

Placental Alkaline Phosphatase Antibody [clone ALP/870] (V2514)

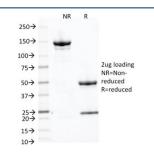
Catalog No.	Formulation	Size
V2514-100UG	0.2 mg/ml in 1X PBS with 0.1 mg/ml BSA (US sourced) and 0.05% sodium azide	100 ug
V2514-20UG	0.2 mg/ml in 1X PBS with 0.1 mg/ml BSA (US sourced) and 0.05% sodium azide	20 ug
V2514SAF-100UG	1 mg/ml in 1X PBS; BSA free, sodium azide free	100 ug
V2514IHC-7ML	Prediluted in 1X PBS with 0.1 mg/ml BSA (US sourced) and 0.05% sodium azide; *For IHC use only*	7 ml

Bulk quote request

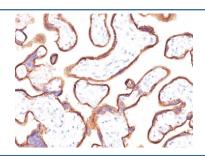
Availability	1-3 business days
Species Reactivity	Human
Format	Purified
Clonality	Monoclonal (mouse origin)
Isotype	Mouse IgG2b, kappa
Clone Name	ALP/870
Purity	Protein G affinity chromatography
UniProt	P05187
Localization	Cytoplasmic and cell surface
Applications	Immunohistochemistry (FFPE): 0.25-0.5ug/ml; 30 min at RT (1) Prediluted IHC Only Format: incubate for 30 min at RT (2) Western Blot: 1-2ug/ml
Limitations	This Placental Alkaline Phosphatase antibody is available for research use only.



Western blot testing of human JEG-3 cells with Placental Alkaline Phosphatase antibody (clone ALP/870). Predicted molecular weight ~58 kDa but routinely visualized at 60-70 kDa.



SDS-PAGE analysis of purified, BSA-free Placental Alkaline Phosphatase antibody (clone ALP/870) as confirmation of integrity and purity.



IHC: Formalin-fixed, paraffin-embedded human placenta stained with Placental Alkaline Phosphatase antibody (clone ALP/870).

Description

Reacts with a 70kDa membrane-bound isozyme (Regan and Nagao type) of placental Alkaline Phosphatase (PLAP) occurring in the placenta during the 3rd trimester of gestation. It is highly specific for PLAP and shows no cross-reaction with other isozymes of alkaline phosphatase. Anti-PLAP reacts with germ cell tumors and can discriminate between these and other neoplasms. Somatic neoplasms e.g. breast, gastrointestinal, prostatic, and urinary cancers may also immunoreact with antibodies to PLAP. Anti-PLAP positivity in conjunction with anti-keratin negativity favors seminoma over carcinoma. Germ cell tumors are usually anti-keratin positive, but they regularly fail to stain with anti-EMA, whereas most carcinomas stain with anti-EMA. Anti-PLAP has been useful in the diagnosis of gestational trophoblastic disease.

Application Notes

Optimal dilution of the Placental Alkaline Phosphatase antibody should be determined by the researcher.

- 1. No special pretreatment is required for the immunohistochemical staining of formalin-fixed tissues.
- 2. The prediluted format is supplied in a dropper bottle and is optimized for use in IHC. After epitope retrieval step (if required), drip mAb solution onto the tissue section and incubate at RT for 30 min.

Immunogen

Recombinant full-length human ALPP protein was used as the immunogen for the Placental Alkaline Phosphatase antibody.

Storage

Store the Placental Alkaline Phosphatase antibody at 2-8oC (with azide) or aliquot and store at -20oC or colder (without azide).