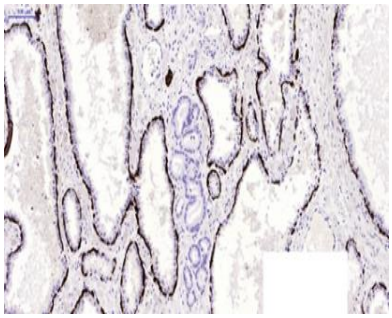
Nordic Biosite
Part of Europa Biosite

Anti-Cytokeratin 5, rabbit monoclonal (BSR55) UKCA CE IVD

BSH-3011-100 (0.1 ml), BSH-3011-1 (1 ml)

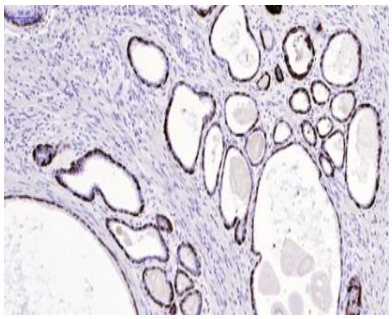
Clonality:	Rabbit monoclonal antibody
Clone:	BSR55
Application:	IHC-P (1:100 – 1:400), IHC-Fro
Species Reactivity:	Human (others not tested)
Control tissues:	Tonsil, esophagus, prostate, pancreas
Buffer:	TRIS with 0.03% sodium azide, pH 7.2
Storage:	Store at 4°C



Prostate adenocarcinoma section has been stained using CK5 optibody (BSR55) with 1:200 dilution. Strong cytoplasmic label were observed from prostate glands but prostate adenocarcinoma are without label.

Description

CK5 is a member of the keratin gene family. Biochemically, most members of the CK family fall into one of two classes, type I (acidic polypeptides) and type II (basic polypeptides). This type II cytokeratin is specifically expressed in the basal layer of the epidermis with family member KRT14, which is acidic, type I cytokeratin. Cytokeratin 5 is expressed in normal basal cells. CK5 is useful marker for demonstrating basal cells or basal cell neoplasia especially in differentiation diagnostics of prostate hyperplasia and prostate adenocarcinoma. It is also useful for example diagnostics of lung squamous cell carcinomas.

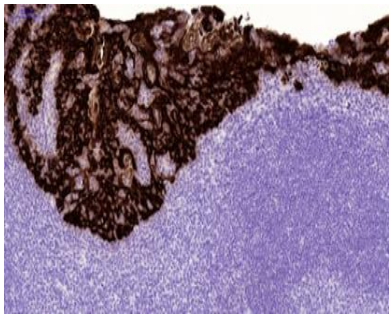


Prostate adenocarcinoma section has been stained using CK5 optibody (BSR55) with 1:200 dilution. Strong cytoplasmic label were observed from prostate glands.

Protocol

1. Deparaffinize and rehydrate tissue section
2. Wash: aqua dest, 2×5 min
3. Pre-treatment: PT-module HIER pH 9.0 (20min at 98°C)
4. H_2O_2 (concentration 3%), 10 min
5. Wash: PBS or TBS buffer, 2×5 min
6. Primary antibody diluted as recommended, 30 min
7. Wash: PBS or TBS buffer, 2×5 min
8. One step HRP-polymer detection, 30 min
9. Wash: PBS or TBS buffer, 2×5 min
10. DAB Substrate, 8 min
11. Wash: aqua dest, 2×2 min
12. Counterstain, dehydrate and coverslip

Dilution of concentrated antibody depends on the pre-treatment method and detection system used. Above protocol used in Optibodies evaluation and is meant as a reference. Final working dilution and protocol applied needs to be determined by the user always.



Tonsil section has been stained using CK5 optibody (BSR55) with 1:200 dilution. Tonsil epithelia have strong label.