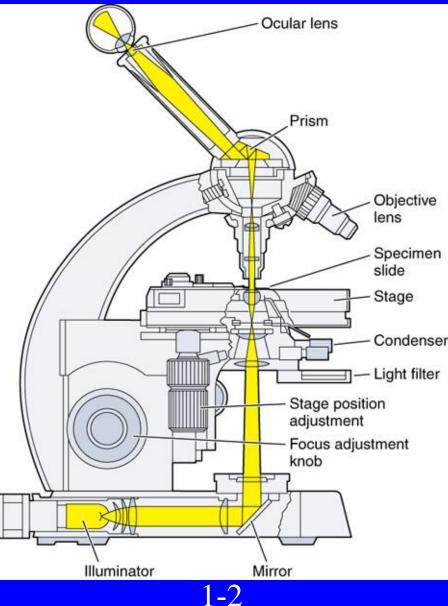
### I. Light Microscopy (Histology)

A. Definition
B. Resolution of light microscope

0.2 μm
units of measurement
mm, μm, nm, A

C. Translucent specimen

[Resolution of human eye ~100 μm]



I. Light Microscope D. Nikon LM 1. 10X oculars, width adjustment 2. Nosepiece 3.4,10,40,100X objectives 4. Mechanical stage 5. Condensor lens 6. Condensor aperture 7. Light source, rheostat 8. Coarse & fine focus



### I. Light Microscope

- E. 5-Headed LM
- 1. Located in back hallway
- 2. Available 8-5, M-F, firstcome, first-served
- 3. Do not remove slide box
- 4. HAS field iris diaphragm
- 5. HAS separate power supply
- 6. HAS lighted pointer





#### I. Light Microscope

- F. 2-Headed LM
- 1. Located in Rm 6128
- 2. Available 8-5, M-F
- 3. Do not remove slide box
- 4. Has field iris diaphragm
- 5. Has lighted pointer
- 6. Has video camera and computer with frame grabber to view/print/save images (not for student use)
- 7. Priority use for tissue processing lab



## **Tissue Processing**

#### Rgistration

• Lab.no, Date, Name of patient, age, Sex, Occupation, address, reffereing doctor

## II. Fixation: preservation of tissue structure

- A. Avoid autolysis
- B. Common fixatives:
- formaldehyde,buffered formal-saline
   10%
  - 2. glutaraldehyde: for EM
  - 3. 90-100% alcohol: suitable for cytology
  - 4. heat: boiling water, microwave

#### The purposes of fixation are

A.to inhibit autolytic enzymes and kill • microorganisms of decomposition .

**B.to preserve tissue as nearly as possible** • in its original form.

C.to protect tissues against subsequent • damage during embding.

#### The purposes of fixation are-continue

D. to give tissue a texture which permits • easy sectioning . •

**E.** to render the various constituents receptive of the proposed stains

 Fixation of tissues with different types of fixatives depend on tissues, large specimen should be sliced . loose tissues max. 10 mm penetration , compact tissue max. penetration 5mm, hollow organs injected or packed with wool socked in formalin .

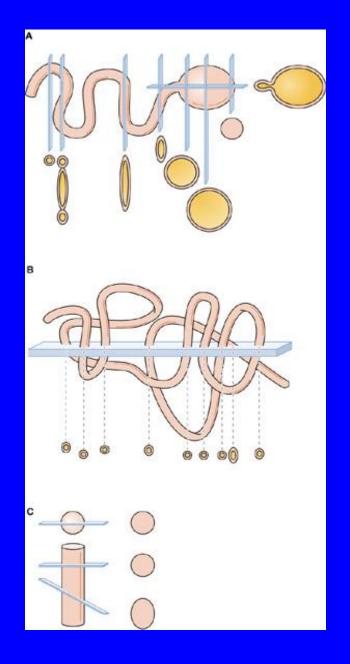
#### Gross examination

 Includes description of the specimen : weight, dimensions, color, texture, cutsection, followed by photography Tissue dissection and taking representative sections followed by labeling .
The pieces taken will placed in tissue cassette .



