

PE anti-human CD99

Catalog # / Size: 2456525 / 25 tests
2456530 / 100 tests

Clone: 3B2/TA8

Isotype: Mouse IgG1, κ

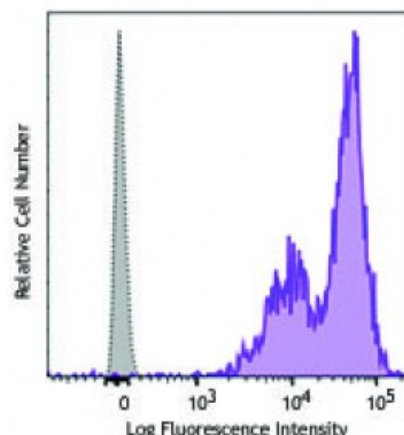
Immunogen: Human thymus

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

Concentration: 0.5



Human peripheral blood lymphocytes were stained with CD99 (clone 3B2/TA8) PE (filled histogram) or mouse IgG1, κ PE 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.

Application References: 1. Waclavicek M, *et al.* 1998. *J. Immunol.* 161:4671.
2. Pickl W, *et al.* 2001. *J. Virol.* 75:7175.

Description: CD99 is a type I single chain transmembrane protein devoid of N-linked glycosylation sites encoded by the pseudoautosomal gene MIC2. CD99 has an apparent molecular weight of 32 kD and is widely expressed on a variety of tissues. CD99 is highly expressed on thymocytes, T cells, and T cell leukemias and lymphomas. However, it is absent on some B cell lines, fetal B cells, eosinophils, granulocytes and the NK-cell line YT. CD99 is involved in spontaneous rosette formation with erythrocytes and may also be involved in other T-cell and hematopoietic cell adhesion pathways. CD99 has been reported to activate a caspase-independent death pathway in T cells under some conditions. CD99 interacts with a number of proteins including ferritin heavy chain 1, karyopherin β 1, TRIP13, cyclophilin A, annexin II, and ubiquitin-conjugating enzyme E2H.

Antigen References: 1. Gelin C, *et al.* 1989. *EMBO.* 8:3253.
2. Goodfellow PJ, *et al.* 1986. *Science* 234:740.
3. Pettersen RD, *et al.* 2001. *J. Immunol.* 166:4931.