





Podocalyxin (PODXL) (Hematopoietic Stem Cell Marker); Clone 3D3 (Concentrate)

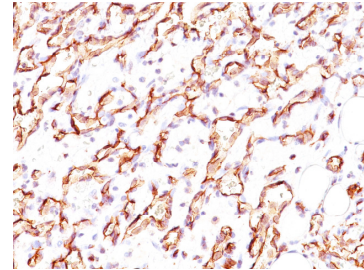
Availability/Contents:	<u>Item #</u>	<u>Volume</u>
	RA0264-C.5	0.5 ml
Description:		
Species:	Mouse	
Immunogen:	A recombinant protein fragment containing the intracellular, transmembrane, and part of the extracellular domain of human podocalyxin	
Clone:	3D3	
Isotype:	IgG1	
Entrez Gene ID:	5420 (Human)	
Hu Chromosome Loc.:	7q32.3	
Synonyms:	PODXL, PDXL, GCTM-2; Gp200; PCLP1; Pcx; Podocalyxin-like protein 1	
Mol. Weight of Antigen:	165-170kDa	
Format:	200µg/ml of Ab purified from Bioreactor Concentrate by Protein A/G. Prepared in 10mM PBS with 0.05% BSA & 0.05% azide.	
Specificity:	The podocalyxin antibody can identify podocytes in the urine (podocyturia) that may indicate glomerular disease, pre-eclampsia, and other kidney pathology.	
Background:	Podocalyxin is a member of the CD34 transmembrane sialomucin family. It is over-expressed on the podocyte foot projections in the kidney glomeruli and plays essential roles in kidney development and homeostasis, blood filtration and urine formation. It is also expressed on vascular endothelia, hematopoietic progenitors, and a subset of neurons. Overexpression of podocalyxin may be linked to more aggressive tumor behavior.	
Species Reactivity:	Human, Rabbit, and Rat. Others not known.	
Positive Control:	HeLa, Raji, Jurkat cells, and angiosarcoma.	
Cellular Localization:	Cell surface and cytoplasmic	
Titer/ Working Dilution:	Immunohistochemistry (Frozen and Formalin-fixed): 0.5-1 µg/ml	
	Flow Cytometry:	0.5-1 µg/million cells
	Immunofluorescence:	1-2 µg/ml
	Western Blotting:	0.5-1 µg/ml
	Immunoprecipitation:	1-2 µg/500µg protein lysate
Microbiological State:	This product is not sterile.	

Storage: 2° C  8° C

 ScyTek Laboratories, Inc.
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U.S.A.


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Molsnstraat 15
2513 BH Hague, The Netherlands

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-fixed, paraffin-embedded angiosarcoma stained with Podocalyxin; Clone 3D3.

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. Kershaw DB *et. al.* J Biol Chem 272:15708-15714 (1997).
2. Sassetti C *et. al.* J Exp Med 187:1965-1975.
3. Nielsen JS *et. al.* J Am Soc Nephrol 20:1669-1676 (2009).

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.

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