

**Localization** – Nuclear

**Host Species** – Mouse

**Ig Class** – IgG

**Intended Use**

This antibody is designed for the specific localization of P63 in formalin-fixed, paraffin-embedded (FFPE) tissue sections.

**Storage & Handling**

Store RTU Vial at 2-8°C. Fresh dilutions for concentrated antibodies, if required, should be prepared prior to use and are stable for up to one day at room temperature (20-26°C).

**Working Principle**

IHC is a two-step process wherein the primary antibody binds to the antigen of interest and that binding is detected by a chromogen. The primary antibody may be used in IHC using manual techniques or any Automated Staining System. Positive and negative controls should always be run simultaneously with all patient specimens.

**Product Description**

P63 is a homolog of the tumor suppressor p53. It is identified in basal cells in the epithelial layers of a variety of tissues, including epidermis, cervix, urothelium, breast and prostate. P63 was detected in nuclei of the basal epithelium in normal prostate glands; however, it was not expressed in malignant tumors of the prostate. As a result, p63 has been reported as a useful marker for differentiating benign from malignant lesions in the prostate, particularly when used in combination with markers of high molecular weight cytokeratins and the prostate-specific marker AMACR (P504S). P63 antibody to human p63 protein labels an epitope common to all six p63 isotypes (TAp63α, TAp63β, TAp63γ, ΔNp63α, ΔNp63β, ΔNp63γ). p63 labels the nuclei of myoepithelial cells in the prostate gland as well as breast tissue, making it useful in differentiating benign vs. malignant prostate lesions and breast lesions.

**Material Supplied**

P63 antibody is affinity purified and diluted in PBS, pH 7.4, containing 1% BSA and 0.09% sodium azide.

**Material required But Not Supplied**

- Xylene
- DI Water
- Control Tissues
- Isopropyl alcohol
- Antigen retrieval buffers
- Hematoxylin
- Positive charged slides
- Blocking Reagents
- Mounting media
- Wash Buffer
- Detection System
- Cover glass

**Working Reagent Procedure**

- Ready-to-Use antibodies have been optimized for use with the recommended protocols and should not require further dilution.
- Concentrated antibodies must be diluted in accordance with the recommended protocol.

**Recommended Protocol**

Refer the following table for the details on specific recommended protocol for this antibody.

<b>Control Tissue</b>	Prostate, Breast, Skin, Salivary Gland	<b>Antibody Incubation Time</b>	30-60 Minutes at RT
<b>Dilution factor</b>	<b>1:20-50</b> (Antibody Diluent: DH144)	<b>Retrieval Pre-treatment</b>	<b>Tris-EDTA based HIER</b> (AR9 Buffer: DH020)

**Precautions**

*This product should be used by qualified and trained professional users only.*

Avoid microbial contamination of reagents to minimize non-specific staining. Never pipette reagents by mouth. Avoid contact of reagents and specimens with skin. If reagents or specimens come into contact with sensitive area, wash with sufficient amounts of water. Dispose of the unused reagents. This kit contain sodium azide at concentrations of less than 0.1%. Sodium azide is not classified as a hazardous chemical at these concentrations, but proper handling protocols should be observed. For more information on product hazards, precautions and waste disposal, *Material Safety Data Sheets* are available upon request.

**Limitations**

Improper tissue handling and processing prior to immunostaining can lead to inconsistent results. Variations in embedding and fixation or the nature of the tissue may lead to variations in results. Endogenous peroxidase activity or pseudo peroxidase activity in erythrocytes and tissue biotin may result in non-specific staining based on the detection system employed. Tissues containing Hepatitis B Surface Antigen (HBsAg) may give false positive with horseradish peroxidase systems. Improper counterstaining and mounting may compromise the interpretation of results. Interpretation of the staining result is solely the responsibility of the user. Experimental results should be confirmed by a medically-established diagnostic product or procedure. Evaluation must be performed by a qualified pathologist.

**Troubleshooting**

For Technical Support contact us at +91 - 7506501122 or [info@dygnova.com](mailto:info@dygnova.com) or your local distributor to report unusual staining.

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	Manufacturer Details		Use by Date	<b>LOT</b>	Lot/Batch Number
	Manufacturing Date		Consult Instructions for Use	<b>REF</b>	Catalogue Number
	Temperature Limits		Sufficient for 'n' assays / tests	<b>IVD</b>	In-vitro Diagnostic Medical Device