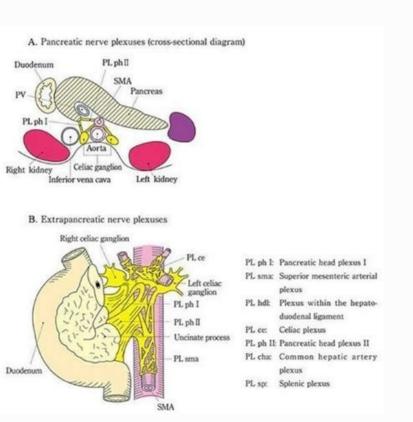
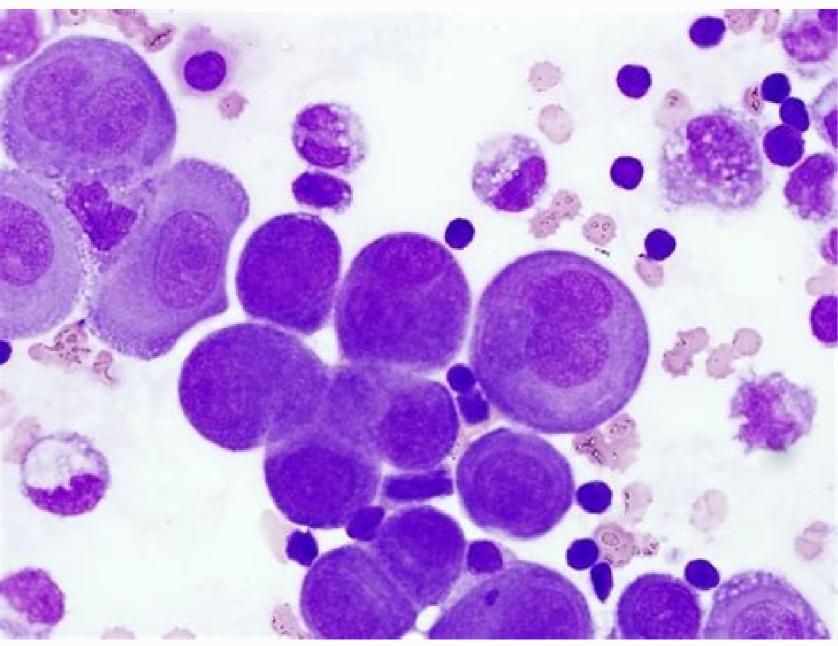
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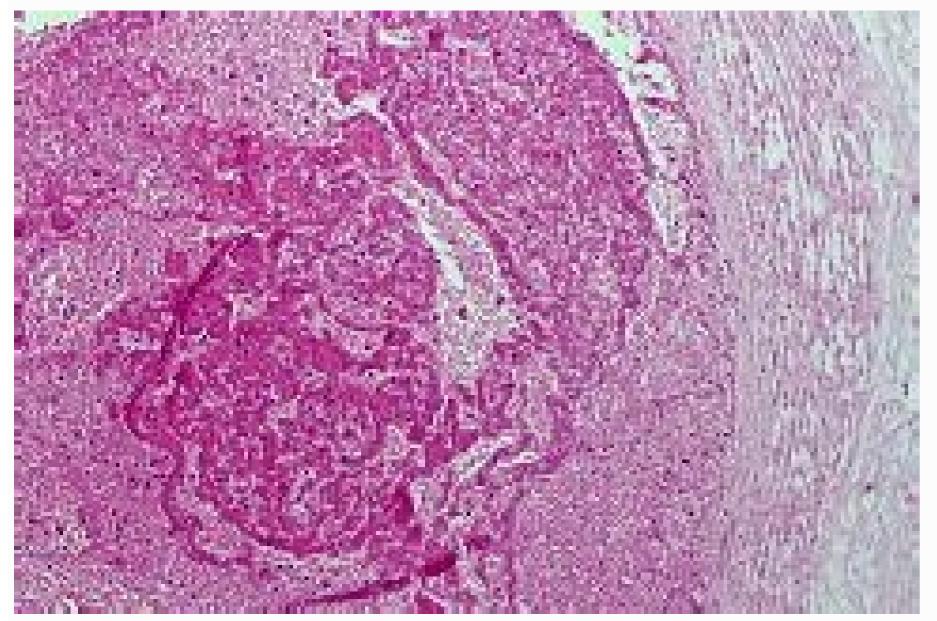
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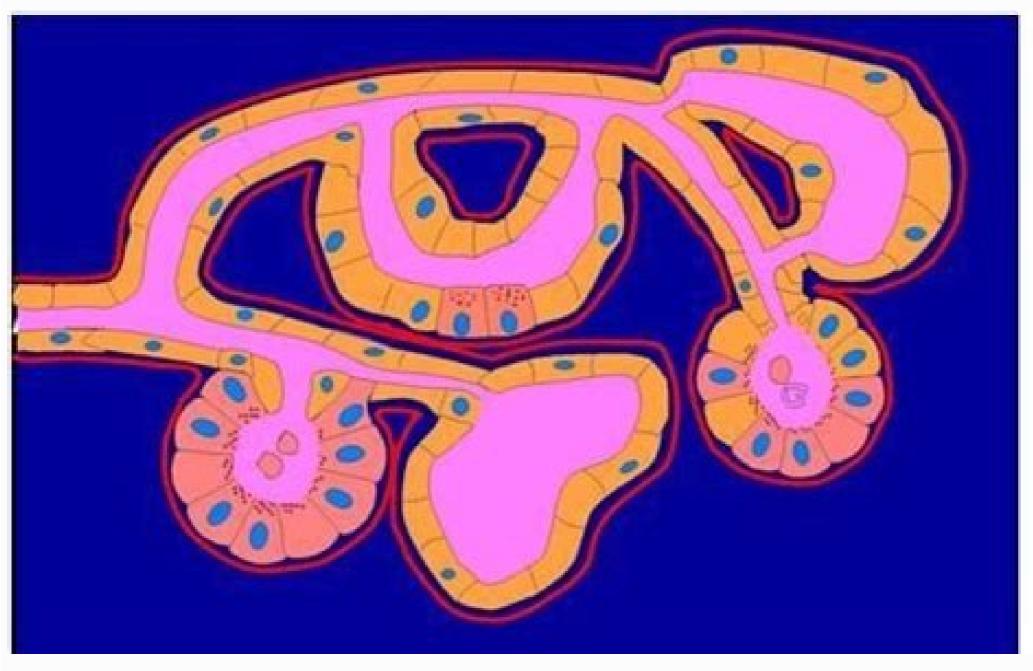
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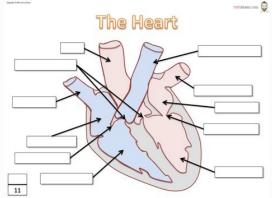
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Pancreas histology drawing. Pancreas histology labeled drawing. Pancreas histology guide. Pancreas histology. Pancreas histology labelled.

The intact pancreas from adult donors (>17 years old) was weighed then divided into regions and regional weights obtained. The ventral lobe forms the posterior portion of the head including the uncinate process while the dorsal lobe gives rise to the rest of the organ. Transverse pancreas slices can be further divided into halves or guarters and lettered in a clockwise manner. Hatched area at junctions denote regions used for minced samples in cryovials. Figure 3. Dip a cotton-tipped applicator in blue ink and spread on the anterior surface of the pancreas. Rapidly immerse the OCT molds in a dry ice - isopentane slurry for ~1 minute. 1974;179:412-414. Islet concentration in the head, body, tail and uncinate process of the pancreas. MontgomeryDepartment of Pathology, Immunology, and Laboratory Medicine, University of Florida Find articles by Robin M. Prepare Lowiczyl fixative by adding 2.5 mL 16% paraformaldehyde to 7.5 mL 0.1M PBS.Prepare solutions used for isolating cells. P, Paraffin; O, OCT. Mince pieces and divide evenly between cryovials (≥ 1 gram per vial). Samples for cell isolations are held at 4 °C until completion of tissue dissection while serum samples are processed in parallel. Pathologist, pathology assistant, or equivalent- an experienced staff member leads the tissue handling and performs major dissections including division(s) of pancreas head and harvesting pancreatic lymph nodes. Rapidly freeze vials without RNALater in liquid nitrogen or in the dry ice-isopentane slurry then transfer to a -80 °C freezer. Keep vials with RNALater at room temperature for 30 minutes to allow for equilibration, remix and rapidly freeze in liquid nitrogen or in the dry ice-isopentane slurry then transfer to a -80 °C freezer. Keep vials with RNALater at room temperature for 30 minutes to allow for equilibration, remix and rapidly freeze in liquid nitrogen or in the dry ice-isopentane slurry then transfer to a -80 °C freezer. Keep vials with RNALater at room temperature for 30 minutes to allow for equilibration, remix and rapidly freeze in liquid nitrogen or in the dry ice-isopentane slurry then transfer to a -80 °C freezer. Keep vials with RNALater at room temperature for 30 minutes to allow for equilibration, remix and rapidly freeze in liquid nitrogen or in the dry ice-isopentane slurry then transfer to a -80 °C freezer. Keep vials with RNALater at room temperature for 30 minutes to allow for equilibration, remix and rapidly freeze in