

Human Adrenoceptor Alpha 1B Reporter Assay System (ADRA1B)

384-well Format Assays Product # IB31102

Technical Manual (version 8.0)

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Human ADRA1B Reporter Assay System 384-well Format Assays

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I. Description

Background

The adrenoreceptors (*a.k.a.* adrenergic receptors) mediate the action of the sympathetic nervous system and are activated in response to "fight-or-flight" signals. They are divided into three types, adrenoreceptor $\alpha 1$ -, $\alpha 2$ -, and β . Each type is further composed of three subtypes resulting in 9 different types ($\alpha 1A$, $\alpha 1B$, $\alpha 1D$, $\alpha 2A$, $\alpha 2B$, $\alpha 2C$, $\beta 1$, $\beta 2$, and $\beta 3$)¹.

Adrenoreceptors belong to the G-Protein-coupled receptor (GPCR) family. They all display the characteristic seven transmembrane helices, the extracellular loops which contribute to ligand binding, and the intracellular carboxy tail that associates with trimeric G proteins. All nine types of adrenoreceptors are activated by the same endogenous catecholamines (epinephrine and norepinephrine); however, the specificity of their responses depends on the G-proteins and effectors systems they associate with in a tissue and time specific manner¹.

Adrenoreceptor alpha1B (**ADRA1B**) signals through the $G\alpha_{q/11}$ family of G proteins². Upon binding to a catecholamine, ADRA1B undergoes a conformational change that triggers the activation of $G\alpha_{q/11}$ proteins *via* an exchange of GDP with GTP, followed by the activation of phospholipase C, the release of inositol triphosphate (IP3) which binds to its receptors on the endoplasmic reticulum and triggers the release of calcium and activation of the protein kinase C.

ADRA1B is expressed in a variety of tissues such as blood vessels, heart, brain, and immune cells^{3,4}. ADRA1B plays a role in the modulation of blood pressure ³, in the regulation of glucose metabolism, lipid metabolism, and leptin secretion^{5,6}, in male fertility⁷ and in cancer⁸. In addition, ARA1B is of interest in the development of therapeutics for the treatment of ocular vascular diseases⁹.

The Assay System

This assay utilizes proprietary human cells that have been engineered to provide constitutive expression of the **Human Adrenoreceptor Alpha 1B (ADRA1B)**.

ADRA1B activation of the PLC pathways leads to an increase in intracellular calcium and the concomitant activation of calcineurin, a calcium-dependent phosphatase. Ca^{+2} -calcineurin acts to dephosphorylate and to activate the transcription factor NFAT¹⁰. ADRA1B activation of the Ca⁺²-calcineurin > NFAT cascade is the signal transduction pathway exploited by the reporter cells provided in this kit.

INDIGO's ADRA1B Reporter Cells contain an engineered luciferase reporter gene functionally linked to tandem consensus sequences of NFAT genetic response elements positioned upstream of a minimal promoter. Activated NFAT binds to these response elements to seed the formation of a complete transcription complex that drives Luciferase gene expression. Quantifying relative changes in luciferase activity in the treated reporter cells relative to the untreated cells provides a sensitive surrogate measure of drug-induced changes in ADRA1B activity. The principal application of this reporter assay is in the screening of test samples to quantify functional interactions, either activating or inhibitory, that they may exert against ADRA1B, or the coupled Ca⁺²-calcineurin / NFAT signal transduction pathway.

INDIGO's Reporter Cells are transiently transfected and prepared as frozen stocks using a proprietary **CryoMite**TM process. This cryo-preservation method allows for the immediate dispensing of healthy, division-competent reporter cells into assay plates. There is no need for intermediate treatment steps such as spin-and-rinse of cells, viability determinations or cell titer adjustments prior to assay setup.

INDIGO's assay kits provide the convenience of an all-inclusive cell-based assay system. In addition to ADRA1B Reporter Cells, provided are two optimized media for use in recovering the cryopreserved cells and for diluting test samples, the reference activator L-Phenylephrine, Luciferase Detection Reagent, and a cell culture-ready assay plate.

The Assay Chemistry

INDIGO's nuclear receptor assay kits capitalize on the extremely low background, highsensitivity, and broad linear dynamic range of bio-luminescence reporter gene technology.

