VICGENE BIOTECHNOLOGY

ELISA Signal Amplifier
va-400

ELISA (Enzyme-Linked Immunosorbent Assay) is widely used to identify specific proteins recognized by polyclonal or monoclonal antibodies. To detect low level expressed proteins successfully, it is crucial to increase the sensitivity of detection. Vicgene's proprietary **ELISA Signal Amplifier** reagent (va-400) is designed to meet this requirement. **ELISA Signal Amplifier** strongly promote antigen and antibody interactions and offers ultra high signal-to-noise ratios, resulting in outstanding sensitivity and low backgrounds.

Highlights:

Enhances your ELISA detection signal
Boost your ELISA signal up to 10-fold.

Promotes antibody-antigen interaction
Work through a novel mechanism by increasing antibody affinity.

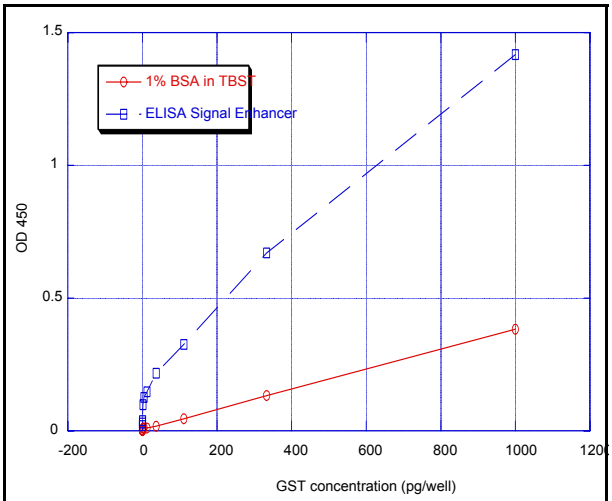
Easy to use
Ready to use reagent and no need to change your current protocol. Simply dilute your antibodies with **ELISA Signal Amplifier** reagent.

Protocol:

Follow the standard procedure to coat and block your ELISA plate.

1. Wash the plate with TBST 3x .
2. Incubate the plate with primary antiboies diluted in **ELISA Signal Amplifier** for 60 min at room temp and gently agitate.
3. Wash the plate with TBST 3x .
4. Incubate the plate with enzyme conjugated secondary antibodies diluted in **ELISA Signal Amplifier** for 60 min at room temp and gently agitate.
5. Wash the plate with TBST 5x.
6. Visualize signals with ELISA substrates, or other standard protocols.

Data:



Comparisons of ELISA Signal Amplifier with standard dilution buffer (1% BSA in TBST) in ELISA

96 well microtiter plate was coated with the indicated amounts of GST protein and blocked with 5% BSA. After thoroughly washing with TBST, the bound GST was detected by subsequent incubation with HRP conjugated anti-GST antibody diluted with either **1% BSA in TBST** or **ELISA Signal Amplifier** (va-400) and substrate reaction with colorimetric TMB.

Product:

Each bottle contains 200 ml of the reagent. Store at 4° C and stable for 12 months from the date of shipment.

Research Use:

For research use only, not for use in diagnostic