

Cytokeratin 20 (KRT20) (Colorectal Epithelial Marker); Clone Ks20.8 (Concentrate)

Availability/Contents:

<u>Item #</u>	<u>Volume</u>
RA0626-C.1	0.1 ml
RA0626-C.5	0.5 ml
RA0626-C1	1 ml

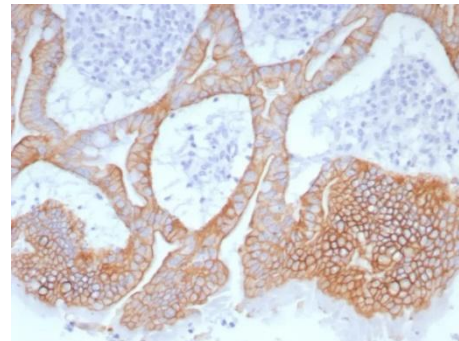
Description:

Species:	Mouse
Immunogen:	Recombinant fragment of human KRT20 protein (around aa 196-323) (exact sequence is proprietary)
Clone:	Ks20.8
Isotype:	IgG1 / Kappa
Entrez Gene ID:	54474
Hu Chromosome Loc.:	17q21.2
Synonyms:	Keratin, type I cytoskeletal 20, Cytokeratin-20, Keratin-20, Protein IT, CK20; Cytokeratin-20; K20; KA20; Keratin 20; keratin 20, type I; Keratin type I cytoskeletal 20; Keratin-20; KRT20
Mol. Weight of Antigen:	46kDa
Format:	200ug/ml of antibody purified from Bioreactor Concentrate by Protein A/G. Prepared in 10mM PBS with 0.05% BSA & 0.05% azide.
Specificity:	This MAb recognizes an intermediate filament protein of 46kDa, identified as cytokeratin 20 (KRT20).
Background:	KRT20 is abundantly expressed in goblet cells and enterocytes of the gastrointestinal tract. It is a useful marker of pancreatic and colorectal cancer. KRT20 is expressed under normal, hyperplastic and neoplastic conditions. It has been detected in adenocarcinomas of the colon, stomach and biliary tract. Breast carcinomas are generally non-reactive.
Species Reactivity:	Human
Positive Control:	HT29 cells. Human colon or prostate carcinoma.
Cellular Localization:	Cytoplasm
Titer/ Working Dilution:	Immunohistochemistry (Frozen and Formalin-fixed): 1-2 µg/ml
Microbiological State:	This product is not sterile.

Storage: 2° C  8° C

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

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.



IHC analysis of formalin-fixed, paraffin-embedded human colon. CK20 Mouse Monoclonal Antibody (Ks20.8). HIER: Tris/EDTA, pH9.0, 45min. 2°C: HRP-polymer, 30min. DAB, 5min.

Ordering Information and Current Pricing at www.scytek.com

Procedure:

- Tissue Section Pretreatment (Highly Recommended):** Staining of formalin fixed, paraffin embedded tissue sections is significantly enhanced by pretreatment with Tris-EDTA HIER Solution (10x) pH 9.0 (ScyTek catalog# TES500) or Citrate Plus (10x) HIER Solution (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.
- 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:

- Moll, R., et al. 1993. Differentiation 53: 75-93
- Wauters, C.C., et al. 1995. Hum. Pathol. 26: 852-855

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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