

BCL-2 clone 124

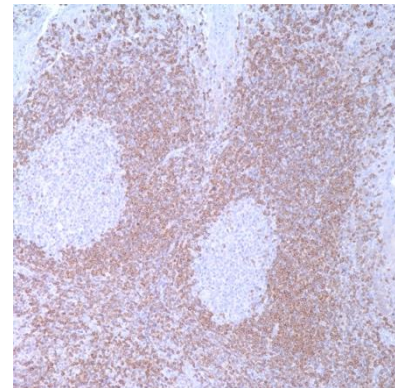
Instructions for Use

Specification:

Anti-BCL2 has shown consistent negative reaction on reactive germinal centers and positive staining of neoplastic follicles in follicular lymphoma. Consequently, this antibody is valuable when distinguishing between reactive and neoplastic follicular proliferation in lymph node biopsies. This antibody may also be used in distinguishing between those follicular lymphomas that express BCL2 protein and the small number in which the neoplastic cells are BCL2 negative. Anti-BCL2 has been used as a predictive biomarker for recurrence in the case of radical prostatectomy for prostate cancer and has shown promise as a prognostic marker in the case of cancer of the breast and non-small cell carcinoma of the lung.

Availability:

Catalog No.	Contents	Volume
ILM2263-C01	BCL-2 clone 124	0,1 ml concentrate
ILM2263-C05	BCL-2 clone 124	0,5 ml concentrate
ILM2263-C1	BCL-2 clone 124	1,0 ml concentrate



Intended use: For Research Use Only

Reactivity: Human

Clone: 124

Species of origin: Mouse

Isotype: IgG_{1κ}

Control Tissue: Tonsil

Staining: Cytoplasmic, Nuclear membrane

Immunogen: Synthetic peptide corresponding to Bcl-2 aa 51-54

Presentation: Bioreactor Concentrate with 0.05% Azide

Application and suggested dilutions:

Pre-treatment: Heat induced epitope retrieval in 10 mM citrate buffer, pH6.0, or in 50 mM Tris buffer pH9.5, for 20 minutes is required for IHC staining on formalin-fixed, paraffin embedded tissue sections.

- Immunohistochemical staining of cryostat tissue sections (dilution up to 1:200-1:400)
- Immunohistochemical staining of formalin-fixed, paraffin embedded tissue section (dilution up to 1:200-1:400)
- Western Blotting

The optimal dilution for a specific application should be determined by the investigator.

Note: Dilution of the antibody in 10% normal goat serum followed by a goat anti-mouse secondary antibody-based detection is recommended.

Storage & Stability: Store at 2-8 °C. Do not use after expiration date printed on the vial.

References:

- 1) Tsujimoto, Y, et al., *Prac Natl Acad Scie (USA)* 1986;83:5214-5218
- 2) Cleary, ML, et al., *Cell* 1986;47:19-28
- 3) Pezzella, F, et al., *Am J Pathol* 1990;137:225-232
- 4) Hockenbery, D, et al., *Nature* 1990;348:334-336
- 5) Moul JW et al. *Eur urol.* 1999;35(5-6): 399-407
- 6) Ciocca DR, Elledge R. *Endocrine* 2000 Aug;13(1): 1-10
- 7) Martin B et al. *Br J Cancer.* 2003 Jul 7;89(1): 55-64