Transfer casssette either to automatic tissue processoe or to jars (in case of manual tissue processing )

#### **Tissue dissection**



#### **III.** Dehydration

- A. Definition: removal of water
- B. Rationale: for paraffin embedding/sectioning
- C. Steps
  - 1. wash out fixative
  - 2. graded series of alcohol
    - a. 70%, 95%, 100%, 100%
  - 3. replace water by diffusion
  - 4. not too long, not too short

**III.** Dehydration D. Procedure 1. automatic tissue processor a. overnight 2. Baths: water, 70,95,100,100 % alcohol 3. Clearing agent: 2 baths of xylene



I. V. Clearing
A. Paraffin solvent
B. Xylene, "clearing agent"
C. Makes tissue appear "clear"



#### V. Infiltration

A. Replace xylene with paraffin

B. Immerse in melted paraffin

1. ~55° C MP

C. Remove all bubbles, xylene

D. Procedure

1. Two baths of melted paraffin

#### VI. Embedding

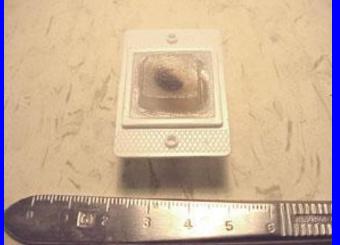
- A. Orient tissue
  - 1. cross section
- 2. longitudinal sectionB. Dissection orientationC. Avoid bubbles

Fig. 1-30

**VI. Embedding**D.Procedure
1. Place tissue cassette in melted paraffin
2. Fill mold with paraffin

3. Place tissue in mold

4. Allow to cool







VII. Sectioning – Trimming the Block Untrimmed tissue block

> Trimmed block with excess paraffin removed and block face in a trapezoid shape







#### VII. Sectioning

A. Rotary microtome
1. 5-10 μm
2. resolution vs. staining
B. Cryostat
C. Freezing microtome
D. Vibratome



#### VII. Sectioning

#### E. Procedure

 Place tissue block in microtome with wide edge of trapezoid lowest, and parallel to knife
 Advance blade toward block



#### VII. Sectioning

NOTE: Many of the figures in the text are of plastic embedded sections cut at 1  $\mu$ m thickness, and thus showing better resolution than 5-10  $\mu$ m paraffin sections seen in lab.

#### VIII. Mounting sections

A. 40° C water bath

- 1. Flattens paraffin section
- 2. Permits mounting on slide
- B. Gelatin & albumin
- C. Glass slides
- D. Oven / air dry





#### IX. Staining

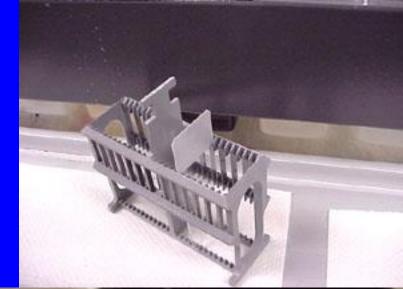
A. Basic dye: hematoxylin

- 1. basophilic structures: DNA, RNA
- 2. differentiation: sodium bicarbonate
- B. Acid dye: eosin
  - acidophilic (eosinophilic) structures
     a. mitochondria, collagen
- C. Water soluble dyes (paraffin sections)
- D. Clearing agent (remove paraffin)
- E. Rehydrate
- F. Stain (trial & error timing)

#### IX. Staining

Most of the stains are water soluble and don't mix with paraffin, so staining should started with de-waxing by using solvents (Xylene). Then rehydration of tissue using descending concentrations of alcohol (100%, 90%,70%, water)

**IX.** Staining G. Procedure 1. Slide rack 2. Solutions a. rehydration b. stain c. dehydration





#### X. Coverslipping

- A. Coverslip & mounting medium (not miscible with water)
- B. Dehydrate
- C. Clearing agentD. Permount

