

Instructions For Use RA0037-C.5-IFU-RUO

**Revision: 1** 

Rev. Date: Sept. 26, 2014

Page 1 of 2

P.O. Box 3286 - Logan, Utah 84323, U.S.A. - Tel. (800) 729-8350 - Tel. (435) 755-9848 - Fax (435) 755-0015 - www.scytek.com

# CD5 (Mantle Cell Lymphoma Marker); Clone C5/473 & CD5/54/F6 (Concentrate)

Availability/Contents:		<u>Item #</u> BA0037-C.5	Volume 0.5 ml
Desc	ription:		
	Species:	Mouse	
	Immunogen:	Human CD5 recombinant protein (C5/473); A synthetic peptide from the intracellular region of human CD5 (CD5/54/F6)	
	Clone:	C5/473 & CD5/54/F6	
	lsotype:	IgG1, kappa (C5/473) & IgG1, kappa (CD5/54/F6)	
	Entrez Gene ID: 921 (Human) Hu Chromosome Loc.: 11q12.2		
	Synonyms:	CD5 antigen (p56 62), LEU1, Ly12, LyA, Lymphocyte antigen T1/Leu-1, Lymphocyte glycoprotein T1/Leu1, T-cell surface glycoprotein CD5	
Mol. Weight of Antigen: 67kDa		67kDa	
	Format:	200µg/ml of Ab purified from Bioreactor Concentrate by Protein A/G. Prepared in 10mM PBS with 0.05% BSA & 0.05% azide. Recognizes a 67kDa transmembrane protein, which is identified as CD5. Anti-CD5 does not react with granulocytes or monocytes.	
	Specificity:		
	Background:	The CD5 antigen is found on 95% of thymocytes and 72% of peripheral blood lymphocytes. In lymph nodes, the main reactivity is observed in T-cell areas. Anti-CD5 is a pan T-cell marker that also reacts with a range of neoplastic B-cells, e.g. chronic lymphocytic leukemia/small lymphocytic lymphoma (CLL/SLL), mantle cell lymphoma, and a subset (~10%) of diffuse large B-cell lymphoma. CD5 aberrant expression is useful in making a diagnosis of mature T-cell neoplasms. Anti-CD5 detection is diagnostic in CLL/SLL within a panel of other B-cell markers, especially one that includes anti-CD23. Anti-CD5 is also very useful in differentiating among mature small lymphoid cell malignancies. In addition, anti-CD5 can be used in distinguishing thymic carcinoma (+) from thymoma (-).	
	Species Reactivity:	Human. Others not known.	
	Positive Control:	293T, Ramos, or MOLT-4 Cells. Tonsil.	
	Cellular Localization:	Cell surface	
	Titer/ Working Dilution:	Immunohistochemistry (F Flow Cytometry: Immunofluorescence: Western Blotting: Immunoprecipitation:	rozen and Formalin-fixed): 0.5-1 μg/ml 0.5-1 μg/million cells 0.5-1 μg/ml 0.5-1 μg/ml 0.5-1 μg/500μg protein lysate
Microbiological State: This product is not sterile.		This product is not sterile	





### CE

EC REPEmergoEurope (31)(0) 70 345-8570Molsnstraat 152513 BH Hague, The Netherlands



# Instructions For Use RA0037-C.5-IFU-RUO

Rev. Date: Sept. 26, 2014

Revision: 1 Page 2 of 2

P.O. Box 3286 - Logan, Utah 84323, U.S.A. - Tel. (800) 729-8350 - Tel. (435) 755-9848 - Fax (435) 755-0015 - www.scytek.com

**Uses/Limitations:** 

Not to be taken internally. For Research Use Only. This product is intended for qualitative immunohistochemistry with normal and neoplastic formalin-fixed, paraffin-embedded tissue sections, to be viewed by light microscopy. Do not use if reagent becomes cloudy. Do not use past expiration date. Non-Sterile.



Formalin-paraffin tonsil stained with CD5; Clone C5/473 & CD5/54/F6.

### Procedure:

- 1. **Tissue Section Pretreatment (Required):** Staining of formalin fixed, paraffin embedded tissue sections is significantly enhanced by pretreatment with Citrate Plus (ScyTek catalog# CPL500).
- Primary Antibody Incubation Time: We suggest an incubation period of 30 minutes at room temperature. However, depending upon the fixation conditions and the staining system employed, optimal incubation should be determined by the user.
- 3. **Visualization:** For maximum staining intensity we recommend the "UltraTek HRP Anti-Polyvalent Lab Pack" (ScyTek catalog# UHP125, see IFU for instructions) combined with the "DAB Chromogen/Substrate Bulk Pack (High Contrast)" (ScyTek catalog# ACV500, see IFU for instructions).

 Precautions:
 Contains Sodium Azide as a preservative (0.09% w/v).

 Do not pipette by mouth.
 Avoid contact of reagents and specimens with skin and mucous membranes.

 Avoid microbial contamination of reagents or increased nonspecific staining may occur.
 This product contains no hazardous material at a reportable concentration according to U.S. 29 CFR 1910.1200, OSHA Hazardous Communication Standard and EC Directive 91/155/EC.

### **References:**

1. Ferry JA et. al. American Journal of Clinical Pathology, 1996, 105(1):31-7.

Ordering Information and Current Pricing at www.scytek.com

2. Gagneten D et. al. Diagnostic Cytopathology, 1996, 14(1):32-7.

Warranty: No products or "Instructions For Use (IFU)" are to be construed as a recommendation for use in violation of any patents. We make no representations, warranties or assurances as to the accuracy or completeness of information provided on our IFU or website. Our warranty is limited to the actual price paid for the product. ScyTek Laboratories, Inc. is not liable for any property damage, personal injury, time or effort or economic loss caused by our products. Immunohistochemistry is a complex technique involving both histological and immunological detection methods. Tissue processing and handling prior to immunostaining can cause inconsistent results. Variations in fixation and embedding or the inherent nature of the tissue specimen may cause variations in results. Endogenous peroxidase activity or pseudoperoxidase activity in erythrocytes and endogenous biotin may cause non-specific staining depending on detection system used.

8° C Storage: 2° C



ScyTek Laboratories, Inc. 205 South 600 West Logan, UT 84321 U.S.A.



EC REPEmergoEurope (31)(0) 70 345-8570Molsnstraat 152513 BH Hague, The Netherlands