

Technical Data Sheet

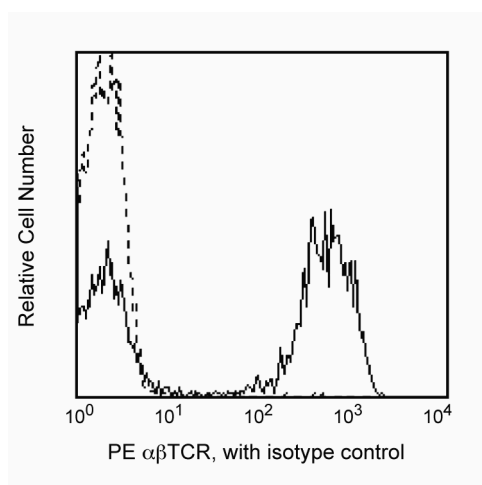
PE Mouse Anti-Human TCR $\alpha\beta$

Product Information

Material Number:	561674
Alternate Name:	$\alpha\beta$ TCR; TCR alpha-beta
Size:	25 Tests
Vol. per Test:	20 μ l
Clone:	T10B9.1A-31 (also known as T10B9)
Immunogen:	Human Peripheral Blood T Cells
Isotype:	Mouse (BALB/c) IgM, κ
Reactivity:	QC Testing: Human
Workshop:	V 5T-TCR.01
Storage Buffer:	Aqueous buffered solution containing BSA, protein stabilizer, and $\leq 0.09\%$ sodium azide.

Description

The T10B9.1A-31 monoclonal antibody specifically binds to a monomorphic determinant on the $\alpha\beta$ T-cell receptor expressed on greater than 95% of normal peripheral blood CD3+ T cells. The $\alpha\beta$ TCR recognizes a peptide bound to MHC leading to T-cell activation. The T10B9.1A-31 antibody induces T-cell activation in the immobilized form and is useful in flow cytometry for studying $\alpha\beta$ + T-cell populations.



Flow cytometric analysis of TCR $\alpha\beta$ expression on human peripheral blood lymphocytes. Whole blood was stained with either PE Mouse Anti-Human TCR $\alpha\beta$ (Cat. No. 561674/555548; solid line histogram) or PE Mouse IgM, κ Isotype Control (Cat. No. 555584; dashed line histogram). Erythrocytes were lysed with BD Pharm Lyse™ Lysing Buffer (Cat. No. 555899). The fluorescence histograms were derived from gated events with the forward and side light-scatter characteristics of viable lymphocytes.

Preparation and Storage

Store undiluted at 4°C.

The monoclonal antibody was purified from tissue culture supernatant or ascites by affinity chromatography.

The antibody was conjugated with R-PE under optimum conditions, and unconjugated antibody and free PE were removed.

Application Notes

Application

Flow cytometry	Routinely Tested
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Suggested Companion Products

Catalog Number	Name	Size	Clone
555584	PE Mouse IgM, κ Isotype Control	100 Tests	G155-228
554656	Stain Buffer (FBS)	500 mL	(none)
555899	Lysing Buffer	100 mL	(none)

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Product Notices

1. This reagent has been pre-diluted for use at the recommended Volume per Test. We typically use 1×10^6 cells in a 100- μ l experimental sample (a test).
2. Please refer to www.bdbiosciences.com/pharming/en/protocols for technical protocols.
3. For fluorochrome spectra and suitable instrument settings, please refer to our Multicolor Flow Cytometry web page at www.bdbiosciences.com/colors.
4. Caution: Sodium azide yields highly toxic hydrazoic acid under acidic conditions. Dilute azide compounds in running water before discarding to avoid accumulation of potentially explosive deposits in plumbing.
5. Source of all serum proteins is from USDA inspected abattoirs located in the United States.
6. An isotype control should be used at the same concentration as the antibody of interest.

References

Brown SA, Lucas BA, Waid TH, McKeown JW, Barve S, Jackson LR, Thompson JS. T10B9 (MEDI-500) mediated immunosuppression: studies on the mechanism of action. *Clin Transplant*. 1996; 10(6 Pt 2):607-613. (Clone-specific: Activation, Functional assay, In vivo exacerbation, Stimulation)

Schlossman SF, Boumsell L, Gilks W, et al, ed. *Leukocyte Typing V: White Cell Differentiation Antigens*. Oxford: Oxford University Press; 1995. (Clone-specific)

Waid TH, Lucas BA, Amlot P, Janossy G, Yacoub M, Cammisuli S, Jezek D, Rhoades J, Brown S, Thompson JS. T10B9.1A-31 anti-T-cell monoclonal antibody: preclinical studies and clinical treatment of solid organ allograft rejection. *Am J Kidney Dis*. 1989; 14(5 Sup 2):61-70. (Clone-specific: Cytotoxicity, Depletion, Functional assay, Immunoprecipitation, Inhibition, In vivo exacerbation)

Waid TH, Lucas BA, Thompson JS, McKeown JW, Brown S, Kryscio R, Skeeters LJ. Treatment of renal allograft rejection with T10B9.1A31 or OKT3: final analysis of a phase II clinical trial. *Transplantation*. 1997; 64(2):274-281. (Clone-specific: Depletion, In vivo exacerbation)

Waid TH, Thompson JS, Siemionow M, Brown SA. T10B9 monoclonal antibody: a short-acting nonstimulating monoclonal antibody that spares gammadelta T-cells and treats and prevents cellular rejection. *Drug Des Devel Ther*. 2009; 3:205-212. (Immunogen: Depletion)

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