

CK16 Monoclonal Antibody(6F6)

Catalog No :	YM3056
Reactivity :	Human;Mouse;Rat
Applications :	IHC;IF
Target :	CK16
Fields :	>>Estrogen signaling pathway;>>Staphylococcus aureus infection
Gene Name :	KRT16
Protein Name :	Keratin type I cytoskeletal 16
Human Gene Id :	3868
Human Swiss Prot No :	P08779
Mouse Gene Id :	16666
Mouse Swiss Prot No :	Q9Z2K1
Immunogen :	Synthetic Peptide of CK16
Specificity :	The antibody detects endogenous CK16 proteins.
Formulation :	PBS, pH 7.4, containing 0.5%BSA, 0.02% sodium azide as Preservative and 50% Glycerol.
Source :	Monoclonal, Mouse
Dilution :	IHC 1:50-200 IF 1:50-200
Purification :	The antibody was affinity-purified from mouse ascites by affinity-chromatography using specific immunogen.
Storage Stability :	-15°C to -25°C/1 year(Do not lower than -25°C)

Observed Band : 51kD

Background :

The protein encoded by this gene is a member of the keratin gene family. The keratins are intermediate filament proteins responsible for the structural integrity of epithelial cells and are subdivided into cytokeratins and hair keratins. Most of the type I cytokeratins consist of acidic proteins which are arranged in pairs of heterotypic keratin chains and are clustered in a region of chromosome 17q12-q21. This keratin has been coexpressed with keratin 14 in a number of epithelial tissues, including esophagus, tongue, and hair follicles. Mutations in this gene are associated with type 1 pachyonychia congenita, non-epidermolytic palmoplantar keratoderma and unilateral palmoplantar verrucous nevus. [provided by RefSeq, Jul 2008],

Function :

disease:Defects in KRT16 are a cause of pachyonychia congenita type 1 (PC1) [MIM:167200]; also known as Jadassohn-Lewandowsky syndrome. PC1 is an autosomal dominant ectodermal dysplasia characterized by hypertrophic nail dystrophy resulting in onchyogryposis (thickening and increase in curvature of the nail), palmoplantar keratoderma, follicular hyperkeratosis, and oral leukokeratosis. Hyperhidrosis of the hands and feet is usually present.,disease:Defects in KRT16 are a cause of unilateral palmoplantar verrucous nevus (UPVN) [MIM:144200]. UPVN is characterized by a localized thickening of the skin in parts of the right palm and the right sole.,disease:Defects in KRT16 are the cause of palmoplantar keratoderma non-epidermolytic (NEPPK) [MIM:600962]. NEPPK is a dermatological disorder characterized by focal palmoplantar keratoderma with oral, genital, and follicular lesions.,disease:KRT16

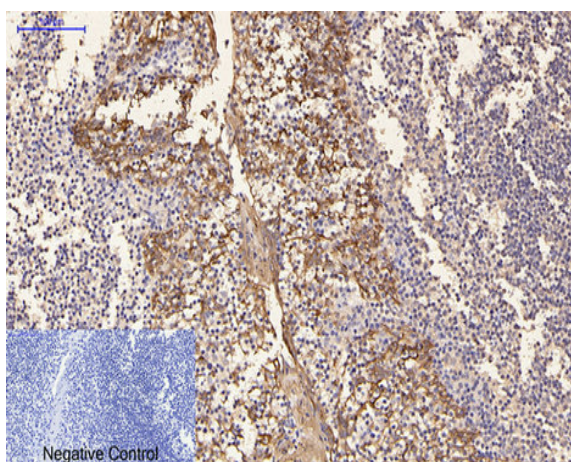
Subcellular Location :

nucleus,cytoskeleton,intermediate filament,extracellular exosome,

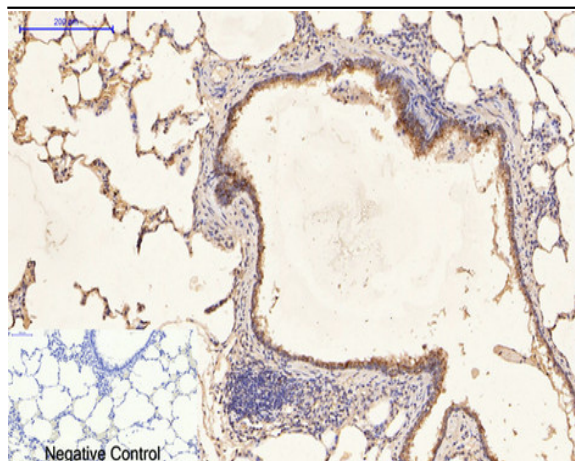
Expression :

Expressed in the corneal epithelium (at protein level).

