Material Provided

Format:

AL266C: 500 assay points  AL266F: 5,000 assay points
The number of assay points is based on an assay volume of 50 µL in 96- or 384-well assay plates using the kit components at the recommended concentrations.

Product Information

Kit content:
The kit contains 5 components: AlphaLISA Acceptor beads coated with an Anti-Analyte Antibody, Streptavidin-coated Donor beads, Biotinylated Anti-Analyte Antibody, lyophilized analyte and 10X AlphaLISA HiBlock Buffer.
Assay microplates (96-, 384- or 1536-well plates) must be purchased separately (see page 3 for more details).

Storage:
Store kit in the dark at +4°C. Store reconstituted analyte at -20°C.

Stability:
This product is stable for at least 12 months from the manufacturing date when stored in its original packaging and the recommended storage conditions. Note: Once reconstituted, the human IL4 analyte is stable for at least 75 days at -20°C (see page 2: Reagents and Materials).

Application:
This kit is designed for the quantitative determination of human IL4 in serum, buffered solution or cell culture medium using a homogeneous AlphaLISA assay (no wash steps).

Sensitivity:
Lower Detection Limit (LDL): 4.0 pg/mL (see page 9: Assay Performance Characteristics).

Dynamic range:
4.0 – 100,000 pg/mL (see page 9: Assay Performance Characteristics).

Quality Control
Lot to lot consistency is confirmed in an AlphaLISA assay. Maximum and minimum signals, EC₅₀ and LDL were measured on an EnVision® HTS instrument using the High sensitivity protocol described in this technical data sheet. We certify that these results meet our quality release criteria. Maximum counts may vary between bead lots and depending on assay conditions with no impact on LDL measurement.
Precautions

• Only the AlphaScreen® Donor beads are light-sensitive. All the other assay reagents can be used under normal light conditions. All Alpha assays using the Donor beads should be performed under subdued laboratory lighting (< 100 lux). Green filters (LEE 090 filters (preferred) or Roscolux filters #389 from Rosco) can be applied to light fixtures.
• All blood components and biological materials should be handled as potentially hazardous. Some analytes are from human source.
• Some analytes are present in saliva. Take precautionary measures to avoid contamination of the reagent solutions.
• The Biotinylated Anti-Analyte Antibody contains sodium azide. Contact with skin or inhalation should be avoided.

Reagents and Materials

The reagents provided in the AlphaLISA kit are listed in the table below:

<table>
<thead>
<tr>
<th>Kit components</th>
<th>AL266C (500 assay points)</th>
<th>AL266F (5 000 assay points)</th>
</tr>
</thead>
<tbody>
<tr>
<td>AlphaLISA Anti-IL4 Acceptor beads stored in PBS, 0.05% Proclin-300, pH 7.2</td>
<td>50 µL @ 5 mg/mL (1 brown tube, white cap)</td>
<td>500 µL @ 5 mg/mL (1 brown tube, white cap)</td>
</tr>
<tr>
<td>Streptavidin (SA)-coated Donor beads stored in 25 mM HEPES, 100 mM NaCl, 0.05% Proclin-300, pH 7.4</td>
<td>200 µL @ 5 mg/mL (1 brown tube, black cap)</td>
<td>2 X 1 mL @ 5 mg/mL (2 brown tubes, black caps)</td>
</tr>
<tr>
<td>Biotinylated Antibody Anti-IL4 stored in PBS, 0.1% Tween-20, 0.05% NaN₃, pH 7.4</td>
<td>50 µL @ 500 nM (1 tube, black cap)</td>
<td>500 µL @ 500 nM (1 tube, black cap)</td>
</tr>
<tr>
<td>AlphaLISA human IL4 (0.3 µg), lyophilized analyte *</td>
<td>1 tube, clear cap</td>
<td>1 tube, clear cap</td>
</tr>
<tr>
<td>AlphaLISA HiBlock Buffer (10X) **</td>
<td>10 mL, 1 small bottle</td>
<td>100 mL, 1 large bottle</td>
</tr>
</tbody>
</table>

* Reconstitute human IL4 in 100 µL Milli-Q® grade H₂O. The reconstituted analyte should be used within 60 minutes, if possible, or aliquoted into screw-capped polypropylene vials and stored at -20°C for further experiments. Avoid multiple freeze-thaw cycles. It has been demonstrated that reconstituted human IL4 is stable for at least 75 days at -20°C when stored in its original vial. One vial contains an amount of human IL4 sufficient for performing 10 standard curves. Additional vials can be ordered separately (cat # AL266S).

