





CD34 (Hematopoietic Stem Cell & Endothelial Marker); Clone HPCA1/763 (Concentrate)

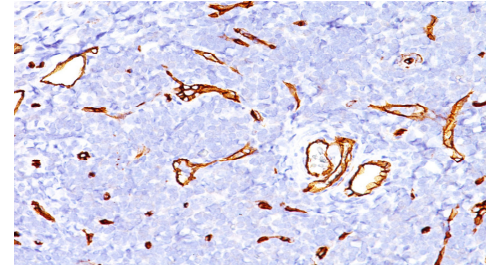
Availability/Contents:	<u>Item #</u>	<u>Volume</u>
	RA0053-C.5	0.5 ml
Description:		
Species:	Mouse	
Immunogen:	Recombinant human HPCA1 protein	
Clone:	HPCA1/763	
Isotype:	IgG1, kappa	
Entrez Gene ID:	947 (Human)	
Hu Chromosome Loc.:	1q32.2	
Synonyms:	Hematopoietic Progenitor Cell Antigen, HPCA1, Mucosialin	
Mol. Weight of Antigen:	90-110kDa	
Format:	200µg/ml of Ab purified from Bioreactor Concentrate by Protein A/G. Prepared in 10mM PBS with 0.05% BSA & 0.05% azide.	
Specificity:	This MAb recognizes a single chain, transmembrane, heavily glycosylated protein of 90-120kDa, which is identified as CD34. Anti-CD34 labels > 85% of angiosarcoma and Kaposi's sarcoma, but with a lower specificity.	
Background:	CD34 expression is a hallmark for identifying pluripotent hematopoietic stem or progenitor cells. Its expression is gradually lost as lineage committed progenitors differentiate. CD34 is a marker of choice for staining blasts in acute myeloid leukemia. In addition, CD34 is expressed by soft tissue tumors, such as solitary fibrous tumor and gastrointestinal stromal tumor. Its expression is also found in vascular endothelium. Additionally, it appears that proliferating endothelial cells express this molecule more than the non-proliferating endothelial cells.	
Species Reactivity:	Human. Others not known.	
Positive Control:	KG-1 cells, Tonsil, or Angiosarcoma.	
Cellular Localization:	Cell surface	
Titer/ Working Dilution:	Immunohistochemistry (Frozen and Formalin-fixed): 0.5-1 µg/ml	
	Flow Cytometry:	0.5-1 µg/million cells
	Immunofluorescence:	0.5-1 µg/ml
	Western Blotting:	0.25-0.5 µg/ml
	Immunoprecipitation:	0.5-1 µg/500µg protein lysate
Microbiological State:	This product is not sterile.	

Storage: 2° C  8° 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.



Formalin-paraffin human tonsil (20X) stained with CD34; Clone HPCA1/763.

Ordering Information and Current Pricing at www.scytek.com

Procedure:

1. **Tissue Section Pretreatment (Highly Recommended):** 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. Felshow DM et al. Blood 97:3768-3775 (2001).
2. Sato T et al. Blood 94:2548-2554 (1999).

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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