

Recombinant PMS2 (Postmeiotic Segregation Increased 2); Clone PMS2/4373R (Concentrate)

Availability/Contents:	Item #	Volume
	RA0882-C.1	0.1 ml
	RA0882-C.5	0.5 ml
	RA0882-C1	1 ml

Description:

Species:	Rabbit
Immunogen:	Synthetic peptide corresponding to residues within aa1-100 of human PMS2 (exact sequence is proprietary)
Clone:	PMS2/4373R
Isotype:	IgG / Kappa
Entrez Gene ID:	5395
Hu Chromosome Loc.:	7p22.2
Synonyms:	Mismatch repair endonuclease PMS2, DNA mismatch repair protein PMS2, PMS1 protein homolog 2, DNA mismatch repair protein PMS2; hereditary non-polyposis colorectal cancer type 4 (HNPCC4); Mismatch repair gene PMSL2; PMS1 protein homolog 2; postmeiotic segregation increased 2 (S. cerevisiae); PMS2CL
Mol. Weight of Antigen:	96kDa
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:	Recognizes a protein of 96kDa, identified as PMS2.
Background:	PMS2 is involved in DNA mismatch repair. It forms a heterodimer with MLH1 and this complex interacts with other complexes bound to mismatched bases. Defects in PMS2 are the cause of hereditary non-polyposis colorectal cancer type 4 (HNPCC4). Mutations in more than one gene locus can be involved alone or in combination in the production of the HNPCC phenotype (also called Lynch syndrome). Most families with clinically recognized HNPCC have mutations in either MLH1 or MSH2 genes. HNPCC is an autosomal, dominantly inherited disease associated with marked increase in cancer susceptibility. It is characterized by a familial predisposition to early onset colorectal carcinoma (CRC) and extra-colonic cancers of the gastrointestinal, urological and female reproductive tracts. HNPCC is reported to be the most common form of inherited colorectal cancer in the Western world, and accounts for 15% of all colon cancers. Defects in PMS2 are a cause of mismatch repair cancer syndrome (MMRCS); also known as Turcot syndrome or brain tumor-polyposis syndrome 1 (BTSP1). MMRCS is an autosomal dominant disorder characterized by malignant tumors of the brain associated with multiple colorectal adenomas. Skin features include sebaceous cysts, hyperpigmented and cafe au lait spots.
Species Reactivity:	Human
Positive Control:	HeLa or Jurkat cells. Human colon carcinoma.
Cellular Localization:	Nucleus

Storage: 2° C  8° C



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

Instructions For Use RA0882-C-IFU-RUO

Rev. Date: Feb 26, 2025

Revision: 1

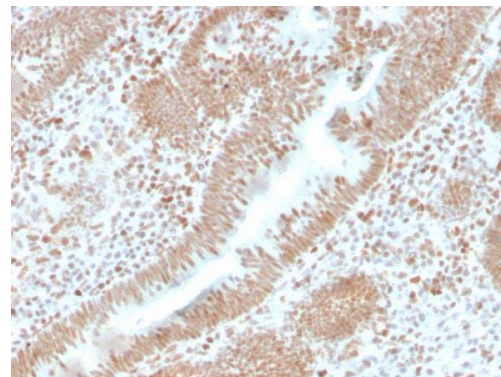
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Titer/ Working Dilution: Immunohistochemistry (Frozen and Formalin-fixed): 1-2µg/ml
Immunofluorescence: 1-3µg/ml
Flow Cytometry: 1-2µg/million cells
Western Blot: 2-4µg/ml

Microbiological State: This product is not sterile.

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 human colon carcinoma stained with PMS2 Recombinant Rabbit Monoclonal Antibody (PMS2/4373R).

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 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.

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.

Storage: 2° C  8° C



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