

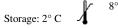
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P.O. Box 3286 - Logan, Utah 84323, U.S.A. - Tel. (800) 729-8350 - Tel. (435) 755-9848 - Fax (435) 755-0015 - www.scytek.com

# Kappa Light Chain (B-Cell marker); Clone KLC264 (Concentrate)

Availability/Contents:	<u>ltem #</u> RA0149-C.5	Volume 0.5 ml
Description:		
Species: Immunogen: Clone: Isotype: Entrez Gene ID: Hu Chromosome Loc.: Synonyms: Mol. Weight of Antigen:	Mouse Recombinant human Ig kappa chain KLC264 IgG1, kappa 3514 (Human) 2p11.2 HCAK1; Ig Kappa Chain C Region; IGKC; Immunoglobulin KM ~22.5kDa	
Format:	200µg/ml of Ab purified from Bioreactor Concentrate by Protein A/G. Prepared in 1mM PBS with 0.05% BSA & 0.05% azide.	
Specificity:	This monoclonal antibody is specific to the kappa light chain of immunoglobulins and shows no cross-reaction with the lambda light chain or any of the five heavy chains.	
Background:	In mammals, the two light chains in an antibody are always identical, with only one type of light chain, kappa or lambda. The ratio of kappa to lambda is 70:30. However, with the occurrence of multiple myeloma or other B-cell malignancies, this ratio is disturbed. An antibody to the kappa light chain is reportedly useful in the identification of leukemias, plasmacytomas, and certain non-Hodgkin's lymphomas. Demonstration of clonality in lymphoid infiltrates indicates that the infiltrate is malignant.	
Species Reactivity: Positive Control: Cellular Localization: Titer/ Working Dilution:	Human. Others not known.293T, Raji or hPBL cells. Tonsil or Spleen.Cell surface, cytoplasmic and secretedImmunohistochemistry (Frozen and Formalin-fixed):0.5-1 μg/million cellsWestern Blotting:0.5-1 μg/mlImmunoprecipitation:1-2 μg/500μg protein lysate	
Microbiological State:	This product is not sterile.	







CE

Ec REP EmergoEurope (31)(0) 70 345-8570 Molsnstraat 15 2513 BH Hague, The Netherlands

Doc: IFU-Template2-8rev2



# Instructions For Use RA0149-C.5-IFU-RUO

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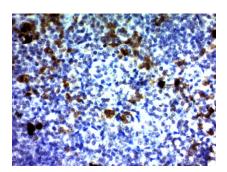
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**Uses/Limitations:** 

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.



## Ordering Information and Current Pricing at www.scytek.com

### 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).
- 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 "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).

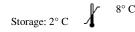
 Precautions:
 Contains Sodium Azide as a preservative (0.09% w/v).

 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. Takahashi H et. al. Pathol Res Prac 189:300-311 (1993).
- 2. Momose H et. al. Hum Pathol. 23:1115-1119 (1992).
- 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.





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



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