

Cytokeratin 18/KRT18 clone MX035

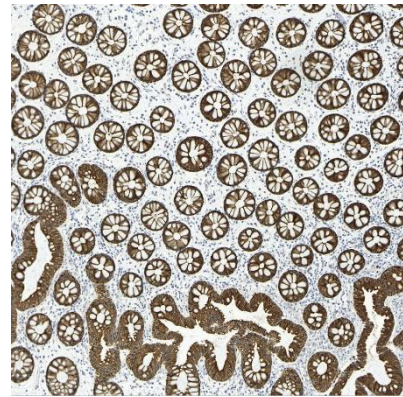
Instructions for Use

Specification:

Cytokeratin's (epithelial keratins) are an important component of the intermediate filament system. They are mainly insoluble molecules playing an important role in cellular mechanics. There are two types of cytokeratin's: a) type I: (9-20) keratins that are relatively acidic and bearing a small molecular weight (40-56.5 kDa) and b) type II: (1-8) that are relatively basic-neutral of larger molecular weight (53-67 kDa). Proliferating cells have a substantial pool of two soluble cytokeratin's, namely CK8 and CK18 and their concentration is high during the G2-M phase of the cell cycle. During apoptosis, CK18 are cleaved by caspases at position Asp396 producing relatively stable fragments.

Availability:

| Catalog No. | Contents | Volume |
|-------------|----------------------------|--------------------|
| ILM0737-C01 | Cytokeratin 18 clone MX035 | 0,1 ml concentrate |
| ILM0737-C05 | Cytokeratin 18 clone MX035 | 0,5 ml concentrate |
| ILM0737-C1 | Cytokeratin 18 clone MX035 | 1,0 ml concentrate |



Intended use: For Research Use Only

Reactivity: Human

Human Gene Symbol: KRT18

Synonyms: -

Human Entrez Gene ID: 3875

Clone: MX035

Species of origin: Mouse

Isotype: IgG

Control Tissue: Breast carcinoma

Staining: Cytoplasmic

Presentation: Tissue culture supernatant containing 15mM sodium azide

Application and suggested dilutions:

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

- Immunohistochemical staining of formalin-fixed, paraffin embedded tissue section (dilution 1:100 - 1:200)

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) Nanda KD, Ranganathan K, Devi U, et al., Oral Surg Oral Med Oral Pathol Oral Radiol 2012; 113:245-53
- 2) Fernandez-Flores A, Cassarino DS., J. Cutan Pathol 2015: 42-578-86