

# Instructions For Use A00001-C-IFU-IVD

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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

# Actin, Muscle Specific; Clone HHF35 (Concentrate)

 Catalog Number
 Volume

 A00001-C.1
 0.1 ml

 A00001-C
 1 ml

**Description** 

Species: Mouse

Immunogen: SDS extract of human myocardium.

Clone: HHF35 lgG1, Kappa.

Format: 200ug/ml of Ab purified from Bioreactor Concentrate by Protein

A/G. Prepared in 10mM PBS with 0.05% BSA & 0.05% azide.

Specificity: This antibody recognizes actin of skeletal, cardiac, and smooth muscle cells. It is not reactive with other mesenchymal cells

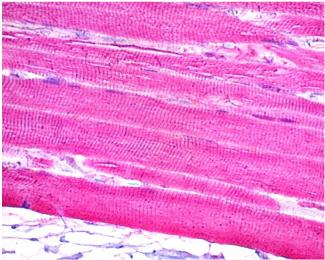
except for myoepithelium.

Species Reactivity: Human, Rabbit, Rat and Pig. Others-not known

Positive Control: Muscle or sarcoma.
Cellular Localization: Cytoplasmic

Titer/Working Dilution: Immunohistochemistry (Formalin-Fixed): 1:100 - 1:200

Microbiological State: Nonsterile.



Human Skeletal Muscle stained using Actin, Muscle Specific; Clone HHF35. Pretreatment with Citrate Plus (10x) HIER Solution for 5 minutes, PolyTek Anti-Mouse Polymerized Alk-Phos and Permanent Red Chromogen/Substrate. Counterstained with Hematoxylin, Mayer's (Lillie's Modification). Final magnification 400X.

#### Intended Use

For In Vitro Diagnostic use. This antibody is intended for the qualitative visualization of the anatomical elements listed in the Specificity section. It is intended to be used within an Immunohistochemistry (IHC) procedure on formalin-fixed paraffin-embedded (FFPE) human tissue followed by visualization by light microscopy. Any diagnostic interpretation of the results of this antibody is to be complemented by morphological studies using proper controls and should be evaluated within the context of the patient's clinical history and other diagnostic tests by a qualified pathologist.

#### Procedure

- 1. **Tissue Section Pretreatment (Optional):** Staining of formalin fixed, paraffin embedded tissue sections may be enhanced by pretreatment with Citrate Plus (ScyTek catalog# CPL500).
- 2. **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 "CRF Anti-Polyvalent HRP Polymer" (ScyTek catalog# ABZ125, see IFU for instructions) combined with the "DAB Chromogen/Substrate Bulk Pack (High Contrast)" (ScyTek catalog# ACV500, see IFU for instructions).

### Materials and Reagents Required but not Provided

- 1. Control tissue and reagents
- 2. Xylene, graded alcohols, and deionized/distilled water
- 3. IHC detection system. Suggested: ScyTek Cat# ABZ125 "CRF Anti-Polyvalent HRP Polymer" and ScyTek Cat# ACV500 "DAB Chromogen/Substrate Kit (High Contrast)".
- 4. Wash buffer for rinses (ScyTek Cat# TBT500)
- 5. Retrieval solution (ScyTek Cat# CPL500)
- 6. Hematoxylin counterstain and bluing reagent (ScyTek Cat# HMM500 and BRT500)
- 7. Mounting medium and coverslips

**Note:** ScyTek Laboratories has a wide range of IHC reagents and ancillaries that can be found at scytek.com.

### **Storage and Stability**

Do not Freeze. Store at 2-8°C. Return to 2-8° immediately after use. Do not use after expiration date printed on label. Verify visually that antibody has not been contaminated before use. Do not use if reagent becomes cloudy or precipitates.

## Limitations

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. This data sheet's recommendations and procedures were validated using ScyTek IHC reagents and may not be suitable for other detection systems.

#### **Precautions**

- 1. Contains Sodium Azide as a preservative (0.09% w/v), do not ingest. Sodium Azide may react with lead and copper plumbing to form highly explosive metal azides. Upon disposal, flush with large volumes of water to prevent azide build-up in plumbing. 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.
- 2. Do not pipette by mouth.
- 3. Avoid contact of reagents and specimens with skin and mucous membranes.

Storage: 2° C 8° C

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EC REP

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- 4. Avoid microbial contamination of reagents or increased nonspecific staining may occur.
- 5. The user must validate any procedures and recommendations that differ from this data sheet.
- 6. The SDS may be found at scytek.com

#### References

- Kojima M, Nakamura S, Itoh H, Suchi T, Masawa N. Inflammatory pseudotumor of the submandibular gland: report of a case presenting with autoimmune disease-like clinical manifestations. Archives of pathology & laboratory medicine. 2001 Aug;125(8):1095-7.
- Koide O, Matsuzaka K, Tanaka Y. Multiple giant angiomyolipomas with a polygonal epithelioid cell component in tuberous sclerosis: an autopsy case report. Pathology international. 1998 Dec;48(12):998-1002.
- 3. Tsukada T. et. al. Am J Pathol 1987, 126:51.
- 4. Tsukada T. et. al. Am J Pathol 1987, 127:389.

### **Warranty**

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