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Product Information

Monoclonal Anti-Follicular Dendritic Cells (FDC)

Clone CNA.42

tissue culture supernatant

Catalog Number **F3803**

Product Description

Monoclonal Anti-Follicular Dendritic Cells (FDC) (mouse IgM isotype) is derived from the CNA.42 hybridoma produced by the fusion of mouse myeloma cells and splenocytes from a mouse immunized with the CEM T cell line.¹

Monoclonal Anti-Follicular Dendritic Cells (FDC) recognizes human FDC by immunohistochemistry on formalin-fixed, paraffin-embedded tissues, acetone-fixed cryostat sections, and fixed cell smears.

Monoclonal Anti-Follicular Dendritic Cells (FDC) recognizes follicular dendritic cells located in germinal center (GC) in tonsil, spleen and Peyer's patch. It may be used to detect the follicular dendritic reticulum cell network in nodular lymphocyte predominant Hodgkin's disease. This antibody is also reactive in follicular dendritic reticulum cell sarcoma, EBV-positive inflammatory pseudotumors, and mast cell infiltrations of the skin.

Follicular dendritic cells are phenotypically distinct cells that are restricted to lymphoid follicles. They are morphologically large cells (often containing multiple nuclei) that exhibit numerous dendritic processes.²⁻⁵ The CNA.42 monoclonal antibody detects a non-lineage-restricted antigen expressed on follicular dendritic cells.

Reagent

Supplied as tissue culture supernatant (culture medium with fetal calf serum), containing 15 mM sodium azide.

Precautions and Disclaimer

This product is for R&D use only, not for drug, household, or other uses. Please consult the Material Safety Data Sheet for information regarding hazards and safe handling practices.

Storage/Stability

Store at 2-8 °C. Working dilution samples should be discarded if not used within 12 hours.

Product Profile

Immunohistology: a working dilution of 1:25-1:50 is recommended using formalin-fixed, paraffin-embedded human tonsil sections and anti-mouse IgM-biotin and streptavidin-peroxidase. Formalin-fixed, paraffin-embedded tissue requires an antigen retrieval step, such as heating in 10 mM citrate buffer, pH 6.0. Slides should not be allowed to dry out at anytime during the procedure.

Immunocytochemistry: a working dilution of 1:25-1:50 is determined using acetone-fixed cryostat sections of human tonsil.

Note: In order to obtain the best results in various techniques and preparations, we recommend determining optimal working concentration by titration.

References

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