Welcome

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Pipetting Best practices

Maria Hidesand TSS Liquid Handling Solution Nordic

The world leader in serving science



Plan of Learning

- 1
- Air displacement vs. positive displacement pipettes
- Pipette tip selection
- 3 Forward, reverse and repetitive pipetting
 - Accuracy and precision
- 5 Factors affecting pipetting quality
 - Cross-contamination prevention



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How do air displacement pipettes work?

- **Air displacement pipettes** move liquids into and out of disposable pipette tips. They create a partial vacuum with a cushion of air between the piston and the liquid.
 - Adjust the volume settings to move the piston to its final position
 - 2. Press the operating button to the first stop; this expels a volume of air equal to the volume setting
 - 3. Immerse the tip in the liquid and slowly release the operating button; this creates a partial vacuum that draws the liquid into the tip
 - 4. Press the operating button to the first stop again; this compresses the air above the liquid to force the liquid from the tip
 - 5. Press the operating button to the second stop to fully empty the tip, often called "blow out"



How do positive displacement pipettes work?

The piston in a **positive displacement pipette** makes direct contact with the liquid or material, which eliminates any air space between them and creates a constant aspiration force.

- 1. Adjust the volume settings to move the piston to its final position
- 2. Depress the operating button fully; this moves the piston to the end of the pipette tip
- **3**. Immerse the tip in the material and slowly release the operating button; this draws the material into the tip
- Depress the operating button fully again; this moves the piston to force the sample from the tip



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Quick Tips

The pipette, tip, and liquid should all be the **same temperature** — ideally between 20°C and 25°C

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Quick Tips

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Pipettes are **gravimetrically calibrated** at the factory using double deionized grade water

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Quick Tips

Selected tips should be certified free of contamination and recommended by the pipette manufacturer

Quick Tips

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Pipette tips are designed for single use



















For microbiology, genetics, and PCR









Techniques



The Forward Technique

For standard pipetting

Use this method for aqueous solutions, such as buffers, diluted acids, or alkalis. It is commonly used when pipetting and mixing a sample or reagent into another liquid.

Ready position	1	2	3	4
First stop	ļ	Î	1	Î
Second stop			ļ	

- 1. Press the operating button to the first stop
- Dip the tip to a maximum of 1 cm beneath the meniscus into the solution and slowly release the operating button. Allow the tip to fill with careful control of the operating button; hold for a minimum of 3 seconds; withdraw the tip from the liquid
- 3. Gently press the operating button to the first stop to dispense the liquid; wait one second and press the operating button to the second stop to completely empty the tip; then touch off the tip and remove the tip from the vessel by sliding it up the vessel wall
- 4. Release the operating button to the ready position and eject the tip



The Reverse Technique

For high-viscosity or foaming solutions

Ready position	1	2	3	4	5
First stop	Î	Î	ļ		
Second stop			7.3	ļ	

- 1. Press the operating button to the second stop
- Dip the tip to a maximum of 1 cm beneath the meniscus into the solution and slowly release the operating button. Allow the tip to fill with careful control of the operating button; hold for a minimum of 3 seconds; withdraw the tip from the liquid
- Gently press the operating button to the first stop to dispense the liquid and hold the button in position (do not dispense liquid that remains in the tip); remove the tip by sliding it along the vessel wall
- 4. Discard any remaining liquid along with the tip
- 5. Release the operating button to the ready position



For pipetting the same volume repeatedly, e.g., MasterMixes into qPCR plates

Ready position	1
First stop	Î
Second stop	,

1. Press the operating button to the second stop





- 1. Press the operating button to the second stop
- 2. Dip the tip to a maximum of 1 cm beneath the meniscus into the solution and slowly release the operating button. Allow the tip to fill with careful control of the operating button; hold for a minimum of 3 seconds; withdraw the tip from the liquid



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Ready position	1	2	3
First stop	Î	Î	ļ
Second stop	Ţ		

- 1. Press the operating button to the second stop
- 2. Dip the tip to a maximum of 1 cm beneath the meniscus into the solution and slowly release the operating button. Allow the tip to fill with careful control of the operating button; hold for a minimum of 3 seconds for aqueous liquids and a minimum of 5 seconds for viscous liquids; withdraw the tip from the liquid
- 3. Gently press the operating button to the first stop to dispense liquid and hold the button in position; remove the tip by sliding it along the vessel wall



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Ready position	1	2	3	4	
First stop	Î	Î	ļ	1	
Second stop					

- 1. Press the operating button to the second stop
- 2. Dip the tip to a maximum of 1 cm beneath the meniscus into the solution and slowly release the operating button. Allow the tip to fill with careful control of the operating button; hold for a minimum of 3 seconds for aqueous liquids and a minimum of 5 seconds for viscous liquids; withdraw the tip from the liquid
- 3. Gently press the operating button to the first stop to dispense liquid and hold the button in position; remove the tip by sliding it along the vessel wall
- 4. Repeat steps 2 and 3 to continue pipetting



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The Heterogeneous Technique

This technique is used for pipetting heterogeneous samples, such as blood or serum. Typically, prerinsing the tip is not possible, and the full sample should be dispensed for accurate analysis.

