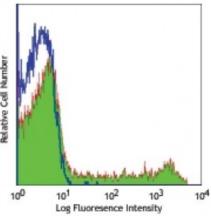
Product Data Sheet

PE anti-human CD16

Catalog # / Size:	2110280 / 100 μg 2110035 / 25 tests
	2110040 / 100 tests
Clone:	3G8 Mouse IgG1, к Human PMN cells
Isotype:	Mouse lgG1, к
Immunogen:	Human PMN cells
Reactivity:	Human
Preparation:	The antibody was purified by affinity chromatography, and conjugated with PE under optimal conditions. The solution is free of unconjugated PE and unconjugated antibody.
Formulation:	microg size: Phosphate-buffered lyd solution, pH 7.2, containing 0.09% sodium azide. test sizes: Phosphate-buffered solution, pH 7.2, containing 0.09% sodium azide and 0.2% (w/v) BSA (origin USA).
Workshop Number:	V NK80
Concentration:	microg sizes: 0.2 mg/ml test sizes: lot-specific



Human peripheral blood ymphocytes stained with 3G8 PE

Applications:

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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 using the microg size, the suggested use of this reagent is ≤ 0.5 microg per million cells in 100 microL volume. Test size products are transitioning from 20 microL to 5 microL per test . Please check your vial or your CoA to find the suggested use of this reagent per million cells in 100 microL staining volume or per 100 microL of whole blood. It is recommended that the reagent be titrated for optimal performance for each application.
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 sections ⁶ , immunoprecipitation3, stimulation of NK cell proliferation4, blocking of phagocytosis5, and blocking of immunoglobulin binding to FcγRIII ^{7,8} . The LEAF [™] purified antibody (Endotoxin <0.1 EU/µg, Azide-Free, 0.2 µm 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:	 Knapp W, <i>et al.</i> Eds. 1989. Leucocyte Typing IV. Oxford University Press. New York. Schlossman S, <i>et al.</i> Eds. 1995. Leucocyte Typing V. Oxford University Press. New York.
	3. Edberg J, <i>et al.</i> 1997. <i>J. Immunol.</i> 159:3849. (IP)

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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. Radom-Aizik S, et al. 2014. Brain Behav Immun. 39:121. PubMed 18. Mandl M, et al. 2014. PLoS One. 9:112140. PubMed CD16 is known as low affinity IgG receptor III (FcyRIII). It is expressed as two **Description:** distinct forms (CD16a and CD16b). CD16a (FcyRIIIA) is a 50-65 kD polypeptideanchored transmembrane protein. It is expressed on the surface of NK cells, activated monocytes, macrophages, and placental trophoblasts in humans. CD16b (FcyRIIIB) 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 antibodydependent cell-mediated cytotoxicity (ADCC). 1. Fleit H, et al. 1982. P. Natl. Acad. Sci. USA 79:3275. Antigen

References:

Stroncek D, et al. 1991. Blood 77:1572.
 Wirthmueller U, et al. 1992. J. Exp. Med. 175:1381.