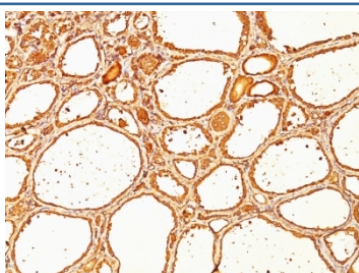


Anti-TG Antibody [clone SPM517] (V9084)

Catalog No.	Formulation	Size
V9084-100UG	0.2 mg/ml in 1X PBS with 0.1 mg/ml BSA (US sourced) and 0.05% sodium azide	100 ug
V9084-20UG	0.2 mg/ml in 1X PBS with 0.1 mg/ml BSA (US sourced) and 0.05% sodium azide	20 ug
V9084SAF-100UG	1 mg/ml in 1X PBS; BSA free, sodium azide free	100 ug
V9084IHC-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 IgG1, kappa
Clone Name	SPM517
Purity	Protein G affinity chromatography
UniProt	P01266
Localization	Cytoplasmic, Secreted
Applications	Immunohistochemistry (FFPE) : 1-2ug/ml for 30 min at RT
Limitations	This anti-TG antibody is available for research use only.



IHC: Formalin-fixed, paraffin-embedded human thyroid carcinoma stained with anti-TG antibody (SPM517).

Description

Thyroglobulin (TG) is a 660kDa dimeric pre-protein with multiple glycosylation sites. It is produced by and processed within the thyroid gland to produce the hormone thyroxine and triiodothyronine. Prior to forming dimers, thyroglobulin monomers undergo conformational maturation in the endoplasmic reticulum. The vast majority of follicular carcinomas of the thyroid will give positive immunoreactivity for anti-thyroglobulin even though sometimes only focally. Poorly differentiated carcinomas of the thyroid are frequently anti-thyroglobulin negative. Adenocarcinomas of other-than-thyroid origin do not react with this antibody. This antibody is useful in identification of thyroid carcinoma of the papillary and follicular types. Presence of thyroglobulin in metastatic lesions establishes the thyroid origin of tumor. Anti-thyroglobulin, combined with anti-calcitonin, can identify medullary carcinomas of the thyroid. Furthermore, anti-thyroglobulin, combined with anti-TTF1, can be a reliable marker to differentiate between primary thyroid and lung neoplasms.

Application Notes

The optimal dilution of the anti-TG antibody for each application should be determined by the researcher.

1. Staining of formalin-fixed tissues requires boiling tissue sections in pH 9 10mM Tris with 1mM EDTA for 10-20 min followed by cooling at RT for 20 minutes.
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

Human thyroid follicular cells were used as the immunogen for this anti-TG antibody.

Storage

Store the anti-TG antibody at 2-8°C (with azide) or aliquot and store at -20°C or colder (without azide).