

APC/Fire™ 750 anti-human CD183 (CXCR3)

Catalog # / Size: 2368770 / 100 tests
2368765 / 25 tests

Clone: G025H7

Isotype: Mouse IgG1, κ

Immunogen: Human CXCR3 transfectants

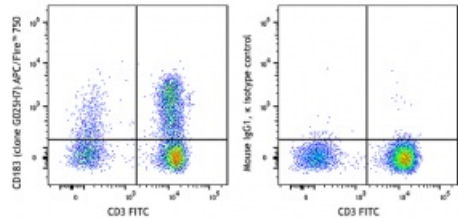
Reactivity: Human, Non-human primate, Other

Preparation: The antibody was purified by affinity chromatography and conjugated with APC/Fire™ 750 under optimal conditions.

Formulation: Phosphate-buffered solution, pH 7.2, containing 0.09% sodium azide and 0.2% (w/v) BSA (origin USA)

Workshop Number: HCDM listed

Concentration: Lot-specific



Human peripheral blood lymphocytes were stained with anti-human CD3 FITC and anti-human CD183 (CXCR3) APC/Fire™ 750 (clone G025H7) (left) or mouse IgG1, κ APC/Fire™ 750 isotype control (right).

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 μL per million cells in 100 μL staining volume or 5 μL per 100 μL of whole blood. It is recommended that the reagent be titrated for optimal performance for each application.

* APC/Fire™ 750 has a maximum excitation of 650 nm and a maximum emission of 787 nm.

Application Notes: Additional reported applications (for the relevant formats) include: Western blotting¹, immunofluorescence², and immunoprecipitation¹.

Application References: 1. Hildreth JE, *et al.* 1991. *Blood* 77:121. (IP, WB)
2. Beatty WL, *et al.* 2006. *J. Cell Sci.* 119:350. (IF)

Description: Human CXCR3, also known as GPR9, is a chemokine receptor that binds CXCL9, CXCL10, and CXCL11. It is a 38 kD seven-pass transmembrane receptor coupled to G-protein. CXCR3 is highly expressed by T cells (Th1), natural killer cells (NK cells), dendritic cells, mast cells, alveolar macrophages, eosinophils, and human airway epithelial cells. CXCR3 is important for effector lymphocyte recruitment into inflamed tissue in various inflammatory and autoimmune diseases, such as chronically inflamed liver, Crohn's disease, rheumatoid arthritis, multiple sclerosis, and inflammatory skin diseases.

- Antigen**
- References:**
1. Loetscher M, et al. 1996. *J. Exp. Med.* 184:963.
 2. Cole KE, et al. 1998. *J. Exp. Med.* 187:2009.
 3. Aksoy MO, et al. 2006. *Am. J. Physiol. Lung Cell Mol. Physiol.* 290:L909.
 4. Curbishley SM, et al. 2005. *Am. J. Pathol.* 167:887.
 5. Turner JE, et al. 2007. *Mini. Rev. Med. Chem.* 7:1089.
 6. Wenzel J, et al. 2008. *J. Invest. Dermatol.* 128:67.