

Produktinformation



Forschungsprodukte & Biochemikalien



Zellkultur & Verbrauchsmaterial



Diagnostik & molekulare Diagnostik



Laborgeräte & Service

Weitere Information auf den folgenden Seiten! See the following pages for more information!



Lieferung & Zahlungsart

siehe unsere Liefer- und Versandbedingungen

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Instructions For Use

A00135-IFU-RUO

Rev. Date: Jan. 11, 2013

Revision: 1

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P.O. Box 3286 - Logan, Utah 84323, U.S.A. - Tel. (800) 729-8350 - Tel. (435) 755-9848 - Fax (435) 755-0015 - www.scytek.com

Carcinoembryonic Antigen, Pan; Clone COL-1 (Ready-To-Use)

Availability/Contents: <u>Item #</u> <u>Volume</u>

 A00135-0002
 2 ml

 A00135-0007
 7 ml

 A00135-0025
 25 ml

Description:

Species: Mouse

Immunogen: BALB/c mice were injected with an extract of human colon carcinoma.

Clone: COL-1 lsotype: lgG1 Kappa

Format: This antibody has been pretitered and quality controlled to work on formalin-fixed paraffin-

embedded as well as acetone fixed cryostat tissue sections. No further titration is required.

Specificity: This antibody labels the CEA-positive glycocalyx surface of gastrointestinal cells and is useful

for the identification of colon carcinomas.

Background: Carcinoembryonic antigen (CEA) is characterized as a glycosylated cell surface glycoprotein

which is involved in cell adhesion. CEA from various tumors display different carbohydrate contents. CEA is capable of both homophilic (CEA binding to CEA) and heterophilic (CEA binding to non-CEA molecules) interactions. CEA has been shown to be a member of a family of 8-10 cross-reactive iso-antigens which can be detected in a variety of normal and tumor

tissue types.

CEA immunostaining may assist in identifying the histogenesis of epithelial tumors in several morphologic categories. However, differential reactivity's of the CEA monoclonal and

polyclonal antibody panel have been reported.

CEA is a clinically important marker for adenocarcinomas, notably in the gastrointestinal tract, including colonic and pancreatic carcinomas. In addition, it may be important as a marker for disease recurrence in patients undergoing curative intent resection of a colorectal cancer

primary.

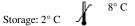
Species Reactivity: Human. Others not tested.

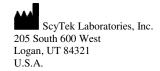
Positive Control: Colon Adenocarcinoma.

Cellular Localization: Cytoplasm and Cell Surface.

Titer/Working Dilution: No further dilution is required.

Microbiological State: This product is not sterile.







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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

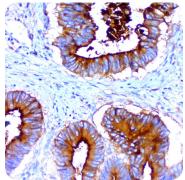
tissue sections, to be viewed by light

microscopy.

Do not use if reagent becomes cloudy. Do not use past expiration date.

Non-Sterile.

Ordering Information and Current Pricing at www.scytek.com



Human colon adenocarcinoma metastasized to lung, stained with Ultra-Tek HRP and DAB Chromogen.

Procedure:

- 1. **Tissue Section Pretreatment (Highly Recommended):** Staining of formalin fixed, paraffin embedded tissue sections is enhanced by pretreatment with Citrate Plus (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.
- 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:

- Shively, J. E. CRC Crit. Rev. Oncol, Hematol. 1985 2,355-399.
- 2. Zoubir F, Zeromski J, Sikora J, Szmeja J, Hedin A, Hammarström S. Tumor specificity of monoclonal antibodies to carcinoembryonic antigen. Tumor Biol 1990:11:5-19.
- 3. Larsson Å, Ghosh R, Hammarström S. Relative positions of some epitopes on carcinoembryonic antigen. Cancer Immunol. Immunother 1989;30:92-6.
- 4. Hammerstrom S, Shively JE, Paxton RJ, Beatty BG, Larsson Å, Ghosh R, et al. Antigenic sites in carcinoembryonic antigen. Cancer Res 1989:49:4852-8.
- 5. Nap M, Hammarström M-L, Börmer O, Hammarström S, Wagener C, Handt S, et al. Specificity and affinity of monoclonal antibodies against carcinoembryonic antigen. Cancer Res 1992; 52: 2329-39.
- 6. Duffy MJ. Carcinoembryonic Antigen as a Marker for Colorectal Cancer: Is It Clinically Useful? Clin.Chem 2001;47: 4624-630.

Storage: 2° C 8° C

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CE

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