** Contains 250 mM HEPES, pH 7.4, 1% Casein, 10 mg/mL Dextran-500, 5% Triton X-100, 5% gelatin, 5% BSA and 0.5% Proclin-300. Extra buffer can be ordered separately (cat # AL004C: 10 mL, cat # AL004F: 100 mL). Note: 10X buffer is slightly brown. However, this does not affect the assay results.

Once diluted, 1X AlphaLISA HiBlock Buffer contains 25 mM HEPES, pH 7.4, 0.1% Casein, 1 mg/mL Dextran-500, 0.5% Triton X-100, 0.5% gelatin, 0.5% BSA and 0.05% Proclin-300.

Sodium azide should not be added to the stock reagents. High concentrations of sodium azide (> 0.001 % final in the assay) might decrease the AlphaLISA signal. Note that sodium azide from the Biotinylated Antibody stock solution will not interfere with the AlphaLISA signal (0.0001% final in the assay).
Specific additional required reagents and materials:

The following materials are recommended:

<table>
<thead>
<tr>
<th>Item</th>
<th>Suggested source</th>
<th>Catalog #</th>
</tr>
</thead>
<tbody>
<tr>
<td>TopSeal™-A Adhesive Sealing Film</td>
<td>PerkinElmer Inc.</td>
<td>6050195</td>
</tr>
<tr>
<td>EnVision®-Alpha Reader</td>
<td>PerkinElmer Inc.</td>
<td>-</td>
</tr>
</tbody>
</table>

Protocols have been optimized for 50 µL assays in white OptiPlate™-384 microplates. Other assay volumes can be used with similar protocols and identical final AlphaLISA reagent concentrations:

<table>
<thead>
<tr>
<th>Format</th>
<th># of data points</th>
<th>Total assay volume</th>
<th>Sample volume</th>
<th>AlphaLISA beads / Biotin Antibody MIX volume*</th>
<th>SA-Donor beads volume*</th>
<th>Plate recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td>AL266C</td>
<td>250</td>
<td>100 µL</td>
<td>10 µL</td>
<td>40 µL</td>
<td>50 µL</td>
<td>White OptiPlate-96 (cat # 6005290)</td>
</tr>
<tr>
<td></td>
<td>500</td>
<td>50 µL</td>
<td>5 µL</td>
<td>20 µL</td>
<td>25 µL</td>
<td>White ½ AreaPlate-96 (cat # 6005560) White OptiPlate-384 (cat # 6007290) Light gray AlphaPlate™-384 (cat # 6005350)</td>
</tr>
<tr>
<td></td>
<td>1 250</td>
<td>20 µL</td>
<td>2 µL</td>
<td>8 µL</td>
<td>10 µL</td>
<td>Light gray AlphaPlate-384 (cat # 6005350) ProxiPlate™-384 Plus (cat # 6008280) White OptiPlate-384 (cat # 6007290)</td>
</tr>
<tr>
<td></td>
<td>2 500</td>
<td>10 µL</td>
<td>1 µL</td>
<td>4 µL</td>
<td>5 µL</td>
<td>Light gray AlphaPlate-1536 (cat # 6004350)</td>
</tr>
<tr>
<td>AL266F</td>
<td>5 000</td>
<td>50 µL</td>
<td>5 µL</td>
<td>20 µL</td>
<td>25 µL</td>
<td>White ½ AreaPlate-96 (cat # 6005560) White OptiPlate-384 (cat # 6007290) Light gray AlphaPlate-384 (cat # 6005350)</td>
</tr>
<tr>
<td></td>
<td>12 500</td>
<td>20 µL</td>
<td>2 µL</td>
<td>8 µL</td>
<td>10 µL</td>
<td>Light gray AlphaPlate-384 (cat # 6005350) ProxiPlate-384 Plus (cat # 6008280) White OptiPlate-384 (cat # 6007290)</td>
</tr>
<tr>
<td></td>
<td>25 000</td>
<td>10 µL</td>
<td>1 µL</td>
<td>4 µL</td>
<td>5 µL</td>
<td>Light gray AlphaPlate-1536 (cat # 6004350)</td>
</tr>
</tbody>
</table>

