ASSAY PROCEDURE**

## 1. Manual Assay Procedure

- Add 50 µL of calibrators, controls, and samples into the designated microwells.
- Add 100 µL of <u>antibody working solution</u> into the designated microwells.
- 3. Mix, cover, and incubate at room temperature (20-25 °C) for 120 minutes.
- 4. Wash each microwell five times.
- 5. Add 100 µL of substrate to each microwell.
- Cover and incubate at room temperature (20-25 °C) for 20 minutes.
- 7. Add 100 µL of the stop solution to each microwell.
- 8. Read the absorbance at 450 nm.

#### 2. Automated Assay Procedure

- Add 50 µL of calibrators, controls, and samples into the designated microwells.
- 2. Add 100 µL of antibody working solution to each microwell
- 3. Incubate plate with initial shaking for 1 minutes and further incubation at 37°C for 60 minutes.
- 4. Wash each microwell five times.
- 5. Add 100 µL of substrate into each microwell.
- 6. Incubate plate at 37°C for 18 minutes.
- Add 100 µL of Stop Solution into each of the microwells
- 8. Read the absorbance at 450 nm.