Reporter Cells incorporate the cDNA encoding beetle luciferase, a 62 kD protein originating from the North American firefly (*Photinus pyralis*). Luciferase catalyzes the mono-oxidation of D-luciferin in a Mg^{+2} -dependent reaction that consumes O_2 and ATP as co-substrates to yield oxyluciferin, AMP, PP_i, CO₂, and photon emission. Luminescence intensity of the reaction is quantified using a luminometer and is reported in terms of Relative Light Units (RLU's).

INDIGO's Nuclear Receptor Assays feature a luciferase detection reagent specially formulated to provide stable light emission between 30 and 100+ minutes after initiating the luciferase reaction. Incorporating a 30-minute reaction-rest period ensures that light emission profiles attain maximal stability, thereby allowing assay plates to be processed in batch. By doing so, the signal output from all sample wells, from one plate to the next, may be directly compared within an experimental set.

• Considerations for the Preparation and Automated Dispensing of Test compounds •

Small molecule compounds are typically solvated at high concentration (ideally 1,000xconcentrated) in DMSO and stored frozen as master stocks. For **384-well format assays** the user will choose to dilute master stocks using one of two alternative methods. The selection of dispensing method to be used will be dictated by the type of instrument that will be used. This Technical Manual provides detailed protocols for each of these two alternative methods:

a.) Assay setups in which a conventional tip-based instrument is used to dispense μL volumes of test compounds into assay wells (protocol is presented in black text). Use Compound Screening Medium (CSM) to generate a series of 2x-concentration test compound treatment media, as described in *Step 2a* of the Assay Protocol. The final concentration of DMSO carried over into assay reactions should never exceed 0.4%; strive to use 1,000x-concentrated stocks when they are prepared in DMSO.

NOTE: CSM is formulated to help stabilize hydrophobic test compounds in the aqueous environment of the assay mixture. Nonetheless, high concentrations of extremely hydrophobic test compounds diluted in CSM may lack long-term stability and/or solubility, especially if further stored at low temperatures. Hence, it is recommended that test compound dilutions are prepared in CSM immediately prior to assay setup and are considered to be 'single-use' reagents.

and,

b.) Acoustic transfer or Pin-based dispensing of nL volumes of test compounds into assay wells (protocol is presented in blue text). Use DMSO to make a series of 1,000x-concentrated test compound stocks that correspond to each desired final assay concentrations, as described in *Step 2b* of the Assay Protocol.

• Considerations for Automated Dispensing of Other Assay Reagents •

When dispensing into a small number of assay plates, first carefully consider the dead volume requirement of your tip-based dispensing instrument before committing assay reagents to its setup. In essence, "dead volume" is the volume of reagent that is dedicated to the instrument; it will *not* be available for final dispensing into assay wells. The following Table provides information on reagent volume requirements, and available excesses on a *per kit* basis. Always pool the individual reporter cell suspensions and all other respective assay kit reagents before processing multiple 384-well assay plates.

Stock Reagent & Volume provided	Volume to be Dispensed (384-well plate)	Excess rgt. volume available for instrument dead volume
when using tip dispensing of <u>test cmpds</u> Reporter Cell Suspension 7.5 ml	15 μl / well 5.8 ml / plate	~ 1.7 ml
when using acoustic dispensing of <u>test cmpds</u> Reporter Cell Suspension 15 ml	30 μl / well 11.5 ml / plate	~ 3.4 ml
Detection Substrate 7.8 ml	15 μl / well 5.8 ml / plate	~ 2 ml

Assay Scheme

The Day 1 preparation, volumes, and chronology of dispensed cells and test compounds are different between assay setups using a *tip-based dispenser* (**1a**) and those using an *acoustic transfer device* (**1b**). Following 22 -24 hours incubation Detection Substrate is added. Light emission from each assay well is quantified using a plate-reading luminometer.

Figure 1a. Assay workflow if using conventional tip-based dispensing of test compounds.



Figure 1b. Assay workflow if using acoustic dispensing of test compounds.



Assay Performance



Figure 2. *A.) Activation of ADRA1B.* Activation assays were performed using the reference compounds L-Phenylephrine (provided), Norepinephrine, Epinephrine, Cirazoline, Clonidine, and A-61603 (which is considered to be selective for the alpha 1A adrenergic receptor and is far less potent against ADRA1B and ADRA1D).

B.) Inhibition of ADRA1B. ADRA1B reporter cells were co-treated with an EC₈₀ concentration of the reference activator L-phenylephrine and varying concentrations of the ADRA1B specific inhibitor L-765314, and the general alpha adrenergic receptor inhibitors Prazosin, Doxazosin, Tamsulosin, Terazosin, WB4101, and BMY7378. INDIGO's Live Cell Multiplex (LCM) Assay confirmed that no treatment concentrations were cytotoxic (data not shown).