* Volumes based on the Quick protocol.
**Analyte of Interest**

Human Interleukin 4 (IL4), also known as B Cell Stimulatory Factor 1, is an anti-inflammatory glycoprotein of 129 amino acids. It is produced by a variety of cells including Th2, mast cells, and basophils. Via binding to type 1 IL4 receptor, IL4 acts on hematopoietic cells and promotes class switching to IgE. A high level of IL4 has been associated with an increased production of IgE and allergy. This cytokine suppresses IFN-γ and IL-8 production. It inhibits the production of inflammatory cytokines (IL1, IL6, and TNFα). In vivo, injection of IL4 has been shown to protect against experimental arthritis and immune complex-induced lung inflammation in rats. It could potentially be used in the treatment of chronic inflammatory diseases. IL4 may also play a role in the pathogenesis of chronic lymphocytic leukemia.

**Description of the AlphaLISA Assay**

AlphaLISA technology allows the detection of molecules of interest in buffer, cell culture media, serum and plasma in a highly sensitive, quantitative, reproducible and user-friendly mode. In an AlphaLISA assay, a Biotinylated Anti-Analyte Antibody binds to the Streptavidin-coated Donor beads while another Anti-Analyte Antibody is conjugated to AlphaLISA Acceptor beads. In the presence of the analyte, the beads come into close proximity. The excitation of the Donor beads provokes the release of singlet oxygen molecules that triggers a cascade of energy transfer in the Acceptor beads, resulting in a sharp peak of light emission at 615 nm (see figure below).
Recommendations

General recommendations:

- The volume indicated on each tube is guaranteed for single pipetting. Multiple pipetting of the reagents may reduce the theoretical amount left in the tube. To minimize loss when pipetting beads, it is preferable not to prewet the tip.

- Centrifuge all tubes (including lyophilized analyte) before use to improve recovery of content (2 000 g, 10-15 sec). Resuspend all reagents by vortexing before use.

- Use Milli-Q® grade H₂O (18 MΩ•cm) to dilute 10X AlphaLISA HiBlock Buffer and to reconstitute the lyophilized analyte.

- When diluting the standard or samples, change tips between each standard or sample dilution. When loading reagents in the assay microplate, change tips between each standard or sample addition and after each set of reagents.

- When reagents are added in the microplate, make sure the liquids are at the bottom of the well.

- Small volumes may be prone to evaporation. It is recommended to cover microplates with TopSeal-A Adhesive Sealing Films to reduce evaporation during incubation. Microplates can be read with the TopSeal-A Film.

- The AlphaLISA signal is detected with an EnVision Multilabel Reader equipped with the ALPHA option using the AlphaScreen standard settings (e.g. Total Measurement Time: 550 ms, Laser 680 nm Excitation Time: 180 ms, Mirror: D640as, Emission Filter: M570w, Center Wavelength 570 nm, Bandwidth 100 nm, Transmittance 75%).

- AlphaLISA signal will vary with temperature and incubation time. For consistent results, identical incubation times and temperature should be used for each plate.

- The standard curves shown in this technical data sheet are provided for information only. A standard curve must be generated for each experiment. The standard curve should be performed in a similar matrix as the samples (e.g. FBS for serum samples).

