Purified Anti-Human CD32 Antibody[IV-3], Functional Grade

catalog number: **E-AB-F10750**

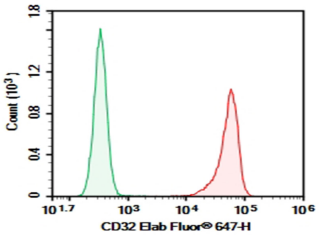
Note: *Centrifuge before opening to ensure complete recovery of vial contents.*

Description

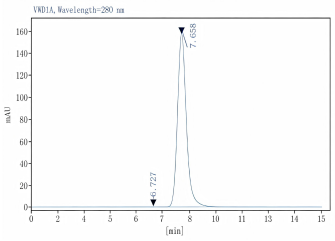
Reactivity	Human
Immunogen	Recombinant Human CD32 protein
Host	Mouse
Isotype	Mouse IgG2b, κ
Clone	IV-3
Purification	>98%, Protein A/G purified
Buffer	Sterile PBS, pH 7.2. < 1.0 EU per mg of the antibody as determined by the LAL method.

Applications	Recommended Dilution
FCM	2 μg/mL(0.5×10^6-1×10^6 cells)
Block	Reported in the literature

Data



Human peripheral blood granulocyte were stained with 0.2 μg Purified Anti-Human CD32 Antibody[IV-3], Functional Grade (Right) and 0.2 μg Mouse IgG2b, κ Isotype Control (Left), followed by Elab Fluor® 647-conjugated Goat Anti-Mouse IgG Secondary Antibody.



Monomer purity ≥95% as determined by analytical size-exclusion chromatography (SEC)

Preparation & Storage

Storage	Store at 4°C valid for 12 months or -20°C valid for long term storage, avoid freeze / thaw cycles. This preparation contains no preservatives, thus it should be handled under aseptic conditions.
Shipping	Ice bag

Background

CD32 is a 40 kD polymorphic transmembrane glycoprotein also known as FcγRII and FCRII. It is an immunoglobulin superfamily member expressed on monocytes/macrophages, granulocytes, platelets and B cells. There are at least 6 isoforms of CD32 resulting from alternative mRNA splicing. CD32 mediates phagocytosis and oxidative burst in granulocytes, as well as platelet aggregation and immunomodulation. The extracellular domain of CD32 binds to polymeric and aggregated IgG and immune complexes, while the intracellular domain has been reported to associate with SHP-1 (B1 isoform).

None (Azide-Free,Low Endotoxin) are perfectly suited to be used in culture or in vivo (for nonhuman studies) for functional assays blocking, neutralizing, activation or depletion where the presence of azide may damage cells or exogenous endotoxin may signal or activate cells.

Application References

Sanae Ben Mkaddem, et al. J Clin Invest. 2014 Sep;124(9):3945-59.