Luminescence was quantified and values of average (n = 3) relative light units (RLU), corresponding standard deviation (SD), Fold-Activation, and Z^{11} values were calculated. The least-squares method of non-linear regression was used to plot Fold-Activation or RLU *vs.* Log₁₀ [Compound, nM] and EC₅₀ / IC₅₀ values were determined using GraphPad Prism software. All chemicals were procured from Cayman Chemical, Ann Arbor MI, USA, except for Epinephrine which was procured from Sigma Aldrich, Allentown, PA, USA, and L-765314 which was procured from Selleck Chemicals, Houston, TX, USA.

II. Product Components & Storage Conditions

This Human ADRA1B Assay kit contains materials to perform assays in a single 384-well assay plate.

Reporter cells are temperature sensitive! To ensure maximal viability the tube of Cells must be maintained at -80°C until immediately prior to the rapid-thaw procedure described in this protocol.

Assay kits are shipped on dry ice. Upon receipt of the kit transfer it to -80°C storage. If you wish to first inspect and inventory the individual kit components, be sure to first transfer and submerge the tube of reporter cells in dry ice.

The aliquot of Reporter Cells is provided as a single-use reagent. Once thawed, reporter cells can NOT be refrozen, nor can they be maintained in extended culture with any hope of retaining downstream assay performance. Therefore, extra volumes of these reagents should be discarded after assay setup.

The date of product expiration is printed on the Product Qualification Insert (PQI) enclosed with each kit.

Kit Components	Amount	Storage Temp.
ADRA1B Reporter Cells	1 x 1.0 mL	-80°C
Cell Recovery Medium (CRM)	1 x 7.0 mL	-20°C
Compound Screening Medium (CSM)	1 x 45 mL	-20°C
 L-Phenylephrine (200 μM in DMSO) 	1 x 80 μL	-20°C
Detection Substrate	1 x 7.8 mL	-80°C
 384-well assay plate (white, sterile, cell-culture ready) 	1	ambient

III. Materials to be Supplied by the User

The following materials must be provided by the user, and should be made ready prior to initiating the assay procedure:

DAY 1

- container of dry ice
- cell culture-rated laminar flow hood.
- 37°C, humidified 5% CO₂ incubator for mammalian cell culture.
- 37°C water bath.
- 70% alcohol wipes
- 8-channel electronic, repeat-dispensing pipettes & tips suitable for dispensing 15 μl.
- disposable media basins, sterile.
- sterile multi-channel media basins *or* deep-well plates, *or* appropriate similar vessel for generating dilution series of reference compound(s) and test compound(s).

• Optional: antagonist reference compound (e.g., Fig. 2B).

DAY2 plate-reading luminometer.

IV. Assay Protocol

Please review the entire Assay Protocol before starting. Completing the assay requires an overnight incubation. *Steps 1-8* are performed on *Day 1*, requiring less than 2 hours of bench work and a 4-hour incubation step to complete. *Steps 9-13* are performed on *Day 2* and require less than 1 hour to complete.

• A word about antagonist-mode assay setups •

When setting up receptor inhibition assays the Reporter Cells are co-treated with a fixed sub-maximal concentration (typically between $EC_{50} - EC_{85}$) of the reference agonist AND varying concentrations of the test compound(s). This ADRA1B Assay kit includes a 200 μ M stock solution of **L-Phenylephrine** that may be used to setup inhibition-mode assays. 27 nM of L-phenylephrine approximates EC_{80} in this assay. Hence, it is a suitable concentration of challenge agonist to use when screening test materials for inhibitory activities.

Add L-phenylephrine to a bulk volume of **CSM**, as described above. This agonistsupplemented medium is then used to prepare serial dilutions of test material stocks to achieve the desired respective assay concentrations. This is an efficient and precise method of setting up inhibition assays, and it is the method presented in *Step 5b* of this protocol, and *Step 6b* of the protocol when using an acoustic transfer device to dispense test compounds.

Note that when using a *tip-based instrument* for the dispensing of 2x-concentrated test compounds the cell suspension must also be supplemented with a 2x-concentration (~54 nM) of the challenge agonist L-Phenylephrine.

