



Recombinant p40 (deltaNp63) (Squamous, Basal & Myoepithelial Cell Marker); Clone P40/8225R (Concentrate)

Availability/Contents:	<u>Item #</u>	<u>Volume</u>
	RA0674-C.1	0.1 ml
	RA0674-C.5	0.5 ml
	RA0674-C1	1 ml

Description:

Species:	Rabbit
Immunogen:	Recombinant fragment (around aa1-200) of human TP63 protein (exact sequence is proprietary)
Clone:	P40/8225R
Isotype:	IgG / Kappa
Entrez Gene ID:	8626
Hu Chromosome Loc.:	3q28
Synonyms:	Tumor protein 63, Chronic ulcerative stomatitis protein, Keratinocyte transcription factor KET, Transformation-related protein 63, Tumor protein p73-like, p40, p51, deltaNp63, TP63
Mol. Weight of Antigen:	40kDa
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 40kDa weight identified as p63.
Background:	p63 consists of two major isoforms-TAp63 and delta-Np63. These isoforms differ in the structure of the N-terminal domains. The TAp63 isoform (identified by anti-p63 antibody) contains a transactivation-competent TA domain with homology to p53, which regulates the expression of the growth-inhibitory genes. In contrast, DNp63 isoform (identified by anti-p40 antibody) contains an alternative transcriptionally-inactive delta-N domain, which antagonizes the activity of TAp63 and p53. The p40 (clone P40/8225R) antibody recognizes exclusively delta-Np63 but not TAp63. p40 is a squamous cell carcinoma specific antibody. It reacts with the vast majority of cases of squamous cell carcinomas of various origins, but not with adenocarcinomas. It is particularly useful in differentiating lung squamous cell carcinoma from lung poorly differentiated adenocarcinoma. p40 antibody can also be used as an alternative basal cell/myoepithelial cell marker, which has similar sensitivity and specificity as that of p63 antibody. Therefore, p40 antibody may also be used as an alternative immunohistochemical marker for determining prostate adenocarcinoma vs. benign prostate glands and for determining breast intraductal carcinoma vs. invasive breast ductal carcinoma.
Species Reactivity:	Human
Positive Control:	HeLa cells. Human prostate or lung tissue (IHC)
Cellular Localization:	Nucleus
Titer/ Working Dilution:	Immunohistochemistry (Frozen and Formalin-fixed): 1-2 µg/ml
Microbiological State:	This product is not sterile.

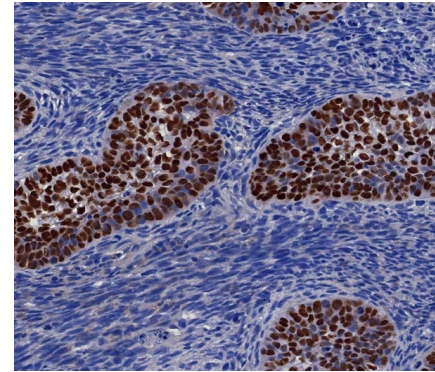
Storage: 2° C  8° C



ScyTek Laboratories, Inc.
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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.



Formalin-fixed, paraffin-embedded human lung carcinoma stained with p40 Recombinant Rabbit Monoclonal Antibody (P40/8225R). HIER: Tris/EDTA, pH9.0, 45min. 2: HRP-polymer, 30min. DAB, 5min.

Ordering Information and Current Pricing at www.scytek.com

Procedure:

1. **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).
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. Signoretti S, et al. Am J Pathol. 2000; 157(6):1769-75
2. Terry J, et al. Am J Surg Pathol. 2010; 34(12):1805-11

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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