Pacific Blue™ anti-human HLA-DR

Catalog # / Size: 2235080 / 100 μg

Clone: LN3

Isotype: Mouse IgG2b, κ

Immunogen: human PBL

Reactivity: Human

Preparation: The antibody was purified by affinity

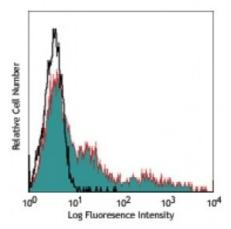
chromatography, and conjugated with Pacific Blue™ under optimal conditions. The solution is free of unconjugated

Pacific Blue™.

Formulation: Phosphate-buffered solution, pH 7.2,

containing 0.09% sodium azide.

Concentration: 0.5



Human peripheral blood lymphocytes stained with LN3 Pacific Blue™

Applications:

Applications: Flow Cytometry

Recommended Usage:

Each lot of this antibody is quality control tested by immunofluorescent staining with flow cytometric analysis. The suggested use of this reagent is ≤ 0.5 microg per 10^6 cells in 100 microL volume or 100 microL of whole blood. It is highly recommended that the reagent be titrated for optimal performance for each

application.

* Pacific Blue™ has a maximum emission of 455 nm when it is excited at 405 nm. Prior to using Pacific Blue™ conjugate for flow cytometric analysis, please verify your flow cytometer's capability of exciting and detecting the fluorochrome.

Application Notes:

Additional reported applications (for the relevant formats) include:

immunohistochemical staining1 of frozen sections and formalin-fixed paraffin-

embedded sections1, and immunoprecipitation1.

Application

1. Marder RJ, et al. 1985. Lab. Invest. 52:497.

References:

2. Norton AJ and Isaacson PG. 1987. Am. J. Pathol. 128:225.

3. Hua ZX, et al. 1998. Hum. Pathol. 29(12):1441.

Description:

The LN3 monoclonal antibody reacts with the HLA-DR antigen, a member of MHC class II molecules. HLA-DR is a heterodimeric cell surface glycoprotein comprised of a 36 kD α (heavy) chain and a 27 kD β (light) chain. It is 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.

Antigen References:

1. Levacher M, et al. 1990. Clin. Exp. Immunol. 81:177.

2. Terstappen L, et al. 1990. J. Leuk. Biol. 48:138.

3. Edwards J, et al. 1985. J. Immunol. 137:490.

4. van Es A, et al.