When using an *acoustic transfer* device for the dispensing of 1,000x-concentrated test compounds the cell suspension should be supplemented with a **1**x-concentration (~27 nM) of the challenge agonist L-Phenylephrine

DAY 1 Assay Protocol:

All steps should be performed using aseptic technique.

1.) Remove **Cell Recovery Medium (CRM)** and **Compound Screening Medium (CSM)** from freezer storage and thaw in a 37°C water bath.

2.) Prepare dilutions of treatment compounds: Prepare Test Compound treatment media for *Agonist-* or *Antagonist-mode* screens. NOTE that both the test and reference compounds will be prepared differently when using tip-dispensing *vs.* acoustic dispensing. Regardless of the method, the total DMSO carried over into assay wells should not exceed 0.4%.

- a. Tip dispensing method: In Step 6, 15 μl / well of the prepared treatment media is added into assay wells that have been <u>pre-dispensed</u> with 15 μl /well of Reporter Cells. Hence, to achieve the desired *final* assay concentrations one must prepare treatment media with a 2x-concentration of the test and reference material(s). Use CSM to prepare the appropriate dilution series. Plan dilution volumes carefully; this assay kit provides 45 ml of CSM.
- *b.* Acoustic dispensing method: In Step 6, 30 nl / well of **1,000x**-concentrated test compound solutions (prepared in DMSO) are added to the assay plate using an acoustic transfer device.

Preparing the positive control: This assay kit includes a 200 µM stock solution of **L**-**Phenylephrine**, a potent reference agonist of ADRA1B. The following 7-point treatment series, with concentrations presented in 3-fold decrements, provides a complete dose-response: 200, 66.7, 22.2, 7.41, 2.47, 0.823, and 0.274 nM. Always include 'no treatment' (or 'vehicle') control wells.

APPENDIX 1a provides an example for generating this dilution series to be used when *tip-dispensing* compound solutions prepared in CSM (15 μ l / well).

APPENDIX 1b provides an example for generating a series of 1,000x-concentrated solutions of compounds prepared in DMSO to be used when performing *acoustic dispensing* (30 nl / well).

When using tip-based instrumentation for dispensing test compounds ...

3.) *First*, retrieve the tube of **CRM** from the 37°C water bath, sanitize the outside with a 70% ethanol swab;

Second, retrieve **Reporter Cells** from -80°C storage and immerse in dry ice to transport the tube to a laminar flow hood. Perform a *rapid thaw* of the frozen cells by transferring a **6.5 ml** volume of 37°C CRM into the tube of frozen cells. Recap the tube of Reporter Cells and place it in a 37°C water bath for 5 - 10 minutes. The resulting volume of cell suspension will be 7.5 ml.

4.) Retrieve the tube of Reporter Cell Suspension from the water bath. Sanitize the outside surface of the tube with a 70% alcohol swab, then transfer it into the cell culture hood.

5.) Gently invert the tube of cells several times to gain a homogenous suspension.

a. for *Agonist*-mode assays: Dispense 15 μl / well of cell suspension into the Assay Plate.

~ or ~

b. for Antagonist-mode assays: Supplement the bulk volume of Reporter Cells suspension with a <u>2x-concentration</u> of the challenge agonist (refer to "A word about antagonist-mode assay setup", pg. 8). Dispense **15 \mul / well** of cell suspension into the Assay Plate.

6.) Dispense $15 \mu l / well$ of 2x-concentrated treatment media (from *Step 2a*) into the assay plate.

When using an acoustic transfer device for dispensing test compounds ...

3.) Dispense **30 nl / well** of the 1,000x-concentrated compounds (in DMSO solutions, from *Step 2b*) into the assay plate.

4.) *First*, retrieve the tube of **CRM** from the 37°C water bath, sanitize the outside with a 70% ethanol swab;

Second, retrieve **Reporter Cells** from -80°C storage and immerse in dry ice to transport the tube to a laminar flow hood. Perform a *rapid thaw* of the frozen cells by transferring a **6.5 ml** volume of 37°C CRM into the tube of frozen cells. Recap the tube of cells and place it in a 37°C water bath for 5 - 10 minutes. The resulting volume of cell suspension will be 7.5 ml.

5.) Retrieve the tube of cell suspension from the water bath. Sanitize the outside surface of the tube with a 70% alcohol swab. Add an additional **7.5 ml** of **CSM** to the tube. The resulting volume of cell suspension will be 15 ml.

