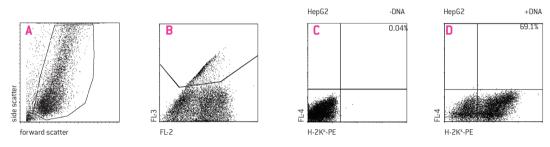


Amaxa® Cell Line Nucleofector® Kit V

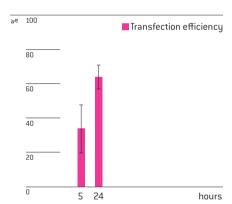
For HepG2

Human hepatocellular liver carcinoma; epithelial cells

Example for Nucleofection® of HepG2 cells



HepG2 cells were transfected with the Cell Line Nucleofector® Kit V, Program T-028 and a plasmid encoding the mouse MHC class I heavy chain molecule H-2K*. Cells were stained 24 hours post Nucleofection® with a PE-coupled antibody directed against H-2K* and analyzed by flow cytometry. HepG2 cells were gated according to forward/side scatter (A). Dead cells were excluded by staining with propidium iodide and gating (B). H-2K* expression is shown after Nucleofection® without (C) and with plasmid DNA (D).



Average transfection efficiency of HepG2 cells. HepG2 cells were transfected with program T-028 and 5 μg of a plasmid encoding the mouse MHC class I heavy chain molecule H-2K*. Cell Viability is around to now

Product Description

Cat. No.		VCA-1003
Size (reactions)		25
Cell Line Nucleofector® Solution V		2.25 ml (2.05 ml + 10% overfill)
Supplement		0.5 ml (0.45 ml + 10% overfill)
pmaxGFP® Vector (0.5 µg/µl in 10 mM Tris pH 8.0)		30 µg
Certified cuvettes		25
Plastic pipettes		25
Storage and stability	Store Nucleofector® Solo	lution, Supplement and pmaxGFP® Vector at 4°C. For long-term storage,

Store Nucleofector® Solution, Supplement and pmaxGFP® Vector at 4°C. For long-term storage, pmaxGFP® Vector is ideally stored at -20°C. The expiration date is printed on the solution box. Once the Nucleofector® Supplement is added to the Nucleofector® Solution it is stable for three months at 4°C.

Optimized Protocol for HepG2 Cells

Required Material

Note

Please make sure that the entire supplement is added to the Nucleofector® Solution. The ratio of Nucleofector® Solution to supplement is 4.5:1. For a single reaction use 82 µl of Nucleofector® Solution plus 18 µl of supplement to make 100 µl of total reaction volume.

- Nucleofector® Device
- Supplemented Nucleofector® Solution at room temperature
- Supplied certified cuvettes
- Supplied plastic pipettes
- Supplied pmaxGFP® Vector
- Substrate of interest, highly purified, preferably by using endotoxin-free kits; A260: A280 ratio should be at least 1.8
- 6-well culture dish or culture system of your choice
- For detaching cells: 0.5 mg/ml Trypsin and 0.2 mg/ml EDTA in PBS and supplemented culture media or PBS/0.5% BSA
- Culture medium: Minimum Essential Medium with Earle's BSS (Lonza Cat. No. BE12-125F) and 2 mM
 UltraGlutamine I [Lonza, Cat. No. BE17-605E/U1], 0.1 mM neAA; 1 mM Sodium pyruvate; 10% FCS
- Prewarm appropriate volume of culture medium to 37°C (1.5 ml per sample)
- Appropriate number of cells (1 x 10⁶ cells per sample; lower or higher cell numbers may influence transfection results)

1. Pre Nucleofection®

Cell culture recommendations

- 1.1 Passage cells at 80% confluency. HepG2 cells should not be used for Nucleofection® after passage number 20
- 1.2 Seed out $1 2 \times 10^4$ cells/cm²
- 1.3 Subculture 4-5 days before Nucleofection®
- 1.4 Optimal confluency for Nucleofection®: 70 80%. Higher cell densities may cause lower Nucleofection® Efficiencies

Trypsinization

- 1.5 Remove media from the cultured cells and wash cells once with PBS; use at least same volume of PBS as culture media
- 1.6 For harvesting, incubate the cells \sim 5 minutes at 37°C with indicated trypsinization reagent (please see required material)
- 1.7 Neutralize trypsinization reaction with supplemented culture medium or PBS/0.5% BSA once the majority of the cells (>90%) have been detached

Optimized Protocol for HepG2 Cells

2. Nucleofection®

One Nucleofection® Sample contains

 1×10^6 cells

 $5\,\mu g$ plasmid DNA (in $1-5\,\mu l$ H_20 or TE) or 2 μg pmaxGFP® Vector or 30-300nM siRNA (3 -30 pmol/sample)

100 µl Cell Line Nucleofector® Solution V

- 2.1 Please make sure that the entire supplement is added to the Nucleofector® Solution
- 2.2 Prepare 6-well plates by filling appropriate number of wells with 1 ml of supplemented culture media and pre-incubate/equilibrate plates in a humidified 37°C/5% CO₂ incubator
- 2.3 Harvest the cells by trypsinization (please see 1.5 1.7)
- 2.4 Count an aliquot of the cells and determine cell density
- 2.5 Centrifuge the required number of cells (1 x 10^6 cells per sample) at 200xg for 10 minutes at room temperature. Remove supernatant completely
- 2.6 Resuspend the cell pellet carefully in 100 µl room-temperature Nucleofector® Solution per sample

Note Avoid leaving the cells in Nucleofector® Solution for extended periods of time (longer than 15 minutes), as this may reduce cell viability and gene transfer efficiency.

- 2.7 Combine 100 μ l of cell suspension with 5 μ g DNA, 2 μ g pmaxGFP® Vector or 30 nM 300 nM siRNA (3 30 pmol/sample) or other substrates
- 2.8 Transfer cell/DNA suspension into certified cuvette (sample must cover the bottom of the cuvette without air bubbles). Close the cuvette with the cap
- 2.9 Select the appropriate Nucleofector® Program H-022 (for high viability) or T-028 (for high expression level) (H-22 or T-28 for Nucleofector® I Device)
- 2.10 Insert the cuvette with cell/DNA suspension into the Nucleofector® Cuvette Holder and apply the selected program by pressing the X-button
- 2.11 Take the cuvette out of the holder once the program is finished
- 2.12 Immediately add \sim 500 μ l of the pre-equilibrated culture medium to the cuvette and gently transfer the sample into the prepared 6-well plate (final volume 1.5 ml media per well). Use the supplied pipettes and avoid repeated aspiration of the sample

3. Post Nucleofection®

3.1 Incubate the cells in humidified 37° C/5% CO_2 incubator until analysis. Gene expression or down regulation, respectively, is often detectable after only 4-8 hours

Additional Information

For an up-to-date list of all Nucleofector® References, please refer to: www.lonza.com/nucleofection-citations

For more technical assistance, contact our Scientific Support Team:

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References

1. Forgues M et al. [2003]. Mol Cell Biol.;23(15):5282-92.

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Please note that the Amaxa® Nucleofector® Technology is not intended to be used for diagnostic purposes or for testing or treatment in humans.

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