

Elab Fluor® 488 Anti-Human HLA-DR Antibody[Tü36]

Catalog Number: AN00994L

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

Description

Reactivity	Human
Host	Mouse
Isotype	Mouse IgG2b, κ
Clone No.	Tü36
Isotype Control	Elab Fluor® 488 Mouse IgG2b, κ Isotype Control[MPC-11] [Product E-AB-F09812L]
Conjugation	Elab Fluor® 488
Conjugation Information	Elab Fluor® 488 is designed to be excited by the Blue laser (488 nm) and detected using an optical filter centered near 520 nm (e.g., a 525/40 nm bandpass filter).
Storage Buffer	Phosphate buffered solution, pH 7.2, containing 0.09% stabilizer.

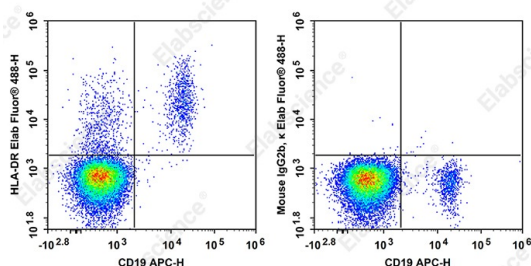
Applications

Recommended usage

FCM

Each lot of this antibody is quality control tested by flow cytometric analysis. **The amount of the reagent is suggested to be used 5 µL of antibody per test (million cells in 100 µL staining volume or per 100 µL of whole blood).** Please check your vial before the experiment. Since applications vary, the appropriate dilutions must be determined for individual use.

Data



Staining of normal human peripheral blood cells with APC

Anti-Human CD19 Antibody and Elab Fluor® 488 Anti-Human HLA-DR Antibody[Tü36] (left) or Elab Fluor® 488 Mouse IgG2b, κ Isotype Control (right). Cells in the lymphocytes gate were used for analysis.

Preparation & Storage

Storage	Keep as concentrated solution. This product can be stored at 2-8°C for 12 months. Please protected from prolonged exposure to light and do not freeze.
Shipping	Ice bag

Antigen Information

Alternate Names	MHC class II;Major Histocompatibility complex II;human leukocyte antigen;HLA
Uniprot ID	P01903
Gene ID	3122

For Research Use Only

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Rev. V1.2

Background

HLA-DR is a heterodimeric cell surface glycoprotein comprised of an α (heavy) chain and a β (light) chain. They are expressed on B cells, activated T cells, monocytes/macrophages, dendritic cells, and other non-professional APCs. In conjunction with the CD3/TCR complex and CD4 molecules, HLA-DR is critical for efficient peptide presentation to CD4+ T cells. Variations in the HLA gene expression are crucial to graft survival.