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

PGP9.5 / UchL1 (pan-Neuronal Marker); Clone 31A3
(Concentrate)

Availability/Contents:

Item #	**Volume**
RA0333-C.5	0.5 ml

Description:

Species:	Mouse
Immunogen:	Native UchL1 (PGP9.5) protein from brain
Clone:	31A3
Isotype:	IgG1, kappa
Entrez Gene ID:	7345 (Human); 29545 (Rat)
Hu Chromosome Loc.:	4p13
Synonyms:	Gracile Axonal Dystrophy; Neuron Cytoplasmic Protein 9.5; Park5; Parkinson Disease 5; PGP95; Protein Gene Product 9.5; Ubiquitin Carboxyl-terminal Esterase L1; Ubiquitin Carboxyl-terminal Hydrolase Isozyme L1; Ubiquitin Thioesterase L1; Ubiquitin Thiolesterase L1.
Mol. Weight of Antigen:	20-30kDa
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:	This antibody reacts with a protein of 20-30kDa, identified as PGP9.5, also known as ubiquitin carboxyl-terminal hydrolase-1 (UchL1).
Background:	Initially, PGP9.5 expression in normal tissues was reported in neurons and neuroendocrine cells, but later it was found in distal renal tubular epithelium, spermatogonia, Leydig cells, oocytes, melanocytes, prostatic secretory epithelium, ejaculatory duct cells, epididymis, mammary epithelial cells, Merkel cells, and dermal fibroblasts. Furthermore, immunostaining for PGP9.5 has been shown in a wide variety of mesenchymal neoplasms as well. A mutation in PGP9.5 gene is believed to cause a form of Parkinson's disease.
Species Reactivity:	Human, Mouse, Rat, Cow, and Pig. Others not known.
Positive Control:	Cerebellum
Cellular Localization:	Cytoplasmic, Endoplasmic Reticulum membrane
Titer/ Working Dilution:	Immunohistochemistry (Frozen and Formalin-fixed): 0.5-1 µg/ml Western Blotting: 0.5-1 µg/ml
Microbiological State:	This product is not sterile.

Storage: 2° C 8° C

ScyTek Laboratories, Inc.
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2513 BH Hague, The Netherlands

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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. Day IN *et. al.* Biochem Society Trans 14:350-351 (1986).

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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