Product Data Sheet

PE/Cyanine7 anti-mouse CD204

Catalog # / 1373565 / 25 μg

Size: 1373570 / 100 µg

Clone: 1F8C33

Isotype: Rat IgG2a

Recombinant mouse CD204 Immunogen:

extracellular domain

Reactivity: Mouse

Preparation: The antibody was purified by affinity

chromatography and conjugated with

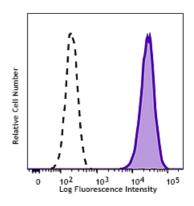
PE/Cyanine7 under optimal

conditions.

Formulation: Phosphate-buffered solution, pH 7.2,

containing 0.09% sodium azide.

Concentration: 0.2 mg/mL



Mouse leukemic monocytemacrophage cell line RAW267.4 was stained with PE/Cyanine7 anti-mouse CD204 (clone 1F8C33) (filled histogram) or PE/Cyanine7 rat IgG2a, κ isotype control (open histogram).

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 $\leq 0.25 \,\mu g$ per million cells in 100 μL volume. It is recommended that the reagent be titrated for optimal

performance for each application.

Application Notes:

This clone has minimal recognition of CD204 in C57BL/6.

Description:

CD204, also known as scavenger receptor A (SR-A) and the macrophage scavenger receptor (MSR), is 220 kDa, trimeric type II transmembrane protein, with one scavenger receptor cysteine-rich domain (SRCR). It is a phagocytic pattern-recognition receptor (PRR) expressed on macrophages and dendritic cells. CD204 is a receptor mediating recognition and internalization of low-density lipoprotein (LDL) by macrophages and plays a critical role in atherogenesis. CD204 also recognizes apoptotic cells, modified lipid proteins, and exogenous pathogen-associated molecular patterns (PAMPs), which results in the induction of innate immune and inflammatory responses. CD204 can act as a co-receptor for Toll-like receptors, such as TLR3, TLR4, or TLR9, to facilitate the expression of proinflammatory cytokines. CD204 has been implicated in several pathological processes such as Alzheimer's disease, sepsis, ischemic injury, and coronary artery disease.

Antigen References:

- 1. Shichita T, et al. 2017. Nat Med. 23:723.
- 2. Muczynski V, et al. 2017. Blood. 129:2443.
- 3. Iftakhar-E-Khuda I, et al. 2016. Proc Natl Acad Sci U S A. 113:10643.
- 4. Nellimarla S, et al. 2015. J Immunol. 195:3858.
- 5. Bonilla DL, et al. 2013. Immunity. 39:537.