

Protocol Investigator:



Immunohistochemical (IHC) Marker Template For Integral Markers in Clinical Trials

This is a template to describe the analytical and clinical performance of an assay that is essential for performance of a trial. It will be used to assess whether assays are ready for use in a trial by Disease Steering Committees and CTEP. The FDA may also use it to evaluate integral assays and diagnostics for their pre-IDE evaluation. Not all parameters may be known a priori. Please enter as much information as you can and N/A for not available or applicable where appropriate.

This template requires detailed information that may be known only by laboratorians, scientists who work in clinical laboratories, and should be collaborating closely with clinical trialists. Please be sure to collect the appropriate responses before filling out this form. The template has the following sections with information needed from trialists and laboratorians:

- 1. Assay, Patient and Specimen Information Trialists and Laboratorians
- 2. Primary Antibody Characteristics Laboratorians
- 3. Design of Immunohistochemical Assay Laboratorians
- 4. Assay Performance Laboratorians
- 5. <u>Laboratory Information</u> Trialists and Laboratorians



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Section 1. Assay, Patient and Specimen Information

A. Name of marker (Please use HUGO gene or protein name for molecular marker or the Atlas for Genetics in Hematology and Oncology for cytogenetic or FISH markers)

HUGO Site: http://www.genenames.org/		
Atlas Site: http://atlasgeneticsoncology.org/index.html		
B. How will assay and its marker be used in clinical trial?		
Integral Marker Integrated Marker Research Marker		
 Integral markers are required for the trial to proceed (e.g., patient eligibility, assignment to treatment, stratification, risk classifier or medical decision-making - often requires performance in a CLIA laboratory). 		
 Integrated markers are performed on all or a statistical subset of patients but are not used for medical decision-making. 		
 Research markers are all other assays and commonly referred to as correlative research. For other definitions, please see References at end of form. 		
B1. Assay Purpose		
C. Assay type		
D. Will assay be performed in a Central Reference CLIA lab, multiple CLIA-certified labs, or research labs?		
Central Reference CLIA Lab Multiple CLIA Labs Research Labs		
E. Anatomic source of specimens (organ site)		
E1. Type of Specimen		
E2. Tissue collection		

F. Patient conditions or co-morbidities that may affect assay and must be noted:



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G. Preanalytic Specimen Requirements

G1. Maximum Warm ischemia time (=time from cutting blood supply to removal from body) allowed in minutes if known:
G2. Maximum Cold ischemia time (=time until specimen fixed/frozen after removal from body) allowed in minutes if known:
G3. Type of stabilization of Specimen: fixed frozen both
G3a If fixed, what fixation buffer to be used?
G3b. If Other fixative, what is it? (free text)
G3c What is shortest fixation time allowed (Hours or fraction thereof)
G3d What is longest fixation time allowed (Hours or fraction thereof)
G3e If frozen, how will specimen be frozen:
H. How will specimens be stored?
I. Specimen size to be stored length width height in cm
J. Tissue section thickness on slide in microns
K. Antigen retrieval solution/procedures



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Section 2. Primary Antibody Characteristics

A. Source of primary antibody (purchased from xxx as lot # xxx, or generated in house, etc.)
B. What was the immunogen (e.g., peptide, oligosaccharide, phosphorylated protein, other)? Protein Peptide Oligosaccharide Phosphorylated Protein Other B1. Please describe if Other
C. Species of immunogen (e.g., human or mouse gene product)
D. Are there specific isoform(s) of the immunogen that are recognized (e.g., one or all isoforms or unknown)? One Isoform All isoforms Unknown
E. Preparation of immunogen (e.g., purified protein, recombinant, synthetic peptide or oligosaccharide) purified protein recombinant synthetic peptide oligosaccharide
F. Other attributes of primary antibody (e.g., mono- or polyclonal) Monoclonal Polyclonal
F1. What species:
F1a. If other species, what is it? Include chicken
G. How was the antibody specificity demonstrated?
G1. Please specify if Other



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H2. A	re there band(s)	at the expected ma	ass(es) on Wester	n blot?
	Yes	O No	Unknown	
H	2a. If not, please	explain		
H3. Is	immunostainine	a abolished in kno	ck out/knock-dow	n cells or with epitope-absorbed
antib	_	, abonstica in know		tens of their epicope assorbea
(Yes	No	Unknown	
H4. Is	_		_ `	d or blocked with epitope?
(Yes	O No	Unknown	
I. What is	the targeted or	gan/tissue/cell (e.g	J., normal melano	cytes? breast ductal carcinoma)?
I1. W	hat non-targeted	d organ/tissue/cell	is also stained?	
J. Have aı IHC?	ny cross-reactive	proteins or peptic	des been identifie	d that may confound interpretation of
inc:	Yes	No	Unknown	
J1. If	yes and known, v	vhat are they?		
K. Is antig	gen stable when t	the period betwee	n tissue sectionin	g and staining is
\bigcirc	<7 days) 7-30 days (>30 days	Not Known