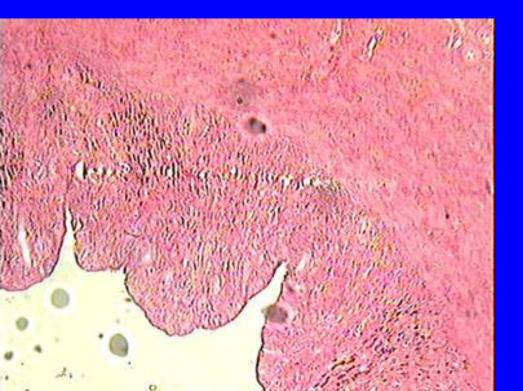


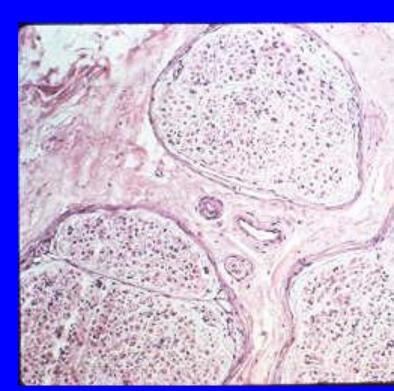
#### XI. Pitfalls

- A. Poor fixation (poor structural details)
- B. Inadequate dehydration
- C. Contaminated xylene (milky)
- D. Poor infiltration (bubbles, poor support)
- E. Embedding: orientation, bubbles

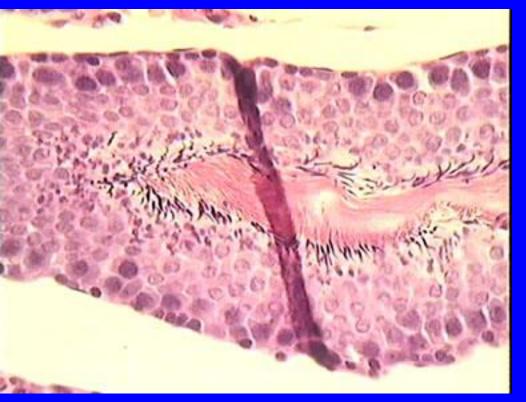
#### XI. Pitfalls

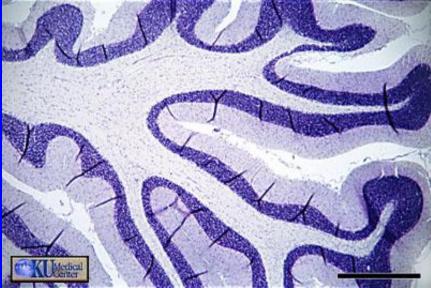
- F. Poor sectioning
  - 1. knife marks (scratches perpendicular to knife edge)
  - 2. compression (waves parallel to knife edge)





# XI. Pitfalls G. Mounting sections 1. folds & tears 2. excess albumin (stain)

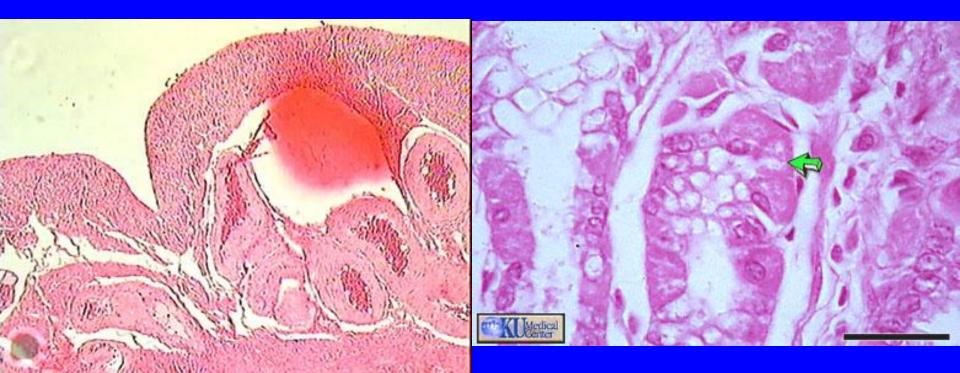




#### XI. Pitfalls

#### H. Staining

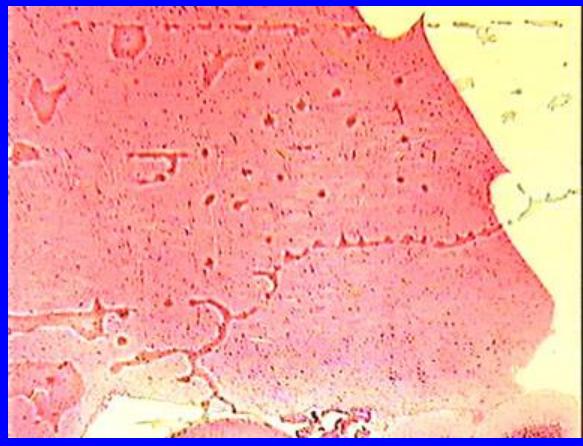
- 1. inadequate rehydration (uneven staining)
- 2. too dark or too light (timing off)
- 3. inadequate agitation



