Research use only. Not for use in diagnostic procedures.

Fluorescent Imaging Agent

IVISense™ GFR 680 Fluorescent Probe

Product Number: NEV30000

DESCRIPTION

IVISense™ GFR 680 Fluorescent Probe is a near infrared fluorescent inulin-based agent that, in combination with fluorescence tomography heart imaging, enables quantitative assessment of renal Glomerular Filtration Rate, as an indicator of renal toxicity or injury.

MATERIAL

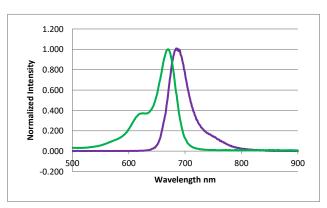
Each vial contains 24 nmol of IVISense™ GFR 680 Fluorescent Probe in dry solid form. IVISense™ GFR 680 Fluorescent Probe has been filtered through a 0.2 µm filter prior to drying. Reconstitute IVISense™ GFR 680 Fluorescent Probe with 1.2 mL of 1X PBS before administering to animals. The packaged material provides sufficient reagent for imaging approximately 10 mice (weighing ~25 grams each) when using the recommended dose of 2 nmol (in 100 µL of PBS) of IVISense™ GFR 680 Fluorescent Probe per mouse.

STORAGE & HANDLING

- Upon receipt, IVISense™ GFR 680 Fluorescent Probe should be IMMEDIATELY STORED AT -2-8 °C AND PROTECTED FROM LIGHT.
- When stored and handled properly, IVISense[™] GFR 680 Fluorescent Probe is stable for up to 3 months from the date of shipment.
- Once reconstituted, the PBS solution is stable up to 14 days when stored at 2-8 °C.

| Property | Specification |
|--------------------------------------|----------------------------|
| MW | ~6,000 g mol ⁻¹ |
| Fluorescence ¹ • Emission | 690 nm |
| Absorbance ¹ | 670 nm |
| Purity ² | >90% |
| Appearance | Blue solid |

- 1. Absorbance and fluorescence maxima in PBS.
- As determined by RP-HPLC and measuring absorbance at 680 nm.



IN VIVO IMAGING & APPLICATIONS

- The recommended procedure for in vivo imaging with IVISense™ GFR 680 Fluorescent Probe is administration via tail vein injection and imaging the chest area Immediately at various time points (1, 5, 15, 30, and 45 min) following injection.
- The blood half-lives of IVISenseTM GFR 680 Fluorescent Probe in normal mice are approximately 0.5 and 8.0 min, respectively, for $T_{1/2}$ Alpha and $T_{1/2}$ Beta. Repeat injection and heart imaging may be performed as early as 24 hours for longitudinal studies, although there is longer term retention in the kidneys.

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