

Kappa Antibody

Datasheet

For Research Use Only

Description	Catalog No.	Size
Kappa Concentrate	FP-A022-01	0.1 ml
Kappa Concentrate	FP-A022-10	1 ml
Kappa Predilute	FP-A022-70	7 ml
Kappa Predilute	FP-A022-250	25 ml

Description

Anti-Kappa recognizes surface immunoglobulin on normal and neoplastic B-cells, and has been indicated as a potential aid in the identification of leukemias, plasmacytomas, and certain non-Hodgkin's lymphomas, where the expression of a single light chain class is restricted. The determination of light chain ratio is critical in evaluating B-cell neoplasms, as the majority of B-cell lymphomas express either kappa or lambda light chains, while a mixture of kappa and lambda is characteristic of reactive proliferations. In paraffin-embedded tissue, Anti-Kappa displays strong staining of kappa-positive plasma cells, as well as cells that have absorbed exogenous immunoglobulins.

Specifications

Clone	IHC610
Source	Mouse Monoclonal
Applications	IHC (P)
Formulation	Tris Buffer, pH 7.3 - 7.7, with 1% BSA and <0.1% Sodium Azide

IHC Procedure*

Positive Control Tissue	Tonsil
Dilution Range	1:50 – 1:200
Pretreatment	Perform heat-induced epitope retrieval (HIER) at pH for 10 to 30 minutes
Incubation Time and Temp	10 to 30 minutes at room temperature
Detection	Refer to the corresponding user manual for detection system

Result

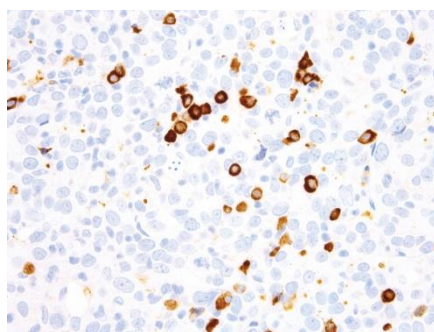


Figure. Kappa on Ovary

Storage and Handling

Must store the reagent at 2-8 °C. Do not freeze. Do not use the reagent after expiration date on vial. To ensure proper stability and delivery of the antibody after each run, replace the cap and immediately place the bottle in a refrigerator in an upright position. Positive and negative controls should be simultaneously run with unknown specimens, as there are no conclusive characteristics to suggest instability of the antibody.

Precautions

The product is for research use only. Do not use for diagnosis purpose. Ensure proper handling procedures are used with all reagents. Always wear laboratory coats, disposable gloves, and other appropriate laboratory equipment when handling reagents. Do not ingest reagents, and avoid contact with eyes and mucous membranes. Wash eyes with copious amounts of water if contact occurs.

References

1. **Bray M**, et al. “Lambda light chain predominance as a sign of emerging lymphoma.” *Am J Clin Pathol.* 1983; 80:526-8.
2. **Ashton-Key M**, et al. “Immunoglobulin light chain staining in paraffin-embedded tissue using a heat mediated epitope retrieval method.” *Histopathology.* 1996; 29:525-31.
3. **Kurtin PJ**, et al. “Demonstration of distinct antigenic profiles of small B-cell lymphomas by paraffin section immunohistochemistry.” *Am J Clin Pathol.* 1999; 112:319-29.
4. **Falini B**, et al. “Double labeled-antigen method for demonstration of intracellular antigens in paraffin-embedded tissues.” *J Histochem Cytochem.* 1982; 30:21-6.
5. **Marshall-Taylor CE**, et al. “Marshall-Taylor CE, et al. *Appl Immunohistochem Mol Morphol.* 2002; 10:258-62.” *Appl Immunohistochem Mol Morphol.* 2002; 10:258-62.
6. **Sobol RE**, et al. “Use of immunoglobulin light chain analysis to detect bone marrow involvement in B-cell neoplasms.” *Clin Immunol Immunopathol.* 1982; 24:139 -44.
7. **Samoszuk MK**, et al. “Limitations of numerical ratios for defining monoclonality of immunoglobulin light chains in B-cell lymphomas.” *Diagn Immunol.* 1985; 3:133-8.
8. **Abbondanzo SL**, et al. “Abbondanzo SL, et al. *Ann Diagn Pathol.* 1999; 3:318-27.” *Ann Diagn Pathol.* 1999; 3:318-27.

Technical Support

Contact FemtoPath Technical Support at +886232338585 or email to femtopath@hongjing.com.tw for assistance with more questions regarding this product.