



MOUSE ANTI-CYTOMEGALOVIRUS ALEXA FLUOR® 488 CONJUGATED MONOCLONAL ANTIBODY

CATALOG NUMBER: MAB810X

LOT NUMBER:

QUANTITY: 100 µg

CONCENTRATION: 1.0 mg/mL

ALTERNATE NAMES: CMV

CLONE NAME: 8B1.2

HOST/ISOTYPE: Mouse/ IgG_{2a}

BACKGROUND: Human cytomegalovirus (HCMV) is a ubiquitous human pathogen that belongs to the herpes adenovirus family. The viral life cycle takes approximately seventy two hours. After the initial fusion of the viral envelope with the plasma membrane of the cell, the encapsidated virus particle is released into the cytoplasm and within minutes, transits to the nucleus. Via active transport through the nuclear pore, the capsid gains entry and viral DNA is deposited. Viral gene expression then occurs in a temporally regulated manner, first with expression of the immediate early genes, followed by the early genes, then, after viral replication has commenced, the late genes. All of the immediate early proteins have been shown to be transactivators, with IE1-72 and IE2-86 being the most well characterized. These genes regulate the expression of factors required for virus replication.

IMMUNOGEN: Affinity purified immediate early antigen from MRC-5 cells infected with CMV AD169 (ATCC).

SPECIFICITY: Reacts with an immediate early non-structural antigen of 68-72 kDa. This antigen can be detected 1 hour after infection exhibiting an intranuclear staining pattern. This staining reaches a peak at 10-12 hours. This antigen persists and can be detected throughout the complete CMV infection cycle.

APPLICATIONS: Immunofluorescence
Optimal working dilutions must be determined by end user.

SPECIES REACTIVITY: Reacts with human CMV. Reactivity with other species has not been confirmed.

FORMAT: Purified Alexa 488 conjugated immunoglobulin

PRESENTATION: Liquid in 0.02M PB with 0.25M NaCl, pH 7.6. Contains 0.1% sodium azide.

STORAGE/HANDLING: Store at 2° to 8°C.

Important Note: *During shipment, small volumes of product will occasionally become entrapped in the seal