Specific recommendations:

- AlphaLISA assays can be performed in cell culture medium with or without phenol red, with the following recommendations: if possible, avoid biotin-containing medium (e.g. RPMI medium) as lower counts and lower sensitivity are expected. Add at least 1% FBS or 0.1% BSA to cell culture medium.

- When analyzing serum samples, perform the standard curve in FBS and dilute the samples at least 2-fold with FBS before testing. Serum should not exceed 10% of final assay volume (i.e. 5 µL serum sample in 50 µL final assay volume).

Protocols

The two protocols described below are recommended when generating one standard curve in a 50 µL final assay volume (48 wells, triplicate determinations). The protocols also include testing samples in 452 wells. If a different amount of samples are tested, the volumes of all reagents have to be adjusted accordingly. These calculations do not include excess reagent to account for losses during transfer of solutions or dead volumes.

The standard dilution protocol is provided for information only. As needed, the number of replicates or the range of concentrations covered can be modified.

Use of four background points in triplicate (12 wells) is recommended when LDL is calculated. One background point in triplicate (3 wells) can be used when LDL is not calculated.
Protocol 1: Quick protocol (2 incubation steps) – Dilution of standards in 1X AlphaLISA HiBlock Buffer or cell culture medium

Protocol 2: High sensitivity protocol (3 incubation steps) – Dilution of standards in 1X AlphaLISA HiBlock Buffer, cell culture medium or FBS

IMPORTANT: PLEASE READ THE RECOMMENDATIONS ABOVE BEFORE USE

Common Steps for Preparing Reagents (Protocols 1 & 2)

*If a different amount of samples are tested, the volumes of all reagents have to be adjusted accordingly.*

1) Preparation of 1X AlphaLISA HiBlock Buffer:
Add 2.5 mL of 10X AlphaLISA HiBlock Buffer to 22.5 mL H₂O.

2) Preparation of human IL4 analyte standard dilutions:
Reconstitute lyophilized human IL4 (0.3 µg) in 100 µL H₂O.
Prepare standard dilutions as follows (change tip between each standard dilution):

<table>
<thead>
<tr>
<th>Tube</th>
<th>Vol. of human IL4 (µL)</th>
<th>Vol. of diluent (µL) *</th>
<th>[human IL4] in standard curve (g/mL in 5 µL)</th>
<th>(pg/mL in 5 µL)</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>10 µL of reconstituted human IL4</td>
<td>90</td>
<td>3E-07</td>
<td>300 000</td>
</tr>
<tr>
<td>B</td>
<td>60 µL of tube A</td>
<td>120</td>
<td>1E-07</td>
<td>100 000</td>
</tr>
<tr>
<td>C</td>
<td>60 µL of tube B</td>
<td>140</td>
<td>3E-08</td>
<td>30 000</td>
</tr>
<tr>
<td>D</td>
<td>60 µL of tube C</td>
<td>120</td>
<td>1E-08</td>
<td>10 000</td>
</tr>
<tr>
<td>E</td>
<td>60 µL of tube D</td>
<td>140</td>
<td>3E-09</td>
<td>3 000</td>
</tr>
<tr>
<td>F</td>
<td>60 µL of tube E</td>
<td>120</td>
<td>1E-09</td>
<td>1 000</td>
</tr>
<tr>
<td>G</td>
<td>60 µL of tube F</td>
<td>140</td>
<td>3E-10</td>
<td>300</td>
</tr>
<tr>
<td>H</td>
<td>60 µL of tube G</td>
<td>120</td>
<td>1E-10</td>
<td>100</td>
</tr>
<tr>
<td>I</td>
<td>60 µL of tube H</td>
<td>140</td>
<td>3E-11</td>
<td>30</td>
</tr>
<tr>
<td>J</td>
<td>60 µL of tube I</td>
<td>120</td>
<td>1E-11</td>
<td>10</td>
</tr>
<tr>
<td>K</td>
<td>60 µL of tube J</td>
<td>140</td>
<td>3E-12</td>
<td>3</td>
</tr>
<tr>
<td>L</td>
<td>60 µL of tube K</td>
<td>120</td>
<td>1E-12</td>
<td>1</td>
</tr>
<tr>
<td>M **(background)</td>
<td>0</td>
<td>100</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>N **(background)</td>
<td>0</td>
<td>100</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>O **(background)</td>
<td>0</td>
<td>100</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>P **(background)</td>
<td>0</td>
<td>100</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

