

Anti-Cytokeratin 14 rabbit monoclonal (BSR47)

BSH-3013-100 (0.1 ml), BSH-3013-1 (1 ml)

Clonality: Rabbit monoclonal antibody

Clone: BSR47
Application: IHC-P
Species Reactivity: Human

Control tissues: Tonsil, prostate

Buffer: TRIS with 0.03% sodium azide, pH 7.2

Storage: Store at 4°C

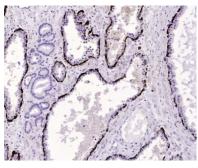
Description

Cytokeratin 14 (CK14) is an acidic type I human intermediate filament protein. It mostly found in basal cells of squamous epithelia, myoepithelium, some glandular epithelia and mesothelial cells. Molecular weight of CK14 is 50 kDa, and it usually pairs with CK5, which is a type II (basic) cytokeratin. In neoplastic cells, CK14 is a useful marker especially in identification of basal cell epithelium in prostate and myoepithelium in breast. It also useful for detecting squamous cell carcinomas. CK5 and CK14 antibodies can be used as a cocktail as well.

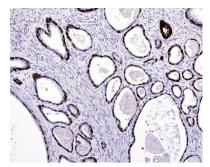
Protocol

- 1. Deparaffinize and rehydrate tissue section
- 2. Wash: agua dest, 2×5 min
- 3. Pre-treatment: PT-module HIER pH 9.0 (20min at 98°C)
- 4. H₂O₂ (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: agua dest, 2×2 min
- 12. Counterstain, dehydrate and coverslip

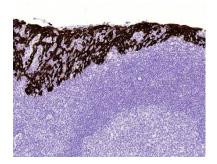
Dilution of concentrated antibody depends on the pre-treatment method and detection system used. Above protocol used in Optibodies evaluation and is meant as a reference. Final working dilution and protocol applied needs to be determined by the user always.



a)



b)



C)

CK14 stained tissue sections.

Prostate adenocarcinoma (a, b) and tonsil sections (c) have been stained using CK14 optibody (Clone: BSR47) with 1:200 dilution. Strong cytoplasmic label were observed from prostate glands but prostate adenocarsinoma are without label (a). Tonsil epithelia have strong label (c).

