Brilliant Violet 711™ anti-human CD16

Catalog # / Size: 2110215 / 25 tests

2110220 / 100 tests

Clone: 3G8

Isotype: Mouse IgG1, κ

Immunogen: Human PMN cells

Reactivity: Human

Preparation: The antibody was purified by affinity

chromatography and conjugated with Brilliant Violet 711™ under optimal conditions. The solution is free of unconjugated Brilliant Violet 711™ and

unconjugated antibody.

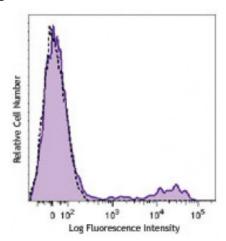
Formulation: Phosphate-buffered solution, pH 7.2,

containing 0.09% sodium azide and BSA

(origin USA).

Workshop Number: **V NK80**

Concentration: Lot-specific



Human peripheral blood lymphocytes were stained with CD16 (clone 3G8) Brilliant Violet 711™ (filled histogram) or mouse lgG1, κ Brilliant Violet 711™ 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 ≤5 microL per million cells or 5 microL per 100 microL of whole blood. It is recommended that the reagent be titrated for optimal performance for each application.

Brilliant Violet 711™ excites at 405 nm and emits at 711 nm. The bandpass filter 710/50 nm is recommended for detection, although filter optimization may be required depending on other fluorophores used. Be sure to verify that your cytometer configuration and software setup are appropriate for detecting this channel. Refer to your instrument manual or manufacturer for support. Brilliant Violet 711™ is a trademark of Sirigen Group Ltd.

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Application Notes:

The 3G8 antibody blocks neutrophil phagocytosis and stimulates NK cell proliferation. Additional reported applications (for the relevant formats) include: immunohistochemical staining of acetone-fixed frozen tissue sections⁶, immunoprecipitation3, stimulation of NK cell proliferation4, blocking of phagocytosis5, and blocking of immunoglobulin binding to FcyRIII^{7,8}. The LEAF purified antibody (Endotoxin <0.1 EU/ μ g, Azide-Free, 0.2 μ m filtered) is recommended for functional assays (Cat. No. 302014). For highly sensitive assays, we recommend Ultra-LEAF purified antibody (Cat. No. 302050) with a lower endotoxin limit than standard LEAF purified antibodies (Endotoxin <0.01

EU/microg).

Application References:

- 1. Knapp W, et al. Eds. 1989. Leucocyte Typing IV. Oxford University Press. New York
- 2. Schlossman S, *et al.* Eds. 1995. Leucocyte Typing V. Oxford University Press. New York.
- 3. Edberg J, et al. 1997. J. Immunol. 159:3849. (IP)
- 4. Hoshino S, et al. 1991. Blood 78:3232. (Stim)
- 5. Tamm A, et al. 1996. Immunol. 157:1576. (Block)
- 6. Da Silva DM, et al. 2001. Int. Immunol. 13:633. (IHC)
- 7. Holl V, et al. 2004. J. Immunol. 173:6274. (Block)
- 8. Hober D, et al. 2002. J. Gen. Virol. 83:2169. (Block)
- 9. Brainard DM, et al. 2009. J. Virol. 83:7305. PubMed
- 10. Smed-Sörensen A, et al. 2008. Blood 111:5037. (Block) PubMed
- 11. Timmerman KL, et al. 2008. J. Leukoc. Biol. 84:1271. (FC) PubMed
- 12. Yoshino N, et al. 2000. Exp. Anim. (Tokyo) 49:97. (FC)
- 13. Rout N, et al. 2010. PLoS One 5:e9787. (FC)
- 14. Kim WK, et al. 2006. Am. J. Pathol. 168:822. (FC)
- 15. Boltz A, et al. 2011. J. Biol Chem. 286:21896. PubMed
- 16. Wu Z, et al. 2013. J. Virol. 87:7717. PubMed
- 17. Marguardt N, et al. 2015. J Immunol. 194:2467. PubMed

Description:

CD16 is known as low affinity IgG receptor III (Fc γ RIII). It is expressed as two distinct forms (CD16a and CD16b). CD16a (Fc γ RIIIA) is a 50-65 kD polypeptide-anchored transmembrane protein. It is expressed on the surface of NK cells, activated monocytes, macrophages, and placental trophoblasts in humans. CD16b (Fc γ RIIIB) is a 48 kD glycosylphosphatidylinositol (GPI)-anchored protein. Its extracellular domain is over 95% homologous to that of CD16a, and it is expressed specifically on neutrophils. CD16 binds aggregated IgG or IgG-antigen complex which functions in NK cell activation, phagocytosis, and antibody-dependent cell-mediated cytotoxicity (ADCC).

Antigen References:

- 1. Fleit H, et al. 1982. P. Natl. Acad. Sci. USA 79:3275.
- 2. Stroncek D, et al. 1991. Blood 77:1572.
- 3. Wirthmueller U, et al. 1992. J. Exp. Med. 175:1381.