* Dilute standards in diluent (e.g. 1X AlphaLISA HiBlock Buffer, cell culture medium or FBS).
At low concentrations of analyte, a significant amount of analyte can bind to the vial. Therefore, load the analyte standard dilutions in the assay microplate within 60 minutes of preparation.

** Four background points in triplicate (12 wells) are used when LDL is calculated. If LDL does not need to be calculated, one background point in triplicate can be used (3 wells).
Protocol 1: Quick Protocol (2 Incubation Steps)

The protocol described below is for one standard curve (48 wells) and samples (452 wells). Dilution of standards can be done in 1X AlphaLISA HiBlock Buffer or cell culture medium.

*If a different amount of samples are tested, the volumes of all reagents have to be adjusted accordingly.*

3) Preparation of 2.5X AlphaLISA Anti-IL4 Acceptor beads + Biotinylated Antibody Anti-IL4 MIX (25 µg/mL / 2.5 nM): Add 50 µL of 5 mg/mL AlphaLISA Anti-IL4 Acceptor beads and 50 µL of 500 nM Biotinylated Antibody Anti-IL4 to 9 900 µL of 1X AlphaLISA HiBlock Buffer. Prepare just before use.

4) Preparation of 2X Streptavidin (SA) Donor beads (80 µg/mL): Keep the beads under subdued laboratory lighting. Add 200 µL of 5 mg/mL SA-Donor beads to 12 300 µL of 1X AlphaLISA HiBlock Buffer.

5) Samples: If applicable, dilute samples to be tested in diluent (e.g. 1X AlphaLISA HiBlock Buffer or cell culture medium).

6) In a 96- or 384-well microplate:

   Add 5 µL of each analyte standard dilution or 5 µL of sample

   Add 20 µL of a 2.5X MIX (freshly prepared)
   AlphaLISA Anti-Analyte Acceptor beads (10 µg/mL final) and Biotinylated Antibody Anti-Analyte (1 nM final)
   Incubate 60 minutes at 23°C

   Add 25 µL of 2X SA-Donor beads (40 µg/mL final)
   Incubate 30 minutes at 23°C in the dark

   Read using EnVision-Alpha Reader

Protocol 1 - Typical results in 1X AlphaLISA HiBlock Buffer

Log-Log scale:

Log [human IL4] (g/mL)  
AlphaLISA Signal (counts)

Linear-Linear scale (linear range):

AlphaLISA Signal (counts)  
[r² = 0.9946]

The data was generated using a white Optiplate-384 microplate and an EnVision-Alpha Reader 2102.
Protocol 2: High Sensitivity Protocol (3 Incubation Steps)

The protocol described below is for one standard curve (48 wells) and samples (452 wells). Dilution of standards can be done in 1X AlphaLISA HiBlock Buffer, cell culture medium or FBS.

*If a different amount of samples are tested, the volumes of all reagents have to be adjusted accordingly.*

3) **Preparation of 5X AlphaLISA Anti-IL4 Acceptor beads (50 µg/mL):**
   Add 50 µL of 5 mg/mL AlphaLISA Anti-IL4 Acceptor beads to 4 950 µL of 1X AlphaLISA HiBlock Buffer.

4) **Preparation of 5X Biotinylated Antibody Anti-IL4 (5 nM):**
   Add 50 µL of 500 nM Biotinylated Antibody Anti-IL4 to 4 950 µL of 1X AlphaLISA HiBlock Buffer.

5) **Preparation of 2X Streptavidin (SA) Donor beads (80 µg/mL):** Keep the beads under subdued laboratory lighting.
   Add 200 µL of 5 mg/mL SA-Donor beads to 12 300 µL of 1X AlphaLISA HiBlock Buffer.

