

## Monoclonal Antibody to Human CD34

<b>Catalog No.:</b>	SM1095S
<b>Quantity:</b>	0.5 ml
<b>Concentration:</b>	0.1 mg/ml
<b>Host / Isotype:</b>	Mouse / IgG1
<b>Clone:</b>	QBEND10
<b>Immunogen:</b>	Human Endothelium

Format: This antibody is supplied as liquid in 20 mM Tris-Borate, 150 mM Sodium Chloride, dialyzed media RPMI 1640/D-MEM containing Fetal Bovine Serum, BMC-6 Carrier Polysaccharides, Carrier Protein, and 0.05% Sodium Azide, pH 7.5.

**Applications:** Immunohistochemistry on frozen and formalin-fixed paraffin-embedded tissue (1:50; No special pretreatment is required; Recommended positive control: Human tonsil). Other applications not tested. Optimal dilutions of this antibody are dependent on conditions and should be determined by the user.  
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**Specificity:** CD34 a single chain transmembrane glycoprotein is selectively expressed on human lymphoid and myeloid hematopoietic cells. This antibody is specific against basolateral surfaces and to a lesser extent with the intracytoplasmic vesicular compartment. This antibody reacts with human endothelia. Some recognition occurs in vascular adventitia and basement membranes. Antibody to CD34 also reacts with vascular endothelial cells in normal tissues and in benign and malignant proliferations. This antibody is of value in the study of benign and malignant vascular tumors as well as characterization of leukemias. Reacts with Human. Does not react with rat, Other species not tested. Cellular Localization: Cell Membrane/cytoplasmic.

Mol. Wt .of Antigen: 105-120 kD

**Storage:** Store the antibody at 4°C. Do not freeze! Shelf life: one year from despatch.

Aliquoting Instructions: Do not dilute the entire reconstituted solution at once. Withdraw aliquots as needed with a micropipette and keep concentrated stock at 4C. Dilute according to the particular application being used. In general, the 0.05M Borate pH 8.0 containing 0.15M Sodium Chloride, 0.05% Sodium Azide, is a good diluent to use with most antibodies. Avoid diluting the entire contents of the vial at once since the diluted solution may have reduced stability.

**General Readings:** 1. Ramani, P. et al. Histopathology. 17: 237-242, 1990.  
2. Sankey, E.S., et al. J. Pathology. 161: 267-270, 1990.

**For research and in vitro use only. Not for diagnostic or therapeutic work.**  
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