

FITC Anti-Human CD34 Monoclonal Antibody



天津三箭生物技术股份有限公司
Tianjin Sungene Biotech Co., Ltd.
精准 高效 稳定 Precision Efficient Stable

Catalog Number	Vial Size
H20342-02G	25 tests
H20342-02H	100 tests

Market	400-621-0003 marketing@sungenebiotech.com
Support	022-66211636-8024 techsupport@sungenebiotech.com
Web	www.sungenebiotech.com

Important Note: Centrifuge before opening to ensure complete recovery of vial contents.
This product is guaranteed up to one year from purchase.

Purified Antibody Characterization

Clone	Isotype	Reactivity
4H11	Mouse IgG2b	Human

Description

The 4H11 monoclonal antibody reacts with human CD34, also known as mucosialin. CD34 belongs to a protein family which also includes endoglycan and podocalyxin. Members of this family are single pass transmembrane proteins with a heavily glycosylated extracellular and N-terminal mucin domain. CD34 was first identified as an antigen expressed on hematopoietic progenitors, and has since been extensively used as a marker to isolate cells capable of hematopoietic cell engraftment. In spite of this, the function of CD34 remains unresolved. In addition to expression on hematopoietic progenitors, CD34 is expressed on some populations of mesenchymal stem cells, tumor cell lines, and by vascular endothelia in the adult. Epitopes of CD34 have been assigned to three classes (class I, II or III) based on their differential sensitivity to enzymatic cleavage by neuraminidase, chymopapain, or O-glycoprotease. According to this analysis, the 4H11 antibody belongs to class III, indicating that it reacts with a protein epitope

Product Information

Conjugation: FITC

Formulation: PBS pH 7.2, 0.09% NaN₃, 0.2% BSA

Storage: Keep as concentrated solution. Store at 4°C and protected from prolonged exposure to light. **Do not freeze.**

Application: Recommended Application: FC

Usage: Each lot of this antibody is quality control tested by immunofluorescent staining with flow cytometric analysis (The amount of the reagent is suggested to be used from 20 µL to 5 µL per 100 µL of peripheral blood. Please check your vial). Since applications vary, the appropriate dilutions must be determined for individual use.

References

- [1] Sutherland DR, et al .1988. Leukemia. 2(12):793-803.
- [2] Elknerová K, et al. 2007. Neoplasma. 54(4):311-20.
- [3] Baumheter S, et al .1993. Science. 262(5132):436-8.

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