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Please contact CEDARLANE® for lot specific information.

Mouse Anti-Human CDX2 Monoclonal Antibody

CLSG80254 CLSG80254-05

Lot:

Clone: AMT28

Immunogen: Prokaryotic recombinant protein corresponding to the 180 amino acid N-

terminal region of the human CDX2 molecule.

Isotype: IgG1, kappa

Format: 1 ml (CLSG80254) or 0.5 ml (CLSG80254-05). This antibody is supplied as

liquid culture supernatant containing sodium azide as preservative.

Titer/Working Dilution: This antibody may be diluted to a titer of 1:25-1:50 in an ABC method.

However, depending on the staining conditions employed, we suggest that

final dilution should be determined by the user.

Staining Protocol: We suggest an incubation period of 60 minutes at room temperature.

However, depending upon the fixation conditions and the staining system employed, optimal incubation should be determined by the user. <u>Formalin fixed paraffin embedded tissue sections require high temperature antigen</u>

unmasking with 1 mM EDTA buffer, pH 8.0 prior to immunostaining.

Specificity: CDX2 is a caudal type homeobox gene that encodes an intestine-specific

transcription factor that is expressed early in intestinal development and may be involved in the regulation of proliferation and differentiation of intestinal epithelial cells. It is expressed in the nuclei of epithelial cells throughout the intestine, from duodenum to rectum. The CDX2 protein is expressed in primary and metastatic colorectal carcinomas and has also been demonstrated in the intestinal metaplasia of the stomach and intestinal-type gastric cancer, while it is not expressed in the normal gastric mucosa. Studies have shown

that CDX2 is superior marker compared to CK20.

Continued Overleaf..

For more information or to place an order please contact...



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in North America

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5516 - 8th Line, R.R.#2, Hornby, Ontario, CANADA LOP 1E0

Positive Control: Colon cancer

Cellular Localization: Nuclear

Storage: Store the antibody at 2-8°C. Do not use it beyond the expiration date stated on

the label.

References: Bai et al. Cancer Letter 176: 47, 2002

Hinoi et al. Am J Pathol 159: 2239, 2001 Silberg et al. Gastroenterology 119: 961, 2000

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JV 11/28/06