

Rabbit anti-Human Mycobacterium tuberculosis Polyclonal Antibody

Mycobacterium tuberculosis

CATALOG # AAA13576	HOST Rabbit	REACTIVITY Human	APPLICATIONS Immunohistochemistry
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PRODUCT SYNONYMS

Mycobacterium tuberculosis; Polyclonal Antibody; anti-Mycobacterium tuberculosis antibody

PRODUCT SPECIFICATIONS

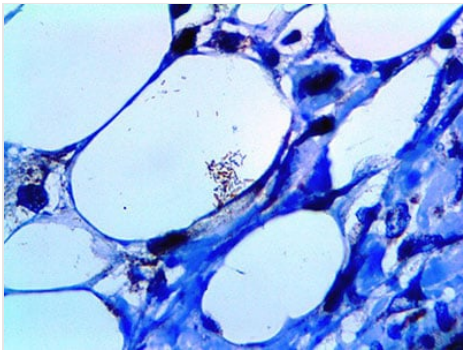
Host	Rabbit
Reactivity	Human
Clonality	Polyclonal
Isotype	IgG
Form/Format	Anti-Mycobacterium tuberculosis is a Rabbit Polyclonal antibody derived from cell culture supernatant that is concentrated, dialyzed, filter sterilized and diluted in buffer pH 7.5, containing BSA and sodium azide as a preservative.
Applicable Applications for anti-Mycobacterium tuberculosis antibody	IHC (Immunohistochemistry)
Application Notes	Paraffin , Frozen
Localization	Cell Wall
Control	Infected Tissue
Precautions	1. This product contains <0.1% sodium azide (NaN₃) as a preservative. Ensure proper handling procedures are used with this reagent. 2. Always wear personal protective equipment such as laboratory coat, goggles and gloves when handling reagents. 3. Dispose of unused solution with copious amount of water. 4. Do not ingest reagent. If reagent is ingested, seek medical advice immediately. 5. Avoid contact with eyes. If contact occurs, flush with large quantities of water. 6. Follow safety precautions of the heating device used for epitope retrieval (Tinto Retriever Pressure Cooker or similar). 7. For additional safety information refer to Safety Data Sheet for this product. 8. For complete recommendations for handling biological specimens, please refer to the CDC document, "Guidelines for Safe Work Practices in Human and Animal Medical Laboratories" (see References in this document).
Specimen Preparation	Paraffin sections: The antibody can be used on formalin-fixed paraffin-embedded (FFPE) tissue sections. Ensure tissue undergoes appropriate fixation for best results. Pre-treatment of tissues with heat-induced epitope retrieval (HIER) is recommended using ImmunoDNA Retriever with Citrate, ImmunoDNA Retriever with EDTA or ImmunoDNA Digester. See reverse side for complete protocol. Tissue should remain hydrated via use of Immuno/DNA Washer solutions. Frozen sections and cell preparations: The antibody can be used for labeling acetone-fixed frozen sections and acetone-fixed cell preparations.
Intended Use	For Analyte Specific Regent. Analytical and performance characteristics for Mycobacterium tuberculosis polyclonal antibody are not established
Immunogen	Purified PPD.
Mounting Protocols	For detailed instructions using biodegradable permanent mounting media such as XyGreen PermaMounter or organic solvent based resin such as PermaMounter.

Product Limitations	Due to inherent variability present in immunohistochemical procedures (including fixation time of tissues, dilution factor of antibody, retrieval method utilized and incubation time), optimal performance should be established through the use of positive and negative controls. Results should be interpreted by a qualified medical professional.
Preparation and Storage	Store at 2-8°C Stability: This product is stable up to the expiration date on the product label. Do not use after expiration date listed on package label. Temperature fluctuations should be avoided. Store appropriately when not in use, and avoid prolonged exposure to room temperature conditions.

IMAGES

Quality Control Procedure			
Step	ImmunoDetector AP/HRP	PolyDetector AP/HRP	PolyDetector Plus HRP
Peroxidase/AP Blocker	5 min.	5 min.	5 min
Primary Antibody	30-60 min.	30-60 min.	30-60 min.
1st Step Detection	10 min.	30-45 min.	15 min.
2nd Step Detection	10 min.	Not Applicable	15 min.
Substrate-Chromogen	5-10 min.	5-10 min.	5-10 min.
Counterstain / Coverslip	Varies	Varies	Varies

QC (Quality Control)
This Antibody has been quality control tested by immunohistochemistry as follows



IHC (Immunohistochemistry)
IHC of Mycobacterium Tuberculosis on an FFPE Infected Lung Tissue

Antibody Type	Dilution	Volume/Qty
Tinto Prediluted	Ready-to-Use	3.0 mL
Tinto Prediluted	Ready-to-Use	7.0 mL
Tinto Prediluted	Ready-to-Use	15.0 mL
Concentrated	1:100 - 1:500	0.1 mL
Concentrated	1:100 - 1:500	0.5 mL
Concentrated	1:100 - 1:500	1.0 mL
Control Slides	Not Applicable	5 slides

Dilution Information

ADDITIONAL INFORMATION

Related Product Information for anti-Mycobacterium tuberculosis antibody	Mycobacterium tuberculosis is a pathogenic bacterial species of the Mycobacteriaceae family and the causative agent of most cases of tuberculosis. M. tuberculosis has an unusual, waxy coating on its cell surface (primarily due to the presence of mycolic acid), which makes the cells impervious to Gram staining; M. tuberculosis can appear Gram negative and Gram positive in clinical settings. The Ziehl-Neelsen stain, or acid-fast stain, is used instead. M. tuberculosis is highly aerobic and requires high levels of oxygen. Humans are the only known reservoirs of M. tuberculosis. When in the lungs, M. tuberculosis is taken up by alveolar macrophages, but they are unable to digest and eradicate the bacterium. Its cell wall prevents the fusion of the phagosome with lysosome, which contains a host of antimycobacterial factors. Antibiotic resistant strains of mycobacterium tuberculosis have developed resistance to more than one TB drug, due to mutations in their genes. M. tuberculosis is characterized by caseating granulomas containing Langhans giant cells, which have a "horseshoe" pattern of nuclei. Cells are often seen wrapped together, due to the presence of fatty acids in the cell wall that stick together. This appearance is referred to as chording, like strands of chord that make up a rope. The clinical and histological criteria used to identify lymphadenitis caused by Mycobacterium tuberculosis complex organisms have poor specificity. Acid-fast staining and culture have low sensitivity and specificity. The identification of tuberculosis by immunohistochemistry can be used to detect the mycobacterial antigen on formalin-fixed tissue biopsies and it's consider fast, sensitive, and a highly specific method for establishing the etiological identification of tuberculosis in histologic specimens. Mycobacterium tuberculosis RPab has shown crossreactivity with aspergillus fumigatus.
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For Research Use Only. Not for use in diagnostic or therapeutic procedures. Small volumes of product may become entrapped in the seal of the vial during shipment and storage; if necessary, briefly centrifuge the vial on a tabletop centrifuge to dislodge any liquid in the cap.

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Online datasheet: <https://stage.aaabiotech.com/polyclonal/mycobacterium-tuberculosis-antibody-immunohistochemistry-elisa/13576>