

anti-mouse Erythroid Cell FITC-conjugated**Cat-No.: M22132F** **1 ml****Clone:** TER-119

Specificity: The anti-mouse erythroid cell (Ly-76) mAb is selectively reactive with both fetal and adult erythroid cells. This monoclonal antibody (clone: TER-119) is specific for cells at stages from early proerythroblast to mature erythrocytes. TER-119 is reported to react with 20-25% of bone marrow cells and 2-3% of spleen cells but not with thymocytes or lymph node cells. In fetal haematopoietic tissues, 30-40% of day 10 yolk sac cells, 80-90% of day 14 fetal liver cells and 40-50% of newborn liver cells were reactive with this antibody. TER-119+ cells in adult bone marrow expressed significant levels of CD45 but not myeloid (Mac-1, Gr-1) or B cell (B220) markers. This mAb immunoprecipitated protein bands with molecular weights of 110 kDa, 60 kDa, 52 kDa and 32 kDa from erythrocyte membrane whereas only a 52 kDa band was detected by TER-119 in Western blot analysis. It has been determined that the TER-119 antigen is a molecule associated with cell-surface glycoprotein A but not with glycoprotein A itself. Also the antigen is only expressed on normal erythroid cells but not on erythroleukaemia cells. Applications include: Flow cytometry, immunohistochemistry (frozen & paraffin sections). Also reported to work in Western Blot, immunoprecipitation and immunohistochemical staining of acetone – fixed frozen sections

Isotype subclass: Rat IgG2b**Form:** Purified from ascitic fluid via Protein G Chromatography, FITC conjugated**Physical state:** Liquid**Buffer/Additives/Preservative:** PBS containing 1 % BSA and 0.09 % sodium azide (pH 7.4).**Expiration date:** The reagent is stable until the expiry date stated on the vial label.**Storage conditions:** Store at 4 °C. Do not freeze. Avoid prolonged exposure to light.**Application:** Flow Cytometry, Immunohistochemistry (frozen & paraffin sections), Western Blot, Immunoprecipitation**References:**

1. Kina, T, Ikuta, K, Takayama, E, Wada, K., Majumdar, A. S., Weissman, I. L. and Katsura, Y. (2000) British Journal of Haematology 109, 280-287.
2. Ikuta, K., Kina, T., MacNeil, I., Uchida, N., Peault, B., Chien, Y. and Weissman, I. L. (1990) Cell, Vol. 62, 863-874.
3. Randall, T. D. and Weissman, I. L. (1998) Stem Cells 16, 38-48.
4. Suwabe, N., Takahashi, S., Nakano, T. and Yamamoto, M. (1998) Blood, Vol 92, No 11, 4108-4118.
5. Mukoyama, Y., Chiba, N., Mucenski, M. L. Satake, M., Miyajima, A., Hara, T. and Watanabe, T. (1999) Current Biology 9, 833-836.
6. Yanai, N., Matsui, N., Matsuda, K.-I., Furusawa, T., Okubo, T., Nakazawa, T., Ishibashi, K., Nawa, K. and Obinata, M. (1999) Experimental Hematology 27, 1087-1096.

Warning:

Sodium azide is harmful if swallowed (R22). Keep out of reach of children (S2). Keep away from food, drink and animal feeding stuff (S13). Wear suitable protective clothing (S36). If swallowed, seek medical advice immediately and show this container or label (S46). Contact with acids liberates very toxic gas (R32). Azide compounds should be flushed with large volumes of water during disposal to avoid deposits in lead or copper plumbing where explosive conditions can develop.

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