

Instructions For Use

RA0042-C.5-IFU-RUO

Rev. Date: Sept. 29, 2014

Revision: 1

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P.O. Box 3286 - Logan, Utah 84323, U.S.A. - Tel. (800) 729-8350 - Tel. (435) 755-9848 - Fax (435) 755-0015 - www.scytek.com

CD8A (Cytotoxic & Suppressor T-Cell Marker); Clone C8/144B (Concentrate)

Availability/Contents: Item # Volume 0.5 ml RA0042-C.5

Description:

Species: Mouse

A 13 amino acid peptide from C-terminal cytoplasmic domain of alpha chain of human CD8 Immunogen:

molecule.

Clone: C8/144B Isotype: IgG1, kappa Entrez Gene ID: 925 (Human) Hu Chromosome Loc.:

CD8 antigen, alpha polypeptide (p32), T8/Leu-2 T-lymphocyte differentiation antigen, Ly3, Synonyms:

LYT3, MAL, T-cell surface glycoprotein CD8 alpha chain

Mol. Weight of Antigen:

Format: 200µg/ml of Ab purified from Bioreactor Concentrate by Protein A/G. Prepared in 10mM PBS

with 0.05% BSA & 0.05% azide.

CD8 is a 68 kDa transmembrane glycoprotein expressed as a heterodimer by a majority of Specificity:

thymocytes, and by major histocompatibility complex (MHC) class I restricted, mature,

suppressor/cytotoxic T-cells.

Background: CD8 is a cell surface receptor expressed either as a heterodimer with the CD8 beta chain (CD8

alpha/beta) or as a homodimer (CD8 alpha/alpha). A majority of thymocytes and a

subpopulation of mature T-cells and NK cells express CD8a, CD8 binds to MHC class I and through its association with protein tyrosine kinase p56lck plays a role in T-cell development and activation of mature T-cells. For mature T-cells, CD4 and CD8 are mutually exclusive, so anti-CD8 is generally used in conjunction with anti-CD4. It is a useful marker for distinguishing

helper/inducer T-lymphocytes, and most peripheral T-cell lymphomas are CD4+/CD8-. Anaplastic large cell lymphoma is usually CD4+ and CD8-, and in T-lymphoblastic

lymphoma/leukemia, CD4 and CD8 are often co-expressed. CD8 is also found in littoral cell

angioma of the spleen.

Human. Others not known. Species Reactivity: Positive Control: HuT78 or hPBL. Tonsil.

Cellular Localization: Cell surface

Titer/ Working Dilution: Immunohistochemistry (Frozen and Formalin-fixed): 1-2 µg/ml

> Flow Cytometry: 0.5-1 µg/million cells

Immunofluorescence: $0.5-1 \mu g/ml$ Western Blotting: $0.5-1 \mu g/ml$

1-2 μg/500μg protein lysate Immunoprecipitation:

Microbiological State: This product is not sterile.

Storage: 2° C

ScyTek Laboratories, Inc.

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Uses/Limitations: Not to be taken internally.

For Research Use Only.

This product is intended for qualitative immunohistochemistry with normal and neoplastic formalin-fixed, paraffin-embedded

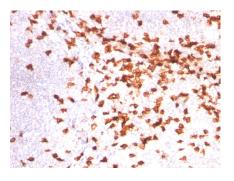
tissue sections, to be viewed by light

microscopy.

Do not use if reagent becomes cloudy. Do not use past expiration date.

Non-Sterile.

Ordering Information and Current Pricing at www.scytek.com



Formalin-fixed, paraffin-embedded human tonsil (20X) stained with CD8A MAb (C8/144B). Note cell surface staining.

Procedure:

- 1. **Tissue Section Pretreatment (Required):** Staining of formalin fixed, paraffin embedded tissue sections is significantly enhanced by pretreatment with Citrate Plus (ScyTek catalog# CPL500).
- Primary Antibody Incubation Time: We suggest an incubation period of 30 minutes at room temperature.
 However, depending upon the fixation conditions and the staining system employed, optimal incubation should be determined by the user.
- 3. **Visualization:** For maximum staining intensity we recommend the "UltraTek HRP Anti-Polyvalent Lab Pack" (ScyTek catalog# UHP125, see IFU for instructions) combined with the "DAB Chromogen/Substrate Bulk Pack (High Contrast)" (ScyTek catalog# ACV500, see IFU for instructions).

Precautions:

Contains Sodium Azide as a preservative (0.09% w/v).

Do not pipette by mouth.

Avoid contact of reagents and specimens with skin and mucous membranes.

Avoid microbial contamination of reagents or increased nonspecific staining may occur.

This product contains no hazardous material at a reportable concentration according to U.S. 29 CFR 1910.1200,

OSHA Hazardous Communication Standard and EC Directive 91/155/EC.

References:

1. Mason DY, et. al. Journal of Clinical Pathology, 1992, 45(12):1084-8.

Warranty:

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Storage: 2° C

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