

Immunohistochemistry (IHC) Outreach Services

- Note type of fixative used if not neutral buffered formalin.
- Note type of tissue/specimen
- Unless specified otherwise, positive and negative controls react satisfactorily.

Available Chromogen – All markers have been validated with 3,3'-Diaminobenzidine Tetrahydrochloride (DAB) which results in a brown/black precipitate. DAB is the routine chromogen. In addition, some markers have also been validated using the Fast Red (RED), which results in a red precipitate. If available with both chromogens and one is not selected, the default will be the DAB chromogen.

Antibody	Common Applications	Staining Characteristics
Actin (muscle specific)	Smooth, skeletal & cardiac muscle	Cytoplasmic
Actin (smooth muscle)	Smooth muscle and myoepithelial cells	Cytoplasmic and membrane
ALK Protein	ALK1 positive lymphomas	Cytoplasmic and/or nuclear
Alpha-1-Antitrypsin (A-1-AT)	Demonstrates A-1-AT in liver	Cytoplasmic
Bcl-2 Oncoprotein	Follicular lymphoma and soft tissue tumors	Cytoplasmic
Bcl-6	Follicular lymphoma	Nuclear
Ber-EP4, Epithelial Antigen	Adenocarcinoma vs. mesothelioma and epithelial tumors	Membrane and cytoplasmic. The membrane staining is preferentially basolateral.
Beta-Amyloid	Post mortem diagnosis of dementia	Extracellular deposition (amyloid plaques), vascular deposition (amyloid angiopathy)
BRST-3, (B72.3)	Adenocarcinoma vs. mesothelioma	Cell surface and cytoplasmic
Beta-Catenin	Desmoid type-fibromatosis, solid and	Nuclear
	pseudopapillary tumors of pancreas.	
CD1a	Langerhan cells, thymic T-cells, thymoma	Membrane and weakly cytoplasmic
CD3	T-cells, lymphoma/leukemia typing	Membrane
CD4	Helper/Inducer T-cells mycosis fungoides vs. cutaneous inflammatory processes, lymphoma/ leukemia typing	Membrane
CD5	T-cell, lymphoma/leukemia typing	Membrane
CD8	T-cell suppressor/cytoto xic, lymphoma/leukemia typing, mycosis fungoides vs. cutaneous inflammatory processes	Membrane
CD10	Lymphoma typing, metastatic carcinoma unknown primary	Cytoplasmic and Membrane
CD15	Hodgkin Lymphoma Typing, mesothelioma vs. adenocarcinoma	Reed-Sternberg cells in Hodgkin's lymphoma show cell membrane and granular paranuclear staining.
CD20, B Cell	Lymphoma/leukemia typing	Cytoplasmic side of the cell surface membrane
CD21	Follicular Dendritic cell marker, found also on some B cells	Cytoplasmic & Membrane
CD23	Lymphoma/leukemia typing	Cytoplasmic/membrane
Antibody	Common Applications	Staining Characteristics