6.) *Gently* invert the tube of cells several times to gain a homogenous cell suspension.

a. for *Agonist*-mode assays: Dispense $30 \mu l / well$ of cell suspension into the Assay Plate that has been pre-dispensed with test compounds.

~ or ~

b. for Antagonist-mode assays: First supplement the bulk volume of ADRA1B Reporter Cells suspension with the challenge agonist **L-Phenylephrine** to achieve an $EC_{50} - EC_{80}$ concentration (refer to "*A word about antagonist-mode assay setup*", pg. 8). Then dispense **30 µl / well** of the supplemented cell suspension into the assay plate that has been pre-dispensed with test compounds.

NOTE: Take special care to prevent cells from settling during the dispensing period. Allowing cells to settle during the transfer process, and/or lack of precision in dispensing uniform volumes across the assay plate *will* cause well-to-well variation (= increased Standard Deviation) in the assay.

(continued ...)

NOTE: Following the dispensing of Reporter Cells and test compounds INDIGO recommends performing a *low-speed* spin of the assay plate (with lid) for ≤ 1 minute using a room temperature centrifuge fitted with counter-balanced plate carriers.

7.) Transfer the assay plate into a 37°C, humidified, 5% CO₂ incubator for <u>22 - 24 hours</u>.
 NOTE: Ensure a high-humidity (≥70%) environment within the cell culture incubator. This is critical to prevent the onset of deleterious "edge-effects" in the assay plate.

8.) For greater convenience on *Day 2*, retrieve **Detection Substrate** from freezer storage and place in a dark refrigerator (4°C) to thaw overnight.

DAY 2 Assay Protocol:

Subsequent manipulations do *not* require special regard for aseptic technique and may be performed on a bench top.

9.) Approximately 30 minutes before intending to quantify receptor activity remove **Detection Substrate** from the refrigerator and place it in a low-light area so that it may equilibrate to room temperature.

NOTE: Do NOT actively warm Detection Substrate above room temperature. If this solution was not allowed to thaw overnight at 4°C, a room temperature water bath may be used to expedite thawing.

10.) Set the plate-reader to "luminescence" mode. Program the instrument to perform a single 5 second "plate shake" prior to reading the first assay well. Set read-time to 0.5 second (500 mSec) per well, *or less*.

11.) Following 22 - 24 hours of incubation dispense $15 \mu l / well$ of Detection Substrate into the assay plate.

NOTE: Perform this reagent transfer carefully to avoid bubble formation! Scattered micro-bubbles will not pose a problem. However, bubbles covering the surface of the reaction mix, or large bubbles clinging to the side walls of the well, will cause lens-effects that will degrade the accuracy and precision of the assay data. It is recommended to perform a final *low-speed* spin of the assay plate (with lid) for ≤ 1 minute using a room temperature centrifuge fitted with counter-balanced plate carriers.

12.) Allow the plate(s) to rest at room temperature for 30 minutes. Do not shake the assay plate(s) during this period.

NOTE: the 30-minute rest period allows the luminescence signal to achieve stable emission output.

- 13.) Quantify luminescence.
- 14.) Analyze data.

V. Related Products

Product No.	Product Descriptions			
Human ADRA1B Assays				
IB31101	Human ADRA1B Reporter Assay System 1x 96-well format assay			
IB31102	Human ADRA1B Reporter Assay System 1x 384-well format assays			
Human ADRA1A Assays				
IB31001	Human ADRA1A Reporter Assay System 1x 96-well format assay			
IB31002	Human ADRA1A Reporter Assay System 1x 384-well format assays			
Human ADRA1D Assays				
IB31201	Human ADRA1D Reporter Assay System 1x 96-well format assay			
IB31202	Human ADRA1D Reporter Assay System 1x 384-well format assays			
Human ADRB1 Assays				
IB32001	Human ADRB1 Reporter Assay System 1x 96-well format assay			
IB32002	Human ADRB1 Reporter Assay System 1x 384-well format assays			
Human ADRB2 Assays				
IB32101	Human ADRB2 Reporter Assay System 1x 96-well format assay			
IB32102	Human ADRB2 Reporter Assay System 1x 384-well format assays			
Bulk volumes of Assay Reagents may be custom manufactured to accommodate any scale of HTS. Please Inquire.				