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Section 3. Design of Immunohistochemical Assay

A. Assay Design (Complete assay details are needed if multiple labs will perform the assay). A1. Describe the platform of the assay, e.g. instrument (manufacturer, model, UDI number if				
known) A1a. Platform				
A1k	A1b. Manufacturer			
A10	. Model Number			
A10	d. UDI Number (Univ	ersal Device Num	ber)	
A16	e. Is the platform cle Yes	eared or approved No	by the FDA Unknown	
A2. Is th	ere an SOP? Yes	O No	Unknown	
A2a	a. Is the SOP attache Yes	ed as an Appendix? No	? Unknown	
B. Type of Immunoassay B1. Is the assay qualitative, semiquantitative or quantitative Qualitative Semiquantitative Quantitative				
B1a	ı. If an image analyz	er is used, what m	anufacturer and model was used?	
B1k	o. Is it cleared or app Yes	oroved by the FDA No	Unknown	
B2. Natu	ire of reporter signa	al		
B3. Assay method (e.g. direct, indirect, 3-step immunoperoxidase assay) Direct				
If ot	her, please specify			
B3a. What secondary reagent(s) is used for the indirect or 3-step assay				
C. Are there	positive and negati Yes	ve controls for the	e assay Unknown	
C1. If the	ere are controls, wha	at are they?		



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D. Specimen size – What is the smallest specimen that can be analyzed by the assay in cm?		
D1. Is the minimum specimen size determined by a particular characteristic of the tiss Yes No Unknown D1a. If so, is it Number of cell nuclei Nuclear area Cytoplasmic area		
D1b. Please specify if Other		



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Section 4. <u>Assay Performance</u>

	etails regarding how the ana 1. What statistical test(s) wer	•	e the assay results.
A2	2. How was a clinically releva	nt threshold sel	ected?
A3. V	Nere results obtained on retr Sample S		spective data sets?
	A3a. Training sets or other	validation metho	d
A4. W	/hat is the cut-off?		
A5. H	ow well was the cut-off valid	ated before usin	g it in these trials?
	/ere assay conditions standa nd/or stainers)?	rdized to minimi	ze variance, e.g., automated tissue processors
aı	Yes	No	Unknown
	A6a. If yes, what tissue proc	essor/stainer wa	s used?
	calibrators or controls were coluded on each slide or inter		stained separately with each batch of slides,
	A7a. Were calibrators/con	trols used? No	Unknown
	A7b. Were the controls state Yes	ined as separate No	slides with slides? Unknown
OR	A7c. Were the controls incl Yes	uded in each slid No	e and stained as internal controls? Unknown
OR	A7d. Were the controls not	stained in each	staining run? Unknown



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B. Reproducibility of assay
B1. Was reproducibility assessed? Yes No Unknown
B1a. If yes, please describe the specimen type(s) used
B1b. If not, please explain
B2. How many replicates were done?
B3. What is the intra-lab reproducibility (%CV)?
B4. What is the inter-lab reproducibility (same specimens, different lab, number of different technicians)?
B4a. How many on the same specimens?
B4b. How many different labs?
B4c. How many different technicians?
B4d. What types of specimens (e.g., tissue sections, TMA)?
B4e. Over how many different days?
B4f. How many readers?
B5. What is the agreement between readers?
B5a. How are differences resolved?



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C. Image Measurement

C	1. What strategy was used to select the fields to be analyzed?
c	2. How was a threshold to distinguish positive from negative determined?
c	3. How were the cells of interest distinguished from other cells?
c	4. Was reference material used to generate a standard curve? Yes No Unknown
	C4a. What was the reference material?
	C4b. Has it been cleared by the FDA? Yes No Unknown
	ssay Discrimination 11. What is the accuracy of the assay for detecting the analyte?
	2. How are staining and tissue artifacts identified and handled (especially if image analysis is sed)?



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Section 5. Laboratory Information

A. Is the lab a research or clinical lab? Research	Clinical	
B. Does the lab meet GLP standards Yes No	Unknown	
C. What is the training and experience of the Technicians/Operators?		

References

Section Ref # Citation

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Appendix to CLSI document IL-28a

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