#### XI. Pitfalls I. Coverslipping 1. Bubbles



XI. PitfallsI. Coverslipping2. excess Permount3. two coverslips



## **Electron Microscopy** X Immunohistochemistry (IHC)

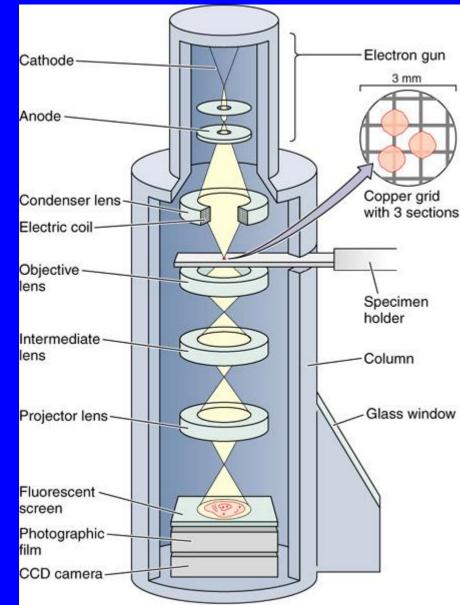
Students are responsible for all EMs in the text.

#### I. Electron Microscope

A. TEM (1.5)

- B. Similarities with LM
  - 1. electron source (vacuum) [light]
  - 2. condenser (electromagnetic) lens
  - 3. specimen chamber [stage]
  - 4. objective lens
  - 5. projector lens
  - 6. fluorescent screen
  - 7. camera





#### I. Electron Microscope

C. Differences from LM 1. vacuum (no living material)

2. electron penetration

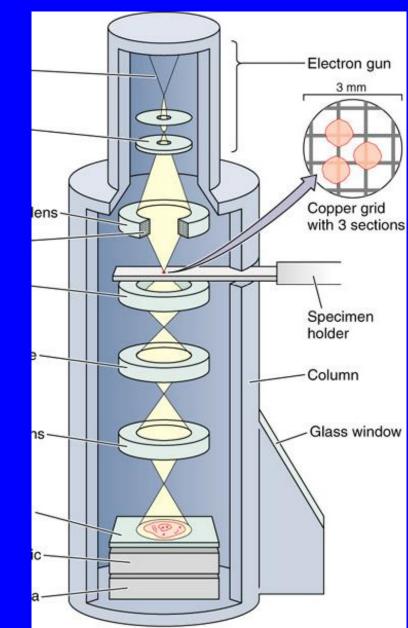
a. 0.02 - 0.1 μm sections

3. resolution: 0.2 nm

a. magnification ~5k-1
million

b. small field of view4. BW

1-9



#### I. Electron Microscope



1-8

#### **II. EM Fixation**

A. buffered glutaraldehyde & osmium tetroxide

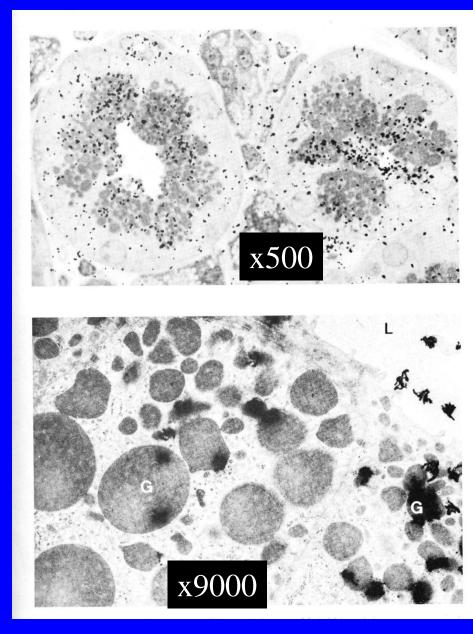
B. smaller sample size (~1mm<sup>3</sup>)

### III. EM Embedding & Sectioning & Staining

- A. plastic resin
- B. polymerize (cure)
- C. ultramicrotome (0.02 0.1 µm sections)
  - 1. diamond knife
  - 2. fresh glass knife
- D. copper grids
- E. electron dense stains
  - 1. lead citrate
  - 2. uranyl acetate

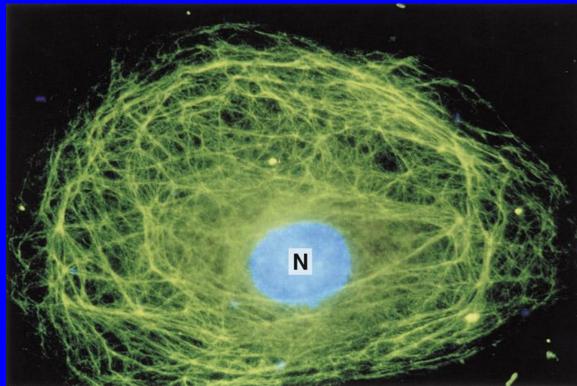
F. Demonstration: tissue block, diamond knife, copper grid

**III. EM Viewing** A. Advantages (1.8) 1. high resolution a. cell organelles b. plasma membrane **B.** Disadvantages 1. small sample 2. small field of view 3. 2-D image 4. static image 1-11

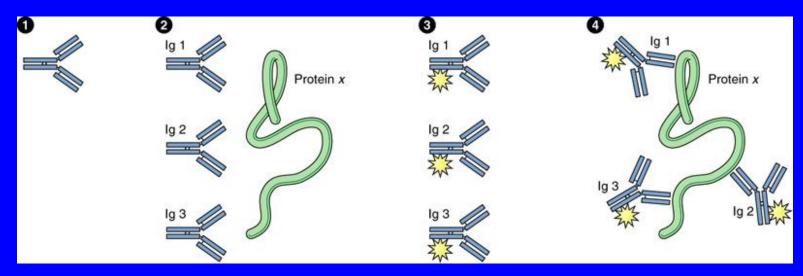


#### I. Immunohistochemistry (IHC)

- A. Identification & localization of specific molecules (1-18)
  B. Antigen-antibody reaction
  1. high affinity
  - 2. specific
- 3. ex.: intermediate filaments in mouse cell



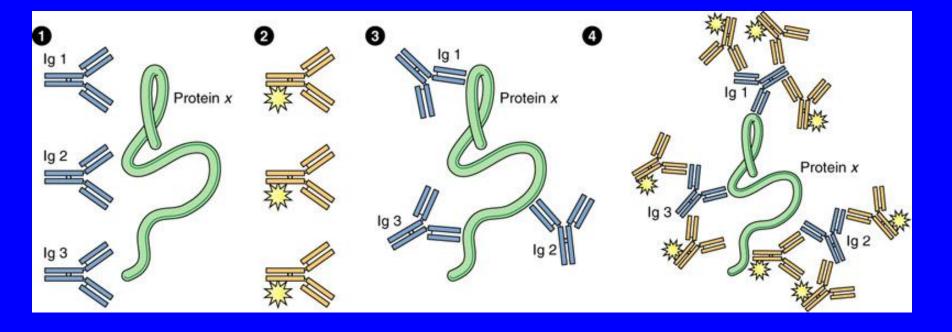
#### **II. Direct Labeling of antibodies**



A. Fluorescent molecules (1-23)
1. fluorescein, rhodamine
B. HRP (horseradish peroxidase)
1. histochemical reaction
2. peroxidase + chromagen
C. Gold particles

#### **IV. Indirect Immunohistochemistry**

1-21: Primary Ab attaches to Ag; Secondary Ab tagged with HRP attaches to primary; HRP reacted to form visible ppt



1-24

#### IV. Indirect IHC

Ab to nNOS labeling neurons and processes in the superior colliculus in a P11 rat. From summer 2002.

