

DESCRIPTION

Species Reactivity	Human
Specificity	Detects human CXCR7/RDC-1 in flow cytometry of five distinct human CXCR7 transfectants, but not their respective parental lines.
Source	Monoclonal Mouse IgG ₁ Clone # 11G8
Purification	Protein A or G purified from hybridoma culture supernatant
Immunogen	Human CXCR7 encoding plasmid Accession # P25106
Conjugate	Alexa Fluor 488 Excitation Wavelength: 488 nm Emission Wavelength: 515-545 nm
Formulation	Supplied 0.2 mg/mL in a saline solution containing BSA and Sodium Azide. See Certificate of Analysis for details. *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	MCF-7 human breast cancer cell line

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. <ul style="list-style-type: none"> 12 months from date of receipt, 2 to 8 °C as supplied.

BACKGROUND

The G protein-coupled receptor, RDC1, belongs to a subgroup of chemokine receptors and has been designated CXCR7. CXCR7 can bind with high-affinity to CXCL12/SDF-1 and CXCL11/I-TAC. It is also a co-receptor for several HIV and SIV strains. In their N-termini and extracellular loops 1, 2, and 3, human and mouse CXCR7 share 84%, 100%, 96%, and 86% amino acid sequence identity, respectively. Reports of mRNA levels and/or protein expression (as assessed using anti-CXCR7, clone 9C4) (J. Biol. Chem. 2005, **280**(42):35760, J. Immunol. 2006, **176**(4):2197) indicate that CXCR7 occurs on a wide variety of tissues and cells including monocytes, B cells, T cells and mature dendritic cells. In contrast, based on ligand binding analysis and receptor level (as assessed using anti-CXCR7, clone 11G8), surface expression of CXCR7 was reported to be restricted to tumor cells, activated endothelial cells, fetal liver cells, and few other cell types (J. Exp. Med. 2006, **203**(9):2201). The basis of these inconsistent observations is not known but may be attributed to cell context and the use of different antibodies that may recognize different epitopes.

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