

Produktinformation



Forschungsprodukte & Biochemikalien



Zellkultur & Verbrauchsmaterial



Diagnostik & molekulare Diagnostik



Laborgeräte & Service

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Lieferung & Zahlungsart

siehe unsere Liefer- und Versandbedingungen

Zuschläge

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- Trockeneiszuschlag
- Gefahrgutzuschlag
- Expressversand

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Datasheet for 009-008-002

Human IgG PE

Overview

Description:	Human IgG Whole Molecule Phycoerythrin Conjugated - 009-008-002
Item No.:	009-008-002
Size:	0.5 mL
Origin:	Human

Product Details	
Background:	Secreted as part of the adaptive immune response by plasma B cells, immunoglobulin G constitutes 75% of serum immunoglobulins. Immunoglobulin G binds to viruses, bacteria, as well as fungi and facilitates their destruction or neutralization via agglutination (and thereby immobilizing them), activation of the compliment cascade, and opsonization for phagocytosis. The whole IgG molecule possesses both the F(c) region, recognized by high-affinity Fc receptor proteins, as well as the F(ab) region possessing the epitope-recognition site. Both heavy and light chains of the antibody molecule are present. This Human IgG whole molecule is conjugated to Phycoerythrin.
Synonyms:	Human IgG Phycoerythrin conjugated, Human IgG PE conjugated, isotype control for flow cytometry
Species of Origin:	Human
Conjugate:	R-Phycoerythrin (RPE)
Format:	IgG
Type:	Native Protein
F/P Ratio:	1-2

Target Details

Purity/Specificity: Human IgG whole molecule Phycoerythrin conjugated was prepared from normal serum

delipidation, salt fractionation, ion exchange chromatography followed by extensive dialysis against the buffer stated above. Human IgG whole molecule Phycoerythrin conjugated was assayed by immunoelectrophoresis resulted in a single precipitin arc against anti-Phycoerythrin,

anti-Human IgG and anti-Human Serum.

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Application Details

Application Note:	Human IgG whole molecule Phycoerythrin conjugated can be utilized as a control reagent in Flow Cytometry, Immunohistochemistry, and Western Blotting. Researchers should determine optimal titers for applications that are not stated.
Assay Dilutions:	All assays should be optimized by the user. Recommended dilutions (if any) may be listed below.
FC:	1:500-1:2500
IHC:	1:500-1:2500
WB:	1:1,000-1:5,000

Formulation

Physical State:	Lyophilized
Concentration:	0.5 mg/mL by absorbance = 82.0 at 565 nm
Buffer:	$0.02~\mathrm{M}$ Potassium Phosphate, $0.15~\mathrm{M}$ Sodium Chloride, pH 7.2 with $0.01\mathrm{M}$ Magnesium Chloride and $0.01\mathrm{M}$ Beta-Mercaptoethanol
Preservative:	0.01% (w/v) Sodium Azide
Stabilizer:	10 mg/mL Bovine Serum Albumin (BSA) - Immunoglobulin and Protease free
Reconstitution Volume:	500 μL
Reconstitution Buffer:	Restore with deionized water (or equivalent)

Shipping & Handling

Shipping Condition:	Ambient
Storage Condition:	Store vial at 4° C prior to restoration. Restore with deionized water (or equivalent). This product is stable at 4° C as an undiluted liquid. Dilute only prior to immediate use. Centrifuge product if not completely clear after standing at room temperature. Do not freeze after reconstitution. Store reagent in the dark. Use subdued lighting during handling and incubation of cells prior to analysis.
Expiration:	Expiration date is one (1) year from date of receipt.

Disclaimer

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No test method can provide total assurance that the hepatitis B virus, hepatitis C virus, human immunodeficiency virus, or any other infectious agents are absent. Thus, all blood products, including purified proteins derived from human blood sources, should be handled at Biosafety Level 2 as recommended by the CDC\NIH manual entitled Biosafety in Microbiological and Biomedical Laboratories for potentially infectious human serum, blood specimens or proteins derived from same. Source material for the human blood product supplied to your facility has been tested for the detection of HIV antibody, Hepatitis B surface antigen, antibody to Hepatitis C, HIV 1 antigen(s), antibody to HTLV - I/II, and syphilis by FDA guidelines. All units were found to be non-reactive/negative for these tests. All human blood source material is collected in FDA licensed centers and is tested with FDA approved test kits.

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