NFAT Assays (recommended for receptor specificity screening)					
IB18001	NFAT Reporter Assay System 1x 96-well format assay				
LIVE Cell Multiplex (LCM) Assay					
LCM-01	Reagent volumes sufficient to perform 96 Live Cell Assays				
LCM-05	Reagent in 5x bulk volume to perform 480 Live Cell Assays contained in 5 x 96-well assay plates				
LCM-10	Reagent in 10x bulk volume to perform 960 Live Cell Assays contained in 10 x 96-well assay plates				
INDIGIo Luciferase Detection Reagent					
LDR-10, -25, -50, -500	INDIGIo Luciferase Detection Reagents in 10 mL, 25 mL, 50 mL, and 500 mL volumes				

Please refer to INDIGO Biosciences website for updated product offerings.

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VI. Citations

- ¹Perez DM (2020) α1-Adrenergic Receptors in Neurotransmission, Synaptic Plasticity, and Cognition. Front. Pharmacol. 11:581098. doi: 10.3389/fphar.2020.581098.
- ² Wu, D., *et. al.* (1992) Activation of Phospholipase C by α1-Adrenergic Receptors is mediated by the α subunits of Gq family. JBC 267(36):25798-25802.
- ³ Perez, DM (2023) a1-Adrenergic Receptors: Insights into Potential Therapeutic Opportunities for COVID-19, Heart Failure, and Alzheimer's Disease. Int. J. Mol. Sci. 24:4188. doi:10.3390/ijms24044188.
- ⁴ Rouppe van der Voort, C., *et. al.* (1999) Neuroendocrine mediators up-regulate alpha1b- and alpha1d-adrenergic receptor subtypes in human monocytes. J Neuroimmunol. 95 (1-2), 165-73. doi: 10.1016/s0165-5728(99)00011-9.
- ⁵ Burcelin, R., *et. al.* (2004) Impaired Glucose Homeostasis in Mice lacking the α_{1b} -Adrenergic Receptor subtype.
- ⁶ Shi T, Papay RS, Perez DM. (2017) The role of $α_1$ -adrenergic receptors in regulating metabolism: increased glucose tolerance, leptin secretion and lipid oxidation. J Recept Signal Transduct Res. 37(2):124-132. doi: 10.1080/10799893.2016.1193522.
- ⁷ Mhaouty-Kodja, S., et. al. (2007) Fertility and Spermatogenesis are altered in {alpha}-1b-adernergic receptor knockout male mice. J Endocrinol. Nov;195(2):281-92. doi:10.1677/JOE-07-0071.
- ⁸ Noda H., et. al., (2007) Frequent reduced expression of alpha-1B- adrenergic receptor caused by aberrant promoter methylation in gastric cancers. Br. J cancer. 96(2):383-90. doi. 10.1038/sj.njc.6603555.
- ⁹ Böhmer, T., et. al., (2014) The α1B-Adrenoreceptor subtype mediates adrenergic vasoconstriction in mouse retinal arterioles with damaged endothelium. Br J Pharmacol. 171(16):3858-67. doi:10.1111/bph.12743.
- ¹⁰ Park JY, *et. al.* (2020) The Role of Calcium-Calcineurin-NFAT Signaling Pathway in Health and Autoimmune Disease, Frontiers in Immunology.:doi:10.3389/ fimmu.2020.00195
- ¹¹Zhang JH, *et al.* (1999) A Simple Statistical Parameter for Use in Evaluation and Validation of High Throughput Screening Assays. J Biomol Screen.:**4**(2), 67-73.
 - $Z' = 1 [3*(SD^{Ref EC100} + SD^{Untreated}) / (RLU^{Ref EC100} RLU^{Untreated})]$

VII. Limited Use Disclosures

Products commercialized by INDIGO Biosciences, Inc. are for RESEARCH PURPOSES ONLY – not for therapeutic, diagnostic, or contact use in humans or animals.

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Product prices, availability, specifications, and claims are subject to change without prior notice.

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APPENDIX 1a for tip-based dispensing. Example scheme for the serial dilution of the reference agonist L-Phenylephrine into CSM to generate **2x-concentrated** treatment media. A *tip-based* instrument is used to dispense 15 μ l / well into an assay plate that has been *pre-dispensed* with 15 μ l / well of ADRA1B Reporter Cells suspension.



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APPENDIX 1b for acoustic dispensing. Example scheme for the serial dilution of the reference agonist L-Phenylephrine into DMSO to generate **1,000x-concentrated** stocks. 30 nl / well are pre-dispensed into an empty assay plate using an acoustic transfer device.

