

HUMAN COLON TISSUE LYSATE

Catalog Number: Extraction 1, soluble protein fraction

T7-015-T-1 Human colon tumor tissue lysate 100 μg
T7-015-N-1 Human colon normal tissue lysate (matched) 100 μg

Extraction 2, insoluble protein fraction

T7-015-T-2 Human colon tumor tissue lysate 100 μg
T7-015-N-2 Human colon normal tissue lysate (matched) 100 μg

Diagnosis: Adenocarcinoma, grade 2, stage III. T₃N_xM₀

Sex / Age: Male, age 61.

Concentration: 1 mg/ml, 100 µg/vial.

The vial is provided with a 10% overfill. Maximum recovery can be obtained by centrifuging the

vial briefly to collect any solution on the cap and tube sides.

Storage: Aliquot single use volumes to avoid repeated freeze/thaw cycles.

From time of receipt, this product is stable for 3 months at -20° C, or 12 months at -70° C.

Lysate Preparation: Tissue specimens are homogenized in modified RIPA buffer to obtain the soluble proteins, and

centrifuged to clarify. The pellet was further extracted with a second buffer to obtain the less soluble protein fraction. The lysate solution may appear turbid at cold temperatures due to insolubility of buffer components. The solution should clear upon warming to room temperature.

Extraction 1: PBS, pH 7.4 1 μg/ml Aprotinin 1 mM NaF

Modified RIPA Buffer: 1 mM EDTA 1 μg/ml Pepstatin-A 0.1% SDS

0.25% Na deoxycholate 1 μg/ml Leupeptin 1 mM PMSF

1 mM Na₃VO₄

Extraction 2: PBS, pH 7.4, 5.0 M Urea, 2.0 M Thiourea, 50mM DTT, 0.1% SDS

Application: These lysates have not been subjected to denaturing or reducing conditions. This allows the tissue

or cell lysate to be used in a variety of applications; to study protein-protein interaction, ligand binding, ELISA, immunoprecipitation, 1D and 2D gel electrophoresis, and Western blotting for the detection of specific protein targets. For use in 1D and 2D gel electrophoresis, the addition of a

denaturing gel loading buffer with reducing agents may be required.

Buffer requirements for performing protein-protein interaction and ligand binding studies can vary significantly from RIPA buffer and may require modifications. In most cases, tissue lysates in

RIPA buffer can be used, directly in standard ELISA and immunoprecipitation assays.

This material has tested negative for HbsAg, HIV 1/2, and HCV. Use *UNIVERSAL PRECAUTIONS* when handling. Human tissue derivatives must be treated as a potentially

infectious agent and disposed of appropriately.

Source: Integrated Laboratory Services-Biotech (ILSbio), Chestertown, MD 21620 www.ilsbio.com

ILS-19077

For Research Use Only



PATHOLOGY REPORT

Catalog No.

Tissue:

Location: Descending colon. Diagnosis: Adenocarcinoma, moderately differentiated. Ш Stage: $T_3N_xM_0\\$ Grade: II Sex: Male Age: 61 years Appearance: **Macroscopic Characteristics** Organ: Colon Encapsulated: Size: Invaded: 6 x 8 cm. Color: Pink-white. Hemorrhagic: Cystic degeneration: Consistency: Firm Cut surface Gray-white Calcification: Histologic pattern: Cell distribution: Structure / Pattern: Diffuse: Streaming: Storiform: Mosaic: Necrosis: Fibrosis:

T7-015

Colon

Lymphocytic infiltration:

Vascular invasion: Clusterized:

Alveolar formation:

Indian file:

Cellular differentiation:

Squamous:	+/-	Adenomatous:	+/-	Sarcomatous:	+/-
Squamoid:	-	Glandular cell:	+	Round cell:	-
Spindle:	-	Cell stratification:	-	Spindle cell:	-
Keratin:	-	Secretion:	-	Leiomyoblast:	-
Desmosome:	-	Intracellular vacuole:	-	Lipoblast:	-
Pearl:	-	Glandular formation:	+	Rhadomyoblast:	-

Pallisading: Cystic degeneration:

Bleeding:

Myxoid change:

Psammoma body:

Nuclear atypia:	Nuclear Appearance:	0	I	II	Ш
	Anisonucleosis:		X		
	Hyperchomatism:			X	
	Nucleolar prominent:			X	
	Multinucleated giant cell:			X	
	Mitotic activity:			X	
	Nuclear grade:			X	