CD31	Hodgkin lymphoma Endothelial Cells	staining Predominately cell membrane, with
		weaker cytoplasmic staining.
CD34	Soft tissue tumor classification, leukemia typing	Membrane/cytoplasmic
CD43	T-cell, lymphoma/leukemia typing	Predominantly confined to the cell surface
CD45 (LCA)	Lymphohematopoetic tumors	Membrane, but cytoplasmic may also occur
CD56	NK cells, tumors derived from neuroectodermal tumors such as	Membrane
CD57	Lymphoma typing, neuroendocrine differentiation	Cytoplasmic and membrane
CD68, PG-M1, Macrophage	Histiocytic/monocytic marker	Cells of monocyte/macrophage lineage stain diffuse or granular cytoplasmic. Mast
CD79a	B-cell, lymphoma/leukemia typing	Cell Membrane and/or cytoplasm
CD99, SEE MC2		
CD117 (c-kit)	Gastrointestinal Stromal Tumors (GIST), Mast Cells, Stains approximately 75% of mesenteric fibromatosis tumors.	Membrane and/or cytoplasmic
CD138 Syndecan-1	Plasma Cells (also stains endothelial cells, fibroblasts, keratinocytes, and	Cell Membrane, pre-B cell and plasma cell marker, but is absent from mature B
CD163	Histiocytic Lesions	Membrane
CDX2	Colon and other GI cancers are strong & diffusely positive. Also, mucinous	Nucleus in normal and neoplastic intestinal epithelial cells.
Calcitonin	Medullary Thyroid Carcinoma	Cytoplasmic
Calretinin	Mesothelioma vs. adenocarcinoma, sex cord stromal, adrenal tumors, &	Cytoplasmic and nuclear
Carcinoembryonic Antigen, CEA/M	Mesothelioma vs. Adenocarcinoma, metastatic carcinoma of unknown	Cytoplasmic. Normal colon-CEA is mainly localized at the apical border of the
Carcinoembryonic Antigen, CEA/P	Hepatoma vs. adenocarcinoma	Cytoplasmic. In liver, predominantly bilary canaliculi are labeled. In colonic
Chromogranin A	Neuroendocrine differentiation	Cytoplasmic
Cyclin D1	Mantle cell lymphoma	Nuclear
Cytokeratin 5/6	Mesothelioma vs. Adenocarcinoma	Cytoplasmic
Cytokeratin 7		Cytoplasmic. Exceptions to reactivity may occur e.g. CK-7 positive hepatocytes have been observed in patients with acute and chronic cholestasis.
Cytokeratin 20	primary	Cytoplasmic. May occasionally be expressed in breast and lung adenocarcinomas, and in squamous cell carcinomas. Less than 5% CK20 positive cells may be present in a number of tissues not generally considered CK 20 positive.
CK116 – MNF116	Epithelial marker	Cytoplasmic
Cytokeratin 34BE12	Prostate basal cells, squamous cells vs. adenocarcinoma	Cytoplasmic
Cytokeratin, AE1/AE3	Epithelial tumors, hepatoma vs. adenocarcinoma	Cytoplasmic
Cytokeratin, CAM5.2		Cytoplasmic

Antibody	Common Applications	Staining Characteristics
Cytokeratin Cocktail (KerCK)	Epithelial tumors	Cytoplasmic
Cytomegalovirus/IHC	Cytomegalovirus	Nuclear staining pattern in early HCMV infection, later stage, cytoplasmic staining might be observed. Does not x- react with adenovirus, herpes simplex virus, & varicella zoster virus.
D2-40	Lymphatic endothelium, mesothelioma vs. adenocarcinoma	Cytoplasmic and sometimes membrane
Desmin	Smooth and skeletal muscle differentiation	Cytoplasmic, may show a fibrillary aspect.
Epstein-Barr Virus (EBV) RNA CISH	Latent EBV infection	Nuclear. Surgical/Hematopathology consultation and review of the entire case is highly recommended.
E-Cadherin	Lobular vs. ductal breast carcinoma	Cellular membrane, some cytoplasmic
Epithelial Membrane Antigen (EMA)	Metastatic carcinoma of unknown primary, lymphoma	In neoplasms, cytoplasmic and apical luminal membrane staining are the most common patterns of immunoreactivity with peripheral membrane staining or other patterns also occurring. Plasma cells stain positive. In normal breast and other secretory epithelia, labeling is predominantly localized to apical luminal membranes.
Estrogen Receptor (ERA)	Breast carcinoma prognostic marker, metastatic carcinoma of unknown primary	Nuclear, cytoplasmic is considered non- specific Occasional lymphoid tumors and non-lymphoid neoplasms such as melanomas are labeled. Follow CAP & ASCO guidelines.
Factor VIII Related Ag (Von Willebrand Factor)	Megakaryocytic and endothelial marker	Cytoplasm as diffuse or sometimes slightly granular staining
GATA-3	Urothelial carcinoma, breast ductal epithelium, and transitional cells	Must be nuclear, strong or moderate intensity, and non-focal in urothelial carcinoma.
Glial Fibrillary Acidic Protein GFAP	Glial tumors	Cytoplasmic Acetone fixed frozen or Bouins fixed tissues label certain neuronal structures, including axons, indicting a X-rxn w/ neurofilament
Glypican-3	Hepatocellular carcinoma vs. benign hepatocellular lesions Yolk Sac Tumor, Choriocarcinoma	Granular cytoplasmic, and membranous Patterns
Helicobacter Pylori	Helicobacter pylori infection	Individual H. pylori bacterium when present on the surface of the epithelium or in the cytoplasm of the epithelial cells. ASR
Hemoglobin A	Erythoid marker	Cytoplasmic

