


CD15 / FUT4 (Reed-Sternberg Cell Marker); Clone FUT4/815 (Concentrate)

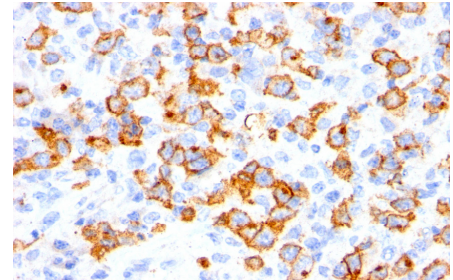
Availability/Contents:	<u>Item #</u>	<u>Volume</u>
	RA0120-C.5	0.5 ml
Description:		
Species:	Mouse	
Immunogen:	Recombinant human FUT4 protein	
Clone:	FUT4/815	
Isotype:	IgM, kappa	
Entrez Gene ID:	2526 (Human)	
Hu Chromosome Loc.:	11q21	
Synonyms:	3 Fucosyl N Acetyl Lactosamine; Alpha (1,3) Fucosyltransferase; Alpha 13 fucosyltransferase FucT; ELAM Ligand Fucosyltransferase; ELFT; FCT3A; Fuc-TIV; Fucosyltransferase 4 Alpha 1 3 Fucosyltransferase Myeloid Specific; Fucosyltransferase 4; Galactoside 3 L Fucosyltransferase; Lewis X; LeX; SSEA1; Stage Specific Embryonic Antigen 1	
Mol. Weight of Antigen:	~220kDa	
Format:	Bioreactor Concentrate with 0.05% Azide.	
Specificity:	This antibody reacts with a 220 kDa protein, CD15 / FUT4 expressed on Reed-Sternberg cells.	
Background:	CD15 plays a role in mediating phagocytosis, bactericidal activity, and chemotaxis. It is present on >95% of granulocytes including neutrophils and eosinophils and to a lesser degree on monocytes. In addition, CD15 is expressed in Reed-Sternberg cells and some epithelial cells. CD15 antibody is very useful in the identification of Hodgkin's disease. CD15 is occasionally expressed in large cell lymphomas of both B and T phenotypes which otherwise have a quite distinct histological appearance.	
Species Reactivity:	Human. Others not known.	
Positive Control:	U937 cells, Reed-Sternberg's cells in Hodgkin's lymphoma.	
Cellular Localization:	Cell surface and granular paranuclear	
Titer/ Working Dilution:	Immunohistochemistry (Frozen and Formalin-fixed): 1:50-1:100	
	Flow Cytometry:	5-10 µl/million cells
	Immunofluorescence:	1:50-1:100
	Western Blotting:	1:100-1:200
Microbiological State:	This product is not sterile.	

Storage: 2° C  8° C

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Molsnstraat 15
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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.



Formalin-paraffin human Hodgkin's lymphoma stained with CD15 / FUT4; Clone FUT4/815.

Ordering Information and Current Pricing at www.scytek.com

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).
2. **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. Hakomori, S. 1992. LeX and related structures as adhesion molecules. Histochem. J. 24: 771-776.

Warranty:

No products or "Instructions For Use (IFU)" are to be construed as a recommendation for use in violation of any patents. We make no representations, warranties or assurances as to the accuracy or completeness of information provided on our IFU or website. Our warranty is limited to the actual price paid for the product. ScyTek Laboratories, Inc. is not liable for any property damage, personal injury, time or effort or economic loss caused by our products. Immunohistochemistry is a complex technique involving both histological and immunological detection methods. Tissue processing and handling prior to immunostaining can cause inconsistent results. Variations in fixation and embedding or the inherent nature of the tissue specimen may cause variations in results. Endogenous peroxidase activity or pseudoperoxidase activity in erythrocytes and endogenous biotin may cause non-specific staining depending on detection system used.

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