



# SZABO SCANDIC

Part of Europa Biosite

## Produktinformation



Forschungsprodukte & Biochemikalien



Zellkultur & Verbrauchsmaterial



Diagnostik & molekulare Diagnostik



Laborgeräte & Service

Weitere Information auf den folgenden Seiten!  
See the following pages for more information!



### Lieferung & Zahlungsart

siehe unsere [Liefer- und Versandbedingungen](#)

### Zuschläge

- Mindermengenzuschlag
- Trockeneiszuschlag
- Gefahrgutzuschlag
- Expressversand

### SZABO-SCANDIC HandelsgmbH

Quellenstraße 110, A-1100 Wien

T. +43(0)1 489 3961-0

F. +43(0)1 489 3961-7

[mail@szabo-scandic.com](mailto:mail@szabo-scandic.com)

[www.szabo-scandic.com](http://www.szabo-scandic.com)

[linkedin.com/company/szaboscandic](https://www.linkedin.com/company/szaboscandic) 

Technically  
Speaking

**CEDARLANE**<sup>®</sup>   
[www.cedarlanelabs.com](http://www.cedarlanelabs.com)

Conveniently Delivering You Today's Innovations  
for the Science of Tomorrow™

### Mouse Anti- CD19 Monoclonal Antibody

CLX29AP  
CLX29B  
CLX29F

CLX29PE  
CLX29PCP  
CLX29APC

**Clone:** LT19

**Isotype:** Mouse IgG1

**Specificity:**

The antibody LT19 reacts with CD19 (B4), a 95 kDa type I transmembrane glycoprotein (immunoglobulin superfamily) expressed on B lymphocytes and follicular dendritic cells; it is lost on plasma cells. HLDA 10

**Immunogen:** Daudi human Burkitt lymphoma cell line.

**Species Reactivity:** Human.

**Application:** Flow Cytometry and Immunoprecipitation.

**Conjugate Preparation:**

The purified antibody is conjugated with Biotin-LC-NHS, Fluorescein isothiocyanate (FITC), R-Phycoerythrin (PE), Peridinin-chlorophyll-protein complex (PerCP) or cross-linked Allophycocyanin (APC) under optimum conditions. The conjugates are purified by size-exclusion chromatography and adjusted for direct use (FITC, PE, APC, PerCP). No reconstitution is necessary.

**Presentation:**

**Purified:** 0.1 mg (1 mg/mL) purified IgG buffered in PBS with 15 mM sodium azide, approx. pH 7.4. (Purified by protein-A affinity chromatography; purity > 95% by SDS-PAGE).

**Biotin:** 0.1 mg (1 mg/mL) of Biotin conjugated IgG buffered in tris buffered saline (TBS) with 15 mM sodium azide, approx. pH 8.0.

**FITC:** 2 mL of FITC conjugated IgG buffered in in stabilizing phosphate buffered saline (PBS) solution containing 15mM sodium azide. Sufficient for 100 tests.

**PE:** 2 mL of PE conjugated IgG buffered in in stabilizing phosphate buffered saline (PBS) solution containing 15mM sodium azide. Sufficient for 100 tests.

**PerCP:** 1 mL of APC conjugated IgG buffered in in stabilizing phosphate buffered saline (PBS) solution containing 15mM sodium azide. Sufficient for 100 tests.

**APC:** 1 mL of APC conjugated IgG buffered in in stabilizing phosphate buffered saline (PBS) solution containing 15mM sodium azide. Sufficient for 100 tests.

**Storage / Stability:**

Store in the dark at 2-8°C. Do not freeze all formats. Avoid prolonged exposure to light of conjugates. Do not use after expiration date stamped on vial label.

*Continued Overleaf.....*

Visit our website for your local distributor.

**CEDARLANE**<sup>®</sup> 

[www.cedarlanelabs.com](http://www.cedarlanelabs.com)

An ISO 9001:2000 and ISO 13485:2003  
registered company.