6) **Samples:** If applicable, dilute samples to be tested in diluent (e.g. 1X AlphaLISA HiBlock Buffer, cell culture medium or FBS).

7) **In a 96- or 384-well microplate:**

   - **Add 5 µL of each analyte standard dilution or 5 µL of sample**
   - **Add 10 µL of 5X Anti-Analyte Acceptor beads (10 µg/mL final)**
     Incubate 30 minutes at 23˚C
   - **Add 10 µL of 5X Biotinylated Antibody Anti-analyte (1 nM final)**
     Incubate 60 minutes at 23˚C
   - **Add 25 µL of 2X SA-Donor beads (40 µg/mL final)**
     Incubate 30 minutes at 23˚C in the dark
   - **Read using EnVision-Alpha Reader**

Protocol 2 - Typical results in 1X AlphaLISA HiBlock Buffer

**Log-Log scale:**

- LDL = 4.2 pg/mL

**Linear-Linear scale (linear range):**

\[ r^2 = 0.9981 \]

The data was generated using a white Optiplate-384 microplate and an EnVision-Alpha Reader 2102.
Protocol 2 - Typical results in FBS

The data was generated using a white Optiplate-384 microplate and an EnVision-Alpha Reader 2102.

Protocols 1 & 2 - Interpreting the Data

- Calculate the average count value for the background wells.
- Generate a standard curve by plotting the AlphaLISA counts versus the concentration of analyte. A log scale can be used for either or both axes. No additional data transformation is required.
- Analyze data according to a nonlinear regression using the 4-parameter logistic equation (sigmoidal dose-response curve with variable slope) and a 1/Y^2 data weighting (the values at maximal concentrations of analyte after the hook point should be removed for correct analysis).
- The LDL is calculated by interpolating the average background counts (12 wells without analyte) + 3 x standard deviation value (average background counts + (3xSD)) on the standard curve.
- Read from the standard curve the concentration of analyte contained in the samples.
- If samples have been diluted, the concentration read from the standard curve must be multiplied by the dilution factor.

Assay Performance Characteristics

AlphaLISA assay performance described below was determined using the High sensitivity protocol.

Sensitivity:

The LDL was calculated as described above. This value corresponds to the lowest concentration of analyte that can be detected in a volume of 5 µL using the recommended assay conditions.

- Average LDL is 4.0 pg/mL * (using 5 µL of analyte in AlphaLISA HiBlock Buffer) (mean of 18 independent experiments).
- Average LDL is 6.2 pg/mL (using 5 µL of analyte in FBS) (mean of 6 independent experiments).

* Note that LDL can be decreased (i.e. sensitivity increased) by increasing the volume of analyte in the assay (e.g. use 10 µL of analyte in a final assay volume of 50 µL).

Dynamic range: 4.0 – 100 000 pg/mL (in AlphaLISA HiBlock Buffer)
Assay precision:

The following assay precision data were calculated from a total of 18 assays. Two operators performed three independent assays using three different kit lots. Each assay consisted of one standard curve and three control samples of high (A), medium (B) and low (C) concentration, assayed in triplicate. The assays were performed in 384-well format using AlphaLISA HiBlock Buffer.

• Intra-assay precision:

The intra-assay precision was determined using a total of 18 independent determinations in triplicate for each control sample.

<table>
<thead>
<tr>
<th>Sample</th>
<th>Mean (pg/mL)</th>
<th>SD (pg/mL)</th>
<th>% CV (n = 18)</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>3353</td>
<td>195</td>
<td>5.8</td>
</tr>
<tr>
<td>B</td>
<td>352</td>
<td>12.9</td>
<td>3.6</td>
</tr>
<tr>
<td>C</td>
<td>33</td>
<td>2.0</td>
<td>6.1</td>
</tr>
</tbody>
</table>

• Inter-assay precision:

The inter-assay precision was determined using a total of 6 independent determinations with 9 measurements for each control sample.