Antibody	Common Applications	Staining Characteristics
HepPar1 (Hep Ab)	Hepatoma, gastric carcinoma	Displays a distinct, granular cytoplasmic staining pattern, which is occasionally ring- like and is present diffusely throughout the hepatocyte cytoplasm
HER2/NEU c-erbB-2 Oncoprotein	HER-2/neu overexpression for invasive breast and gastric cancers.	Follow CAP and ASCO guidelines for interpretation. Laboratory Developed Test (LDT).
Herpes Simplex Virus I (HSVI)	HSV Infection	Nuclear and cytoplasmic
Herpes Simplex Virus II (HSVII)	HSV Infection	Nuclear and cytoplasmic
HMB-45, Melanosome	Melanocyte marker, angiomyolipoma	Cytoplasmic. Order DAB or RED
hMLH-1	Screening for Lynch Syndrome	Nuclear – stains normal cells and non- mutant cells
hMSH-2	Screening for Lynch Syndrome	Nuclear – stains normal cells and non- mutant cells
hMSH-6	Screening for Lynch Syndrome	Nuclear – stains normal cells and non- mutant cells
lgG	Plasma Cell Marker, used in ratio with IgG4 for IgG4 related diseases	Cytoplasmic
lgG4	Plasma Cell Marker, used in ratio with IgG for IgG4 related diseases	Cytoplasmic
Inhibin, Alpha	Adrenal cortical, sex-cord stromal tumors	Cytoplasmic
Insulin	Pancreatic endocrine tumors	Cytoplasmic
Kappa Light Chains	Plasmacytomas, neoplastic lymphoid tumors vs. reactive proliferations	Cell membrane and/or cytoplasm
Kappa/Lambda Double or Single Stain RNA CISH	Demonstrate clonality in leukemias, plasmacytomas, and certain non- Hodgkin lymphomas	Combination of Kappa (RED) and Lambda (DAB). Cytoplasmic.
Ki-67	Cell proliferation marker	Nuclear, except in mitotic cells where the chromosomes and cytoplasm are labeled Occasional labeling of tissue components in vessel walls and
KiMart	Ki-67 and Melan A. See separate antibodies.	Ki-67 nuclear DAB and Melan A cytoplasmic RED.
Lambda Light Chains	Plasmacytomas, neoplastic lymphoid tumors vs. reactive proliferations	Cell membrane and/or cytoplasm
Luteinizing Hormone, LH	Pituitary neoplasms	Cytoplasmic
Melan-A (A103)	Melanocyte marker, adrenal cortical, sex-cord stromal tumors	Cytoplasmic The Melan-A gene is also called MART-1. Order DAB or RED
Melanoma Cocktail (MelCK)	Melanocyte marker	Cytoplasmic. Combination of HMB-45, two clones of MART-1 and Tyrosinanse antibodies. Order DAB or RED.
Antibody	Common Applications	Staining Characteristics

MIC2, CD99	PNET/Ewings sarcoma	Cell membrane and Cytoplasmic
Microphthalmia Transcription Factor (MITF)		Nuclear, cytoplasmic is not considered positive, Order DAB or RED.
MOC-31	Epithelial related antigen	Membrane
MUM1	Germinal center B cells, activated T cells, plasma cells, and melanocytes	Nuclear positivity with weak to moderate cytoplasmic staining
MYC (c-MyC)	Diffuse Large B-cell lymphomas (DLBCL)	Positive is a nuclear stain in >40% of cells staining moderate to strong.
Myeloperoxidase	Myeloid marker	Cytoplasmic Occasional staining of histiocytes was observed, possibly due to phagocytosed material
MyoD1	Rhabdomyosarcoma	Nuclear. Results of a study suggest that expression in rhabdomyosarcomas is inversely related to the degree of cellular differentiation of the tumor cells. Only
Myogenin	Rhabdomyosarcoma	Nuclear. Nuclear expression has been reported to be inversely related to the degree of cellular differentiation of rhabdomyosarcoma tumor cells
Myoglobin	Rhabdomyosarcoma	Cytoplasmic
Napsin A	Pulmonary Adenocarcinoma	Cytoplasmic
Neurofilament	Neural tumors & neurons	Cytoplasmic
Neuron Specific Enolase NSE	Can be found in virtually any type of neoplasm	Cytoplasmic. Neurons are labeled in both cytoplasm and processes.
Oct-3/4	Classic Seminoma/Dysgerminoma, Embryonal Carcinoma, Gonadoblastoma, and Intratubular Germ Cell Neoplasias	Strong nuclear reactivity, with cytoplasmic staining
p16	Cervical dysplasia	Both nuclear and cytoplasmic. Look for diffuse and intense staining. Focal and sporadic is considered negative.
p40	Pulmonary squamous cell carcinomas, more specific than p63.	Nuclear
p53 Protein	p53 tumor suppressor gene product	Usually nuclear, but cytoplasmic has been reported in some cases Sections must be cut fresh, day of staining.
p57	For classification of molar pregnancy proliferating basal cells of cervix	Nuclear stain in cytotrophoblasts and decidual cells. Hydropic abortus and partial moles=positive stromal cells. Complete moles=negative stromal cells.
P63 Antibody	Basal cells in the prostate gland, myoepithelial cells in breast,	Nuclear
p63/CK5/CK14	Stains basal cells of normal and benign prostate glands, and myoepithelial cells of breast.	p63 nuclear DAB, CK5/CK14 cytoplasmic DAB.
p504S, Alpha-Methylacyl- CoA Racemace (AMACR)	Prostate adenocarcinoma and atypical adenomatous hyperplasia	Granular/Cytoplasmic Best if used in conjunction with high molecular weight cytokeratin. Order DAB or RED.
PAX-5	B-cell, lymphoma/leukemia typing	Nuclear
PAX-8	Ovarian serous ca, renal cell ca, and thyroid tumors	Nuclear
Antibody	Common Applications	Staining Characteristics