In CANADA: Toll Free: 1-800-268-5058

4410 Paletta Court, Burlington, ON L7L 5R2 ph: (289) 288-0001, fax: (289) 288-0020  
e-mail: [general@cedarlanelabs.com](mailto:general@cedarlanelabs.com)

In the USA: Toll Free: 1-800-721-1644

1210 Turrentine Street, Burlington, NC 27215 ph: (336) 513-5135, fax: (336) 513-5138  
e-mail: [service@cedarlanelabs.com](mailto:service@cedarlanelabs.com)

**Usage:**

Recommended dilutions for Flow Cytometry analysis of human blood cells:

**Purified:** 5 µg/ml

**Biotin:** 1:200 dilution

**FITC:** 20 µl reagent / 100 µl of whole blood or 10<sup>6</sup> cells in a suspension.

**PE:** 20 µl reagent / 100 µl of whole blood or 10<sup>6</sup> cells in a suspension.

**PerCP:** 10 µl reagent / 100 µl of whole blood or 10<sup>6</sup> cells in a suspension.

**APC:** 10 µl reagent / 100 µl of whole blood or 10<sup>6</sup> cells in a suspension.

**\*Optimal working concentrations should be determined by the investigator.**

**Background:**

CD19 is a transmembrane glycoprotein of Ig superfamily expressed by B cells from the time of heavy chain rearrangement until plasma cell differentiation. It forms a tetrameric complex with CD21 (complement receptor type 2), CD81 (TAPA-1) and Leu13. Together with BCR (B cell antigen receptor), these complex signals to decrease B cell threshold for activation by the antigen. Besides being signal-amplifying coreceptor for BCR, CD19 can also signal independently of BCR coligation and it turns out to be a central regulatory component upon which multiple signaling pathways converge. Mutation of the CD19 gene results in hypogammaglobulinemia, whereas CD19 overexpression causes B cell hyperactivity.

**References:**

\*Fujimoto M, Poe JC, Jansen PJ, Sato S, Tedder TF: CD19 amplifies B lymphocyte signal transduction by regulating Src-family protein tyrosine kinase activation. *J Immunol.* 1999 Jun 15;162(12):7088-94.

\*Inabe K, Kurosaki T: Tyrosine phosphorylation of B-cell adaptor for phosphoinositide 3-kinase is required for Akt activation in response to CD19 engagement. *Blood.* 2002 Jan 15;99(2):584-9.

\*van Zelm MC, Reisli I, van der Burg M, Castaño D, van Noesel CJ, van Tol MJ, Woellner C, Grimbacher B, Patiño PJ, van Dongen JJ, Franco JL: An antibody-deficiency syndrome due to mutations in the CD19 gene. *N Engl J Med.* 2006 May 4;354(18):1901-12.

\*Shi X, Xie C, Chang S, Zhou XJ, Tedder T, Mohan C: CD19 hyperexpression augments Sle1-induced humoral autoimmunity but not clinical nephritis. *Arthritis Rheum.* 2007 Sep;56(9):3057-69.

\*Elias F, Flo J, Lopez RA, Zorzopulos J, Montaner A, Rodriguez JM: Strong cytosine-guanosine-independent immunostimulation in humans and other primates by synthetic oligodeoxynucleotides with PyNTTTTGT motifs. *J Immunol.* 2003 Oct 1;171(7):3697-704.

\*Lin CW, Liu TY, Chen SU, Wang KT, Medeiros LJ, Hsu SM: CD94 1A transcripts characterize lymphoblastic lymphoma/leukemia of immature natural killer cell origin with distinct clinical features. *Blood.* 2005 Nov 15;106(10):3567-74. Epub 2005 Jul 26.

\*Stehlíková O, Chovancová J, Tichý B, Krejčí M, Brychtová Y, Panovská A, Francová Skuhrová H, Burčková K, Borský M, Loja T, Mayer J, Pospíšilová S, Doubek M: Detecting minimal residual disease in patients with chronic lymphocytic leukemia using 8-color flow cytometry protocol in routine hematological practice. *Int J Lab Hematol.* 2013 Sep 13. doi: 10.1111/ijlh.12149. \*Kayserova J, Vcelakova J, Stechova K, Dudkova E, Hromadkova H, Sumnik Z, Kolouskova S, Spisek R, Sediva A: Decreased dendritic cell numbers but increased TLR9-mediated interferon-alpha production in first degree relatives of type 1 diabetes patients. *Clin Immunol.* 2014 Jul;153(1):49-55.

**Laboratory Reagent For Research Use Only**