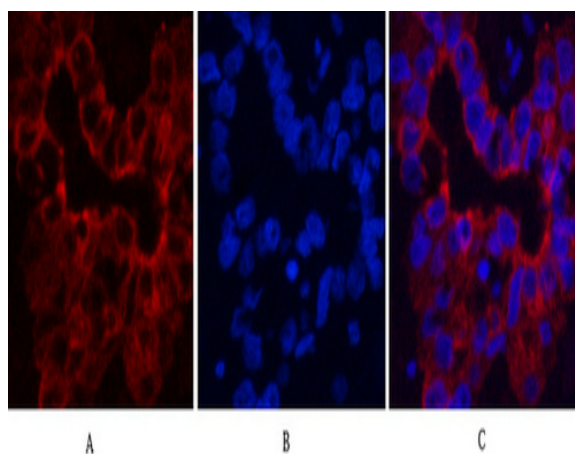
Products Images



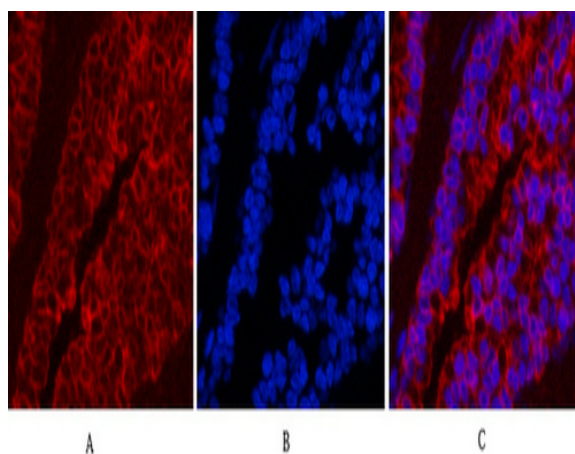
Immunohistochemical analysis of paraffin-embedded Human-Tonsil tissue. 1,CK16 Monoclonal Antibody(6F6) was diluted at 1:200(4°C,overnight). 2, Sodium citrate pH 6.0 was used for antibody retrieval(>98°C,20min). 3,Secondary antibody was diluted at 1:200(room temperature, 30min). Negative control was used by secondary antibody only.



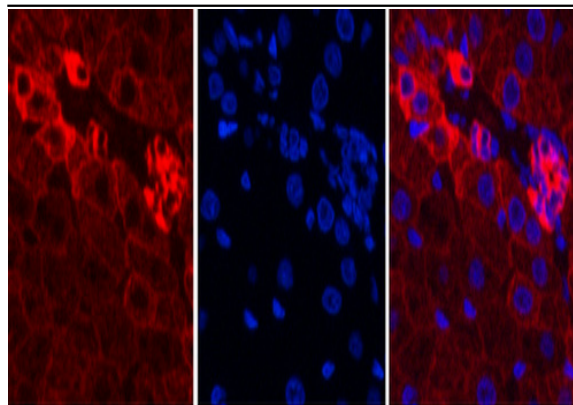
Immunohistochemical analysis of paraffin-embedded Rat-lung tissue. 1,CK16 Monoclonal Antibody(6F6) was diluted at 1:200(4°C,overnight). 2, Sodium citrate pH 6.0 was used for antibody retrieval(>98°C,20min). 3,Secondary antibody was diluted at 1:200(room temperature, 30min). Negative control was used by secondary antibody only.



Immunofluorescence analysis of Human-liver-cancer tissue. 1,CK16 Monoclonal Antibody(6F6)(red) was diluted at 1:200(4°C,overnight). 2, Cy3 labeled Secondary antibody was diluted at 1:300(room temperature, 50min).3, Picture B: DAPI(blue) 10min. Picture A:Target. Picture C: merge of A+B



Immunofluorescence analysis of Mouse-lung tissue. 1,CK16 Monoclonal Antibody(6F6)(red) was diluted at 1:200(4°C,overnight). 2, Cy3 labeled Secondary antibody was diluted at 1:300(room temperature, 50min).3, Picture B: DAPI(blue) 10min. Picture A:Target. Picture C: merge of A+B

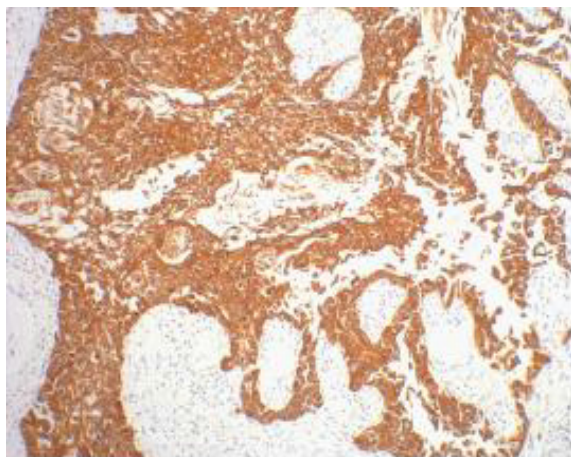


A

B

C

Immunofluorescence analysis of Rat-liver tissue. 1,CK16 Monoclonal Antibody(6F6)(red) was diluted at 1:200(4°C,overnight). 2, Cy3 labeled Secondary antibody was diluted at 1:300(room temperature, 50min).3, Picture B: DAPI(blue) 10min. Picture A:Target. Picture B: DAPI. Picture C: merge of A+B



IHC staining of human gullet cancer tissue, diluted at 1:200.