

Monoclonal Mouse Antibody to Human Androgen Receptor

Catalog No.:	Mob 245, Mob 245-05
Intended Use:	This product is intended for qualitative immunohistochemistry with normal and neoplastic formalin-fixed, paraffin-embedded tissue sections, to be viewed by light microscopy. Clinical interpretation of staining results should be accompanied by histological studies with proper controls. Patients' clinical histories and other relevant diagnostic tests should be utilized by a qualified person(s) when evaluating and interpreting results.
Immunogen:	Antibody was raised against a synthetic peptide (amino acid 340-356) of human androgen receptor.
Clone:	AR 441
Isotype:	IgG1
Format:	This antibody is supplied as purified immunoglobulin fraction containing sodium azide as a preservative.
Titer/Working Dilution:	This antibody may be diluted to a titer of 1:100-1:200 with Polymer Detection systems such as our UnoVue or PolyVue systems. The final dilution should be determined by the user based upon the staining conditions employed.
Staining Protocol:	We suggest an incubation period of 30 minutes at room temperature. Optimal incubation conditions should be determined by the user based upon the fixation conditions and staining system employed. <u>Formalin fixed paraffin embedded tissue sections require high temperature antigen unmasking with 10 mM citrate buffer, pH 6.0 or 1 mM EDTA, pH 8.0 buffer prior to immunostaining.</u>
Specificity:	This antibody is specific to a protein of 110 kD, identified as androgen receptor. This antibody reacts with full length AR and also with the newly described A form of the receptor. This antibody does not cross react with estrogen, progesterone, or glucocorticoid receptors. Androgen receptor status may be a useful marker in assessing triple-negative breast cancer.
Positive Control:	Prostate carcinoma
Cellular Localization:	Nuclear
Storage:	Store at 2-8°C. Do not use beyond the expiration date stated on the label.
References:	i) Chodak et al. J Urol 147: 798, 1992. ii) Hsu et al. Taiwan J Obstet Gynecol 48(3): 262, 2009. iii) Niemeier et al. Mod Pathol doi: 10.1038/modpathol.2009.159 iv) Qiu et al. Asian J Androl 10(6): 855, 2008. v) Rakha et al. Cancer 109(1): 25, 2007 vi) Ruizeveld de Winter, J Histochem Cytochem 42(1): 125, 1994.

IVD: For In Vitro Diagnostic Use

DBS will not be held responsible for patent infringement or other violation that may occur with the use of our product

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