SONY

Product Data Sheet

FITC anti-mouse CD16/32

Catalog # / Size: 1106525 / 50 µg
1106530 / 500 µg

Clone: 93

Isotype: Rat IgG2a, λ

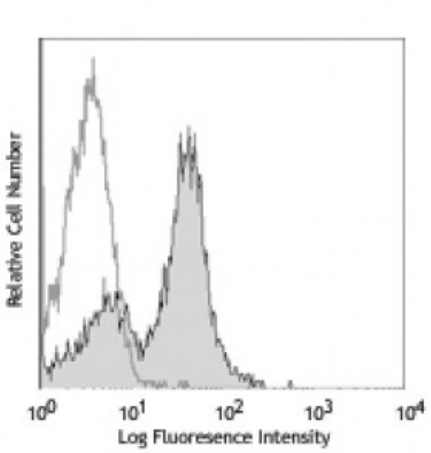
Immunogen: Sorted pre-B cells

Reactivity: Mouse

Preparation: The antibody was purified by affinity chromatography, and conjugated with FITC under optimal conditions. The solution is free of unconjugated FITC.

Formulation: Phosphate-buffered solution, pH 7.2, containing 0.09% sodium azide.

Concentration: 0.5



C57BL/6 mouse splenocytes stained with 93 FITC

Applications:

Applications: Flow Cytometry

Recommended Usage: Each lot of this antibody is quality control tested by immunofluorescent staining with flow cytometric analysis. For flow cytometric staining, the suggested use of this reagent is ≤1.0 microg per million cells in 100 microL volume. It is recommended that the reagent be titrated for optimal performance for each application.

Application Notes: Clone 93 can be used for blocking of CD16/CD32 interactions with the Fc domain of immunoglobulins, but is not the same clone as 2.4G2.

The 93 mAb is specific to the common epitope of CD16/CD32. Additional reported applications (for the relevant formats) include: immunoprecipitation1 and blocking of Fc-mediated reactions in functional studies[2,4,23]. It is useful for blocking non-specific binding of immunoglobulin to Fc receptors. For blocking of Fc receptors in flow cytometric analysis, pre-incubate the cells with purified anti-CD16/CD32 antibody (≤1.0 microg per 10^6 cells in 100 microL volume) for 5-10 minutes on ice prior to immunostaining. The LEAF™ purified antibody (Endotoxin <0.1 EU/µg, Azide-Free, 0.2 µm filtered) is recommended for functional assays (Cat. No. 101310). For highly sensitive assays, we recommend Ultra-LEAF™ purified antibody (Cat. No. 101330) with a lower endotoxin limit than standard LEAF™ purified antibodies (Endotoxin <0.01 EU/microg).

Application References:

1. Personal communication (IP)
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4. Terrazas LI, *et al.* 2005. *Int. J. Parasitol.* 35:1349. (Block)
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8. Kmieciak M, *et al.* 2011. *J. Vis. Exp.* 47:2381. PubMed
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10. Li J, *et al.* 2012. *Arthritis Rheum.* 64:1098. PubMed
11. Azuma M, *et al.* 2012. *Oncoimmunology.* 1:581. PubMed
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13. Hegde VL, *et al.* 2013. *J Biol Chem.* 288:36810. PubMed
14. Huang J, *et al.* 2013. *J. Immunol Methods.* 387:254. PubMed

15. Dutow P, *et al.* 2014. *J Infect Dis.* PubMed
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17. Huang HN, *et al.* 2014. *Antimicrob Agents Chemother.* 58:1538. PubMed
18. Takei S, *et al.* 2014. *Vaccine.* 32:3066. PubMed
19. Richardson ML, *et al.* 2014. *PLoS Negl Trop Dis.* 8:2825. PubMed
20. Cekanaviciute E, *et al.* 2014. *J Immunol.* 193:139. PubMed
21. Kimura T, *et al.* 2014. *Int Immunol.* 26:697. PubMed
22. Everad A, *et al.* 2014. *Nat Commun.* 5:5648. PubMed
23. Cenci E, *et al.* 2006. *J. Leuko. Biol.* 79(1):40-5. (Block)

Description: CD16 is low affinity IgG Fc receptor III (FcR III) and CD32 is FcR II. CD16/CD32 are expressed on B cells, monocytes/macrophages, NK cells, granulocytes, mast cells, and dendritic cells. The Fc receptors bind antibody-antigen immune complexes and mediate adaptive immune responses.

Antigen References:

1. Barclay AN, *et al.* 1997. The Leukocyte Antigen FactsBook Academic Press.
2. Unkeless JC. 1989. *J. Clin. Invest.* 83:355.
3. Qiu WQ, *et al.* 1990. *Science* 248:732.