

Human CD99 Alexa Fluor® 350-conjugated Antibody

Monoclonal Mouse IgG₁ Clone # 1021527 Catalog Number: FAB3968U

100 µg

DESCRIPTION			
Species Reactivity	Human		
Specificity	Detects human CD99 in direct ELISAs.		
Source	Monoclonal Mouse IgG ₁ Clone # 1021527		
Purification	Protein A or G purified from hybridoma culture supernatant		
Immunogen	Mouse myeloma cell line, NS0-derived human CD99 Asp23-Asp122 Accession # P14209		
Conjugate	Alexa Fluor 350 Excitation Wavelength: 346 nm Emission Wavelength: 442 nm		
Formulation	Supplied 0.2 mg/mL in a saline solution containing BSA and Sodium Azide.		
	*Contains <0.1% Sodium Azide, which is not hazardous at this concentration according to GHS classifications. Refer to the Safety Data Sheet (SDS) for additional information and handling instructions.		

APPLICATIONS			
Please Note: Optimal dilutions should be determined by each laboratory for each application. General Protocols are available in the Technical Information section on our website.			
	Recommended Concentration	Sample	
Flow Cytometry	0.25-1 µg/10 ⁶ cells	Human PBMC lymphocytes	

PREPARATION AND STORAGE			
Shipping	The product is shipped with polar packs. Upon receipt, store it immediately at the temperature recommended below.		
Stability & Storage	Protect from light. Do not freeze. • 12 months from date of receipt, 2 to 8 °C as supplied.		

BACKGROUND

CD99 (also named MIC2, E2 and thymic leukemia antigen) is the founding member of the CD99 family of molecules. The CD99 family contains four members; CD99, CD99L2, XG and the pseudogene CD99L1 (1, 2, 3). Native human CD99 is 32 kDa in size and exists as a type I transmembrane glycoprotein. This is referred to as the long, or type I isoform. It is synthesized as a 185 amino acid (aa) precursor that contains a 22 aa signal sequence, a 100 aa extracellular domain (ECD), a 25 aa transmembrane segment, and a 38 aa cytoplasmic region (4). The ECD contains no identifiable motifs, N-linked glycosylation sites, or cysteine residues; it does possess sites for O-linked glycosylation. The cytoplasmic region, albeit short, does have signal transduction capability (5). There are apparently multiple isoforms for human CD99. One shows a 16 aa deletion in the ECD (aa 34 - 49), a second shows a 38 aa deletion in the cytoplasmic region (aa 122 - 159), and a third exhibits a three aa truncation at the C-terminus (6, 7, 8). The best studied isoform shows an Asp-Gly substitution for the C-terminal 27 amino acids. This is referred to as the 28 kDa type II isoform (9). The type I and II isoforms have distinctive signal transduction pathways (FAK-src for type I; PI3K plus src-ERK1/2 for type II), and mediate clearly different biological outcomes (5, 9, 10). The two numbered isoforms may or may not coexist on the same cells. Peripheral T cells have only the long isoform, while double-positive thymocytes express both isotypes. What is unclear is the monomeric vs. dimeric status of CD99. In mouse, CD99 reportedly forms disulfide-linked homodimers (11). In human, however, CD99 is reportedly monomeric if only a type I isoform, and a covalent heterodimer if coexpressing type I and II isoforms (12, 13). Cells known to express CD99 include fibroblasts, neutrophils, T cells, double-positive thymocytes, CD34+ stem cells, monocytes and endothelial cells (2, 12, 14, 15). Homophilic interaction between CD99 on the neutrophil and CD99 on the endothe

References:

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