<table>
<thead>
<tr>
<th>Sample</th>
<th>Mean (pg/mL)</th>
<th>SD (pg/mL)</th>
<th>% CV (n = 6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>3364</td>
<td>315</td>
<td>9.4</td>
</tr>
<tr>
<td>B</td>
<td>353</td>
<td>39.6</td>
<td>11.2</td>
</tr>
<tr>
<td>C</td>
<td>33</td>
<td>3.9</td>
<td>11.7</td>
</tr>
</tbody>
</table>

Human serum experiments:

In the following experiments, FBS was used as diluent in both the standard curve and dilution of samples. Additionally, all human serum samples tested were pre-diluted 2-fold with the diluent before being processed.

• Dilutional linearity:

The dilutional linearity was determined by serial dilutions of a pool of human sera spiked with 10 ng/mL of human IL4. The recovery was calculated using the 2-fold diluted sample as the 100% value. The average recovery from two independent measurements is reported.

<table>
<thead>
<tr>
<th>Dilution Factor</th>
<th>% Recovery</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>100</td>
</tr>
<tr>
<td>2</td>
<td>91</td>
</tr>
<tr>
<td>4</td>
<td>95</td>
</tr>
<tr>
<td>8</td>
<td>110</td>
</tr>
<tr>
<td>16</td>
<td>105</td>
</tr>
</tbody>
</table>
• **Recovery:**

Three known concentrations of analyte were spiked in a pool of human sera. All samples, including non-spiked serum, were measured in the assay. Values calculated for spiked samples reflect subtraction of the endogenous (no-spike) value. The % in serum versus expected (control spike value) was calculated for each concentration. The average recovery from two independent measurements is reported.

<table>
<thead>
<tr>
<th>Spike (ng/mL)</th>
<th>% Recovery</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>84</td>
</tr>
<tr>
<td>0.3</td>
<td>82</td>
</tr>
<tr>
<td>0.03</td>
<td>75</td>
</tr>
</tbody>
</table>

• **Serum sample values:**

Twenty frozen human serum samples were analyzed using the above stated conditions. All the samples had undetectable levels (< LDL) of IL4.

**Calibration:**

Human Interleukin-4 (NIBSC/WHO First International Standard (code 88/656)) was tested using this kit: 1 unit of Standard corresponds to 103 pg of AlphaLISA IL4.

**Specificity:**

Cross-reactivity of the AlphaLISA IL4 Kit was tested using the following proteins at 0.3 µg/mL in AlphaLISA HiBlock Buffer.

<table>
<thead>
<tr>
<th>Protein</th>
<th>% Cross-reactivity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mouse IL4</td>
<td>0</td>
</tr>
<tr>
<td>Rat IL4</td>
<td>0</td>
</tr>
</tbody>
</table>

The possible interference from human IL4 soluble Receptor α (IL4 sRα) was investigated. The human IL4 was kept at a constant concentration (EC50 value of the standard curve). The binding protein was titrated into the assay. No interference was observed up to 0.02 µg/mL.

This product is not for resale or distribution except by authorized distributors.

**LIMITED WARRANTY:** PerkinElmer BioSignal Inc. warrants that, at the time of shipment, the products sold by it are free from defects in material and workmanship and conform to specifications which accompany the product. PerkinElmer BioSignal Inc. makes no other warranty, express or implied with respect to the products, including any warranty of merchantability or fitness for any particular purpose. Notification of any breach of warranty must be made within 60 days of receipt unless otherwise provided in writing by PerkinElmer BioSignal Inc. No claim shall be honored if the customer fails to notify PerkinElmer BioSignal Inc. within the period specified. The sole and exclusive remedy of the customer for any liability of PerkinElmer BioSignal Inc. of any kind including liability based upon warranty (express or implied whether contained herein or elsewhere), strict liability contract or otherwise is limited to the replacement of the goods or the refunds of the invoice price of goods. PerkinElmer BioSignal Inc. shall not in any case be liable for special, incidental or consequential damages of any kind.