NSCLC, GEJ adenoca, urothelial	Cell membrane of tumor cells & cell membrane and/or cytoplasm of immune cells
See separate markers	p63 nuclear DAB, CK5/CK14 cytoplasmic DAB, & P504S RED.
Screening for Lynch Syndrome	Nuclear – stains normal cells and non-mutant cells
Breast prognostic marker	Nuclear, cytoplasmic is considered non- specific. Follow CAP & ASCO guidelines.
Pituitary neoplasms	Cytoplasmic
Prostate carcinoma	Combo of PAP and PSA Antibodies
Prostate carcinoma	Cytoplasmic. Staining is predominantly intracytoplasmic and secretions are also frequently stained positively.
Prostate carcinoma	Cytoplasmic
Expressed in both benign and neoplastic prostate	Cytoplasmc
Melanoma, neural marker	Cytoplasmic. Order DAB or RED.
Myoepithelial marker, smooth muscle differentiation	Cytoplasmic
Neuroendocrine differentiation	Cytoplasmic pattern, occasionally revealing a punctuate or granular pattern
Postmortem diagnosis of Parkinson's Disease and Lewy body dementia.	Cytoplasmic (Lewy bodies, Lewy neurites).
Postmortem diagnosis of Alzheimer's disease and frontotemporal dementia.	Cytoplasmic (neurofibrillary tangles, Pick Bodies).
Elevated levels have been reported in tumor cells of lymphoblastic lymphoma (MLLB), lymphoid blast crisis of chroni myeloid leukemias	Nuclear
Thyroid carcinomas	Staining is confined to the lumen of thyroid follicles and the apical surface of thyrocytes. In carcinomas it may also display staining of the thyrocyte cytoplasm
Mast cells	Granular cytoplasmic staining pattern, corresponding to the secretory granules of mast cells
Lung & thyroid marker, also some neuorendocrine	Nuclear
Melanocytic lesions	Cytoplasmic. Order DAB or RED.
Metastatic carcinoma of unknown primary, sarcomas	Cytoplasmic
Wilms' Tumor, serous carcinoma, &	Nuclear
	carcinoma, & other tumors/immune cells See separate markers Screening for Lynch Syndrome Breast prognostic marker Pituitary neoplasms Prostate carcinoma Prostate carcinoma Prostate carcinoma Expressed in both benign and neoplastic prostate tissue-Prostate Carcinoma Melanoma, neural marker Myoepithelial marker, smooth muscle differentiation Neuroendocrine differentiation Postmortem diagnosis of Parkinson's Disease and Lewy body dementia. Postmortem diagnosis of Alzheimer's disease and frontotemporal dementia. Elevated levels have been reported in tumor cells of lymphoblastic lymphoma (MLLB), lymphoid blast crisis of chroni myeloid leukemias Thyroid carcinomas Mast cells Lung & thyroid marker, also some neuorendocrine Melanocytic lesions Metastatic carcinoma of unknown primary, sarcomas