Ready position	1	2	3	4	5	6	
First stop	ļ	Î	ļ	Î		Î	
Second stop							

- 1. Press the operating button to the first stop. Dip the tip into the sample. Make sure the tip is sufficiently below the surface.
- 2. Release the operating button slowly to the ready position. This action will fill the tip with the sample. Remove the tip from the solution by sliding it along the wall of the vessel.
- **3**. Dip the tip into the target solution. Make sure the tip is sufficiently below the surface.
- 4. Press the operating button to the first stop and release it slowly to the ready position. Do not remove the tip from the solution. Repeat this process until the interior wall of the tip is clear.
- 5. Remove the tip from the solution by sliding it along the wall of the vessel. Press the operating button to the second stop, and completely empty the tip.
- 6. Release the operating button to the ready position.

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Recommendations for different compounds

Solution/ compound	Examples	Pipette displacement	Тір	Technique	Comments
Aqueous solutions	Buffers, diluted salt solution	Air	Standard	Forward	
Viscous solutions	Protein and nucleic solutions, glycerol, tween 20/40/60/80	Air	Standard, low retention or wide orifice	Reverse	Pipette slowly to avoid bubble formation
		Positive displace	ment		
Volatile	Methanol, hexane	Air	Filter	Forward	Pipette rapidly to avoid evaporation; carbon filter
compounds		Positive displacer	pipettes prevent vapors from entering the pipette		
Nucleotide	Genomic DNA, PCR products	Air	Filter or wide orifice	Forward	Use a wide orifice for
solutions		Positive displacer	mechanical shearing		
Radioactive	(14)Carbonate,	Air	Filter	Forward	
compounds	(3)H-thymidine	Positive displacer			
Acids/alkalis	H ₂ SO ₄ , HCl, NaOH	Air	Filter	Forward	
Toxic samples		Positive displacer			

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Accurate, but not precise

Accurate and precise







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Factors affecting the accuracy of air displacement pipettes



Pipetting position



Inaccuracy 0.6–0.8%

1

Pipette held vertically, tip immersed about 1 cm into liquid. The tip is immersed to the correct depth and correctly held vertically.

2

Pipette held vertically, tip immersed about 3 cm into liquid. Inaccuracy doubles when immersing the tip too deply.

Inaccuracy 1.0–1.2% 3–4 cm

3

Pipette held at 30° to 40° angle, tip immersed about 3 to 4 cm into liquid. Inaccuracy increases 3-5 times by immersing too deeply while holding the pipette at an angle.



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Temperature



- Room temperature
- 15°C/59°F
- 30°C/86°F

Temperature differences cause thermal expansion/shrinking in the air space. After temperature equilibrium, the influencing factor is liquid density. Cold liquid is more dense and hot liquid is less dense than room temperature liquids.



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Viscosity



- Reverse method
- Forward method

In this experiment, 200µL of viscous liquid (glycerol) was pipetted 10 times by using both forward and reverse pipetting techniques.

The pipette used was adjusted for glycerol using forward pipetting.

Using the reverse method:

- Yielded a smaller deviation between doses with greater precision
- Provided bigger doses because the liquid column in the tip was taller and pushed out a larger dose



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Density (mass/volume ratio) affects the liquid volume that is aspirated into the tip, dead air volume, and earth gravity. The density of liquids also varies according to the temperature.

Typical density at 20°C

- 30% glycerol (e.g. PCR MasterMix) the density is 1.08 kg/dm3
- 100% glycerol is 1.260 kg/dm3
- Whole blood is 1.051 kg/dm3
- Ethanol is 0.789 kg/dm3



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Quick Tip

Rinsing the tip 3-5 times with maximum volume with the liquid to be pipetted improves accuracy, especially with volatile solvents.

- Helps eliminate capillary action
- Provides identical contact surface for all aliquots
- Reduces sample hang up
- Helps equalize air temperature inside the tip to sample temperature



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Liquid retention and inaccurate results when pipetting

Checklist for pipetting:

- □ Touch off of the tip.
- After aspiration: withdraw the tip from the liquid, touching it against the edge of the reservoir to remove excess liquid.
- After dispensing: Remove the tip by sliding it along the wall of the vessel. (Some liquid will remain in the tip, and this should not be dispensed.)
- Remove droplets from outside of the tip before dispensing.

- □ Immersion depth of tip: 1 cm (10 mm)
- Always hold pipette vertically (straight).
- Keep pipette and liquid in constant temperature (preferably room temperature).
- Use consistent plunger force and speed. Pause shortly after aspiration to allow liquid settle.
- Note: Finnpipettes are constructed to permit re-adjustment for other pipetting techniques or liquids of different temperature and viscosity. If pipette has been calibrated in forward mode with water, pipetting results in reverse mode with solvent cannot be the same.

Factors affecting the accuracy of pipettes

You - Pipetting gets too tedious and time consuming

- Plate numbers get high? >5-10 plates/day?
- Pipetting small volumes?
- Are you interested in improving reproducibility of your assays?
- Are you looking for an easy way to fill in your 384-well plates?
- Using a microplate dispenser minimizes Repetitive strain Injuries. There is no variation between different persons.

Solution is Automation





Preventing Cross Contamination



Pipette to sample

• Use filter tips, especially barrier tips

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- Regularly clean and decontaminate
- Autoclave

Sample to pipette

- Use filter tips, especially barrier tips
- Keep the pipette vertical
- Steadily control the operating button
- Use a tip rack

Continuous Improvement of Pipetting Techniques

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 Pipetting Maintenance & Calibration: Usage, smaller volume needs to be calibrated more often, regulations, pipetting errors etc.

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Find out more at thermofisher.com/pipettingtechniques

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Thank you

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