liquid nitrogen or in the dry ice-isopentane slurry then transfer to a -80 °C freezer. Keep vials with RNALater at room temperature for 30 minutes to allow for equilibration, remix and rapidly freeze in liquid nitrogen or in the dry ice-isopentane slurry then transfer to a -80 °C freezer. Keep vials with RNALater at room temperature for 30 minutes to allow for equilibration fo °C freezer. Remove alternating sections for paraffin and OCT blocks beginning with paraffin (Figure 1). Lean all transverse sections to the right. Place ~1.5 x 1.5 x 0.5 cm sections are composed of insulin-containing β-cells followed by lower proportions of glucagon-containing α -cells and somatostatin-containing δ -cells. Two individuals can generally complete the procedure will in fixative for storage as biomedical waste. Discard biomedical waste according to local regulations within one month. 8. Update the Sample Inventory SystemThis procedure will process an intact human pancreas with representative sampling throughout the organ including demarcation of the Juvenile Diabetes Research Foundation (M.C-T., M.A.) in support of the Network for Pancreatic Organ Donors with Diabetes. Brissova M. If the transverse sections are too large, cut in half (Figure 2b). Cytochem. 2006;91:1855-1861. Start timing fixation when the last cassette is placed in fixative. For OCT blocks, pour a thin layer of OCT media into the prelabeled mold then lay the tissue in the mold being sure to maintain orientation and cover tissue with OCT. Diabetes. Alternating sections are used for fixed paraffin and fresh frozen blocks and remnant samples are minced for snap frozen sample preparations, either with or without RNAse inhibitors, for DNA, RNA, or protein isolation. The biobanking of human pancreas samples from donors representing various stages of diabetes and suitable control populations has been reported 7-9. The current nPOD case worksheet is provided (Appendix 1) that is used to document recovered samples and quantities. Pancreas regional weights were approximately equal (Figure 3). This procedure can also allow for reconstruction of the entire pancreas using stained slides from sequential paraffin and OCT blocks. Figure 2. Overall scheme of the procedure. Ann. [PubMed] [Google Scholar]Vaught J. 2007;56:2400-2404. Include the donor identification (Case worksheet, Appendix 1). Label OCT molds as for cassettes with a permanent marker. Store both types of fixative with samples at 4 °C for at least 48 hours and/or indefinitely until further processing for EM.4. Spleen, Lymph Node Dissections and Duodenal Mucosa spleen samples. 2. Personnel Procedure is optimally accomplished with three staff members however the procedure can be conducted with one well trained individual. Surg. Set-up Label cassettes for paraffin blocks manually with a pencil, or automatically with a pencil, or automatically with a cassette printer. Initial results of screening of nondiabetic organ donors for expression of islet autoantibodies. Considerable inter-individual islet heterogeneity is well known with up to 5-fold variations in islet size distribution so that annotation of pancreatic region is needed when analyzing inherent heterogeneity 10. When the proximal duodenum is included with the pancreas, duodenal mucosa may be collected for paraffin and frozen blocks and minced snap frozen preparations. Keywords: Medicine, Issue 63, Physiology, pancreas, organ donor, endocrine cells, insulin, beta-cells, islet, type 1 diabetes. Multiple formats are feasible allowing for maximum utilization for current and future technologies. Cut out 5-10 cm rectangles of aluminum foil. Print or manually label with permanent marker all vials and tubes. Published online 2012 May 23. Endocrinol. doi: 10.3791/4039PMCID: PMC3466941Department of Pathology, Immunology, and Laboratory Medicine, University of Florida Find articles by Emily L. Embed the duodenal mucosa with the cut surface down to allow examination of the mucosa perpendicular to the submucosa. 7. Clean dissection areas and disinfect. Heterogeneity of human pancreata in perspective of the isolation of the isolation of the isolation of the submucosa. 7. Clean dissection areas and disinfect. Heterogeneity of human pancreata in perspective of the isolation o a container with ~500 ml 10% neutral buffered formalin (NBF). Label cassettes for blue anterior half as "B". If pieces are still too large, cut each section perpendicular to the previous cut (Figure 2c). [PubMed] [Google Scholar] Tauriainen S, Salmela K, Rantala I, Knip M, Hyöty H. Place in fixative, OCT media, and or DMEM for fresh sample shipments or cryopreserved cell isolations according to amounts of starting materials. Open the duodenum and gently wipe the duodenum and gently wipe the duodenum and second fresh sample shipments or cryopreserved cell isolations according to amounts of starting materials. Open the duodenum and gently wipe the duodenum and divide the remaining portion into ~equal portions for body and tail. Weigh each region of pancreas and record weights (Case workup sheet (Appendix 1)). Section (~0.5 cm) each region of the pancreas in a transverse "bread loaf" manner (Figure 1). Use the sections from both junctions between regions for minced samples. Regional pancreatic variation is also reported with the tail region having higher islet density compared to other regions and the dorsal lobe-derived components undergoing selective atrophy in type 1 diabetes 4,5. Additional organs and tissues are often recovered from the organ donors and include pancreatic lymph nodes, spleen and non-pancreatic lymph nodes. Assessment of human pancreatic islet architecture and composition by laser scanning confocal microscopy. Depending on total numbers isolated, divide PLN into aliquots for fresh shipments, cryopreserved cell isolations, paraffin and/or OCT blocks, and vials. J. The median pancreatic weight in organ donors without diabetes was 82.4 grams (52.7 - 139.0 grams). J Vis Exp. Return pancreas to normal orientation with anterior surface facing prosector. Cut the pancreas into 3 regions: head, body, and tail (Figure 1). FossDepartment of Pathology, Immunology, and Laboratory Medicine, University of Florida Find articles by Kerwin M. [PMC free article] [PubMed] [Google Scholar]Rahier J, Goebbels R, Henquin J. The overall goal of the pancreas dissection procedure is to sample the entire pancreas while maintaining anatomical orientation. Endocrine cell heterogeneity in terms of islet composition, size, and numbers is reported for human islets compared to rodent islets 1. Three-dimensional reconstruction of the ventral and dorsal pancreas: a new insight into anatomy and embryonic development. Trim pieces further as needed to fit within cassettes. Number blocks, position cassettes so the label is to the left and place tissue into the cassette, maintaining its orientation. Monogr. Hepatobiliary Pancreat. Metab. An NCI perspective on creating sustainable biospecimen resources. The entire pancreas is processed while maintaining anatomical orientations. The head region is longer in the superior-inferior axis due to the presence of the ventral pancreas is processed while maintaining anatomical orientations. The head region is longer in the superior-inferior axis due to the presence of the ventral pancreas is processed while maintaining anatomical orientations. body-tail junction region may be difficult to obtain in which case the number of paraffin blocks can be decreased to obtain minced samples or only samples from the pancreas head-body region can be obtained. In contrast, the uncinate region contains islets that are primarily composed of pancreatic polypeptide-containing PP cells 2. Actual duration is dependent on numbers of tissues received and ease of finding pancreatic lymph nodes. 2011;42:1-7. These samples are recovered with similar formats as for the pancreas with the addition of cryopreserved cells. To 500 ml bottle of DMEF (with glutamine), follow aseptic techniques while adding the following: Fetal bovine serum (FBS): add 50mL, final 10%. Penicillin/Streptomycin (Pen/Strep, 10,000 U/mL / 10,000 ug/mL stock) - add 5 mL Pen/Strep stock to RPMI for final concentration of 100 U/mL / 100ug/mL. Histochem. Diabetes Metab. Cancer Inst. Processing pancreatic samples in standardized formats will assist with resolving individual patient factors so that other underlying key disease factors can be better resolved. No conflicts of interest declared. The authors thank the donors' families and the Organ Procurement Organizations involved in this research and Maria Martino and Irina Kusmartseva for their expert assistance. Process to paraffin blocks using an automatic processor (Appendix 2). Embed sections in the exact orientation as placed by the prosector with the cassette label to the left. Rev. 1983;24:366-371. [PubMed] [Google Scholar]Wittingen J, Frey CF. The pancreas weights from organ donors without diabetes. PubMed] [Google Scholar]Gianani R. Data are means ±



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