



## Mouse anti-Cytokeratin HMW (34βE12)

**Cat. No.: AIB-30064 (1 ml Concentrate); AIB-30065 (0.5 ml Concentrate); AIB-30063 (6 ml Ready-to-use)**

### Instructions for use

#### Intended use

This antibody is designed for the specific localisation of high molecular cytokeratins in formalin-fixed, paraffinembedded tissue sections. Anti-Cytokeratin HMW antibody is intended for in vitro diagnostic use.

#### Specifications

<b>Specificity:</b>	Cytokeratin HMW (High Molecular Weight cytokeratins 1,5,10 and 14)
<b>Immunogen:</b>	Keratin from human stratum corneum
<b>Clone:</b>	34βE12
<b>Isotype:</b>	Mouse IgG1 kappa
<b>Species reactivity:</b>	Human +, dog+, horse +, rabbit +, rat+, others not tested

#### Summary and Description

Cytokeratins (CK) are intermediate filaments that constitute the cytoskeletal structure of virtually all epithelial but also of some non-epithelial cells. According to R. Moll they are divided into Type I (acidic cytokeratins, CK9 to 20) and Type II (basic cytokeratins, CK1 to 8) cytokeratins. Each Type I cytokeratin is co-expressed with a Type II cytokeratin inside a single cell. Hence, it follows that all epithelial cells contain at least two different cytokeratins. Only CK19 is expressed unpaired.

Cytokeratins can also be characterised by their molecular weight as low molecular (CK7 and 8 and CK17 to 20) or high molecular weight cytokeratins (CK1 to 6 and CK9 to 16). The antibody of clone 34βE12 detects the high molecular weight cytokeratins 1, 5, 10 and 14.

Usually, high molecular weight cytokeratins are detectable in squamous cell epithelia. Staining of cytokeratins with this antibody is useful for detection of the basal cell layer of several tissue types. In this context it is frequently used for staining of benign glands of the prostate.

#### Reagent provided








Mouse monoclonal antibody in buffer with carrier protein and preservative for stabilisation in the following formats:

<b>Concentrate:</b>	1 ml	(Cat. No. AIB-30064)
<b>Concentrate:</b>	0.5 ml	(Cat. No. AIB-30065)
<b>Ready-to-use:</b>	6 ml	(Cat. No. AIB-30063)

#### Dilution of primary antibody

Dilution of Nordic Biosite' concentrated antibody depends on the detection system used. The final working dilution must always be determined by the user. The elaboration of staining protocol should be done by an experienced specialist. For Nordic Biosite' recommendations see chapter 'Staining procedure'.

Explanations of the symbols on the product label:

	Catalog Number Bestellnummer Reference du catalogue		Batch Code Chargenbezeichnung Code du lot	 Manufacturer  Nordic BioSite AB Propellervägen 4A S-183 62 Täby Sweden Tel: +46 (0)8 5444 33 40 Fax: +46 (0)8 756 94 90 info@nordicbiosite.com www.nordicbiosite.com
	Use By Verwendbar bis Utiliser jusqu'à		In Vitro Diagnostic Medical Device In vitro Diagnostikum Dispositif médical de diagnostic in vitro	
	Consult Instructions for use Gebrauchsanweisung beachten Consulter les instructions d'utilisation		Temperature Limitation Lagerungstemperatur Limites de température	

## Storage and handling

The antibody should be stored at 2-8°C without further dilution.

Dilutions of the concentrated antibody should be done with a suitable antibody dilution buffer (e.g. BCB-20005/BCB-20006 from Nordic Biosite). The diluted antibody should be stored at 2-8°C after use. Stability of this working solution depends on various parameters and has to be confirmed by appropriate controls. The antibody provided is suitable for use until the expiry date indicated on the label, if stored at 2-8°C. Do not use product after the expiry date.

Positive and negative controls should be run simultaneously with all specimens. If unexpected staining is observed which cannot be explained by variations in laboratory procedures and a problem with the antibody is suspected, contact Nordic Biosite's technical support or your local distributor.

## Precautions

Use through qualified personnel only.

Wear protective clothing to avoid contact of reagents and specimens with eye, skin and mucous membranes. If reagents or specimens come in contact with sensitive area, wash with large amounts of water.

Microbial contamination of the reagent must be avoided, since otherwise non-specific staining may occur.

Sodium azide (NaN<sub>3</sub>), used for stabilisation, is not considered hazardous material in the concentration used.

Reaction of sodium azide with lead or copper in drainage pipes can result in the formation of highly explosive metallic azides. Sodium azide should be discarded in a large volume of running water to avoid formation of deposits. Material safety data sheets (MSDS) are available upon request.

## Staining procedure

Refer to the following table for conditions specifically recommended for this antibody. Also refer to detection system data sheets for guidance on specific staining protocols or other requirements.

### Parameters

\*Pre-treatment

### Nordic BioSites recommendations

Heat Induced Epitope Retrieval (For example in Citrate Buffer pH 6.0 (BCB-20015/-20016) *(Good results also with enzymatic digestion using pepsin or pronase)*

\*Control tissue

Skin

\*Working dilution

1:20-1:50 (for concentrates)

\*Incubation time

30-60 minutes

## Quality control

The recommended positive control tissues for this antibody are skin, adeno- or squamous cell carcinomas. We recommend carrying out a positive and a negative control with every staining run. Please refer to the instructions of the detection system for guidance on general quality control procedures.








## Troubleshooting

If you observe unusual staining or other deviations from the expected results please read these instructions carefully, refer to the instructions of the detection system for relevant information or contact your local distributor.

## Expected results

This antibody stains positive in the cytoplasm of epithelial cells in formalin-fixed, paraffin-embedded tissue sections. Interpretation of the staining results is solely the responsibility of the user. Any experimental result should be confirmed by a medically established diagnostic procedure.

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### Limitations of the Procedure

Immunohistochemistry is a complex technique involving both histological and immunological detection methods. Tissue processing and handling prior to immunostaining, for example variations in fixation and embedding or the inherent nature of the tissue can cause inconsistent results (Nadji and Morales, 1983). Endogenous peroxidase, alkaline phosphatase or biotin may cause non-specific staining depending on the detection system used. Tissues containing Hepatitis B Surface Antigen (HBsAg) may give false positive results with HRP (horse radish peroxidase) detection systems (Omata et al, 1980). Inadequate counterstaining and mounting can influence the interpretation of the results.

Nordic Biosite warrants that the product will meet all requirements described from its shipping date until the expiry date is reached, if the product is stored and utilised as recommended. No additional guarantees can be given. Under no circumstances shall Nordic Biosite be liable for any damages arising out of the use of the reagent provided.

### Performance characteristics

Nordic Biosite has conducted studies to evaluate the performance of the antibody for use with a standard detection system. The product has been found to be sensitive and specific to the antigen of interest with minimal or no cross-reactivity.

### Bibliography

Moll R et al. Cell 31:11-24, 1982

Sturm N et al. Histopathol 42:156-166, 2003

Yang XJ et al. Am J Surg Pathol 26:921-925, 2002

Shah IA et al. Mod Pathol 4:220-224








Nadji M and Morales AR Ann N.Y. Acad Sci 420:134-9, 1983  
Omata M et al. Am J Clin Pathol 73(5): 626-32, 1980

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