SONY

Product Data Sheet

PE/Dazzle™ 594 anti-human B7-H4

Catalog # / Size: 2390555 / 25 tests
2390560 / 100 tests

Clone: MIH43

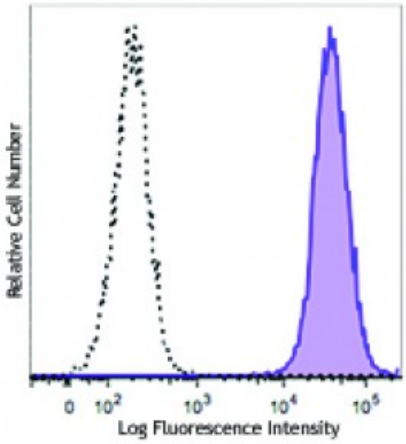
Isotype: Mouse IgG1, κ

Reactivity: Human

Preparation: The antibody was purified by affinity chromatography and conjugated with PE/Dazzle™ 594 under optimal conditions. The solution is free of unconjugated PE/Dazzle™ 594 and unconjugated antibody.

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

Concentration: Lot-specific



Human B7-H4 transfected P815 cells were stained with B7-H4 (clone MIH43) PE/Dazzle™ 594 (filled histogram) or mouse IgG1, κ PE/Dazzle™ 594 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.

* PE/Dazzle™ 594 has a maximum excitation of 566 nm and a maximum emission of 610 nm.

Application Notes: Additional reported applications (for the relevant formats) include: immunohistochemical staining of paraffin-embedded tissue sections[1,2] and immunofluorescence2.

Application References:
1. Quandt D, *et al.* 2011. *Clin. Cancer Res.* 17:3100. (IHC)
2. Smith JB, *et al.* 2014. *Gynecol. Oncol.* 134:181. (FC, IF, IHC)

Description: B7-H4, also known as VTCN1, is a type I transmembrane protein and member of the B7 family. Its extracellular region consists of one IgV-like and one IgC-like domain. B7-H4 expression has been reported on activated T cells, B cells, monocytes, and dendritic cells. On T cells, B7-H4 inhibits proliferation, cytokine secretion, and cytotoxicity. B7-H4 is also expressed by different carcinomas including renal, gastric, breast, ovarian and melanoma. Its expression is associated with a poor prognosis.

Antigen References:
1. Fauci JM, *et al.* 2012. *Gynecol. Oncol.* 127:420.
2. Chen C, *et al.* 2012. *J. Immunother.* 35:354.
3. Guo G, *et al.* 2012. *Clin. Rheumatol.* 31:271.
4. Arigami T, *et al.* 2010

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