

Instructions For Use

A00048-IFU-RUO

Rev. Date: Nov. 6, 2015

Revision: 2

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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

CD74; Clone LN2 (Ready-To-Use)

Availability/Contents: <u>Item #</u> <u>Volume</u>

 A00048-0002
 2 ml

 A00048-0007
 7 ml

 A00048-0025
 25 ml

Description:

Species: Mouse

Immunogen: SU-DHL-4 lymphoma cells

Clone: LN2

Isotype: IgG1, kappa

Entrez Gene ID: 972 (Human); 16149 (Mouse)

Hu Chromosome Loc.: 5q33.1

Synonyms: CLIP, DHLAG, Gamma chain of class II antigens, HLA class II histocompatibility antigen

gamma chain, HLA-DR antigens-associated invariant chain, HLADR-gamma (HLADĞ), la antigen-associated invariant chain, la-gamma, Major histocompatibility complex class II

invariant chain, MHC HLA-DR gamma chain.

Mol. Weight of Antigen: 33-41kDa

Format: This antibody has been pretitered and quality controlled to work on formalin-fixed paraffin-

embedded as well as acetone fixed cryostat tissue sections. No further titration is required.

Specificity: This monoclonal antibody recognizes a protein of ~35kDa, identified as CD74 (Workshop IV). Background: CD74 is a type II transmembrane protein which binds to the peptide binding groove of newly

round: CD74 is a type II transmembrane protein which binds to the peptide binding groove of newly synthesized MHC class II alpha/beta heterodimers and prevents their premature association with endogenous polypeptides. CD74 is expressed primarily by antigen presenting cells, such

with endogenous polypeptides. CD74 is expressed primarily by antigen presenting cells, such as B-lymphocytes (from before the pre-B cell stage to before the plasma cell stage),

macrophages, monocytes, and many epithelial cells. Anti-CD74 stains predominantly germinal center lymphocytes and B-cell lymphomas, but rarely T-cell lymphomas. Anti-CD74 has been

shown to be useful in differentiating atypical fibroxanthoma (-) from malignant fibrous

histiocytoma (+).

Species Reactivity: Human, Baboon and Mouse. Does not react with Rat. Others not known.

Positive Control: Daudi or Raji Cells. Tonsil or Lymph Node. Cell surface and paranuclear globular

Titer/Working Dilution: No further dilution is required. Microbiological State: This product is not sterile.







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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

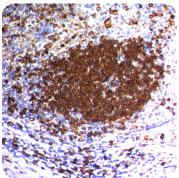
tissue sections, to be viewed by light

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



FFPE human tonsil stained with CD74; Clone LN2 using UltraTek HRP and DAB Chromogen.

Procedure:

- Tissue Section Pretreatment (Highly Recommended): Staining of formalin fixed, paraffin embedded tissue 1. sections is enhanced by pretreatment with Citrate Plus (ScyTek catalog# CPL500).
- Primary Antibody Incubation Time: We suggest an incubation period of 30 minutes at room temperature. 2. However, depending upon the fixation conditions and the staining system employed, optimal incubation should be determined by the user.
- Visualization: For maximum staining intensity we recommend the "UltraTek HRP Anti-Polyvalent Lab Pack" 3. (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:

- Epstein AL et. al. J of Immunology 133: 1028-1036, 1984. Marder RJ et. al. Lab Invest 52: 497-504, 1985.
- Okon et al. Cancer 56: 95, 1985.
- Sherrod et al. Cancer 57: 2135, 1986.

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