

Product Datasheet

Cytokeratin 17 Antibody (Ks 17.E3) **NBP1-42265**

Unit Size: 0.2 ml

Store at 4C. Do not freeze.

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NBP1-42265**Cytokeratin 17 Antibody (Ks 17.E3)****Product Information**

Unit Size	0.2 ml
Concentration	Please see the vial label for concentration. If unlisted please contact technical services.
Storage	Store at 4C. Do not freeze.
Clonality	Monoclonal
Clone	Ks 17.E3
Preservative	No Preservative
Reconstitution Instructions	Reconstitute with 1.0 ml sterilized distilled water to desired concentration.
Isotype	IgG2b
Purity	Protein A or G purified
Buffer	Distiled water

Product Description

Host	Mouse
Gene ID	3872
Gene Symbol	KRT17
Species	Human, Rat
Specificity/Sensitivity	This antibody represents an excellent marker to distinguish myoepithelial cells from luminal epithelium of various glands (mammary, sweat, salivary, bronchial, tracheal, laryngeal, esophageal) and benign from malignant forms of e.g. mammary gland tumors. Most malignant forms of mammary tumors are negative for cytokeratin 17. Antigen: Human cytokeratin 17 of Mr 46,000 Antigen recognized in species: Human and rat (Mr 40,000 polypeptide)
Immunogen	The antibody reacts with the Keratin 17 antigen.

Product Application Details

Applications	Western Blot, Immunohistochemistry, Immunohistochemistry-Frozen, Immunohistochemistry-Paraffin
Recommended Dilutions	Western Blot 1:100-1:2000, Immunohistochemistry 1:10-1:500, Immunohistochemistry-Paraffin 1:10-1:500, Immunohistochemistry-Frozen 1:10-1:500
Application Notes	Suitable for frozen tissue, cytological material, immunoblotting (Western blot). Also suitable for paraffin-embedded tissue when using the MICROWAVE method. Working dilution: Dilute approximately 1:10 with PBS pH 7.4 for immunohistochemical application (ABC method); optimal working dilution should be determined by serial dilution prior to application.



Novus Biologicals USA

10730 E. Briarwood Avenue
Centennial, CO 80112
USA
Phone: 303.730.1950
Toll Free: 1.888.506.6887
Fax: 303.730.1966
nb-customerservice@bio-techne.com

Bio-Techne Canada

21 Canmotor Ave
Toronto, ON M8Z 4E6
Canada
Phone: 905.827.6400
Toll Free: 855.668.8722
Fax: 905.827.6402
canada.inquires@bio-techne.com

Bio-Techne Ltd

19 Barton Lane
Abingdon Science Park
Abingdon, OX14 3NB, United Kingdom
Phone: (44) (0) 1235 529449
Free Phone: 0800 37 34 15
Fax: (44) (0) 1235 533420
info.EMEA@bio-techne.com

General Contact Information

www.novusbio.com
Technical Support: nb-technical@bio-techne.com
Orders: nb-customerservice@bio-techne.com
General: novus@novusbio.com

Limitations

This product is for research use only and is not approved for use in humans or in clinical diagnosis. Primary Antibodies are guaranteed for 1 year from date of receipt.

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