PGP 9.5, 7 ml Ready to use
Polyclonal
Cat. no.: MON-RTU1179

Specificity
Protein gene product 9.5 (PGP 9.5), also known as ubiquitin carboxyl-terminal hydrolase-1 (UCH-L1), is a 27-kDa protein originally isolated from whole brain extracts (1). Although PGP9.5 expression in normal tissues was originally felt to be strictly confined to neurons and neuroendocrine cells (2), it has been subsequently documented in distal renal tubular epithelium, spermatogonia, Leydig cells, oocytes, melanocytes, prostatic secretory epithelium, ejaculatory duct cells, epididymis, mammary epithelial cells, Merkel cells, and dermal fibroblasts. LK Campbell et al demonstrated immunostaining of a plethora of different mesenchymal neoplasms with this antibody.

Use
Paraffin, Frozen

Preparation and Pretreatment
1. Cut 3-4 µm section of formalin-fixed paraffin-embedded tissue and place on positively charged slides; dry overnight at 58 °C.
2. Deparaffinize, rehydrate, and epitope retrieve; the preferred method is the use of Heat Induced Epitope Retrieval (HIER) techniques in conjunction with a pressure cooker. The preferred method allows for simultaneous deparaffinization, rehydration, and epitope retrieval. Upon completion, rinse with 5 changes of distilled or deionized water.
3. If using HRP detection system, place slides in peroxide block for 10 minutes; rinse. If using AP detection system, omit this step.

Positive control
Nerve tissue, Bowel wall (Interstitial cells of Kajal)

Staining pattern
Cytoplasmic

Presentation
7 ml. prediluted. Ready to use
Anti-PGP 9.5 is a rabbit polyclonal antibody purified from sera diluted in phosphate buffered saline, pH 7.4, with protein base, and preserved with sodium azide.

Storage & handling
Store antibody at 2-8 °C until expiry date. For extended storage, the solution may be frozen in suitable aliquots. Avoid freeze/thaw cycles.
References:

FOR RESEARCH USE ONLY, NOT FOR DRUG, DIAGNOSTIC OR OTHER USE.

Also available on request:
1 ml, prediluted Ready to use
0.1 ml, concentrate 1:100 - 1:500*
0.5 ml, concentrate 1:100 - 1:500*
1 ml, concentrate 1:100 - 1:500*

* The dilutions set forth above are estimates; actual results may differ because of variability in methods and protocols. Validation of antibody performance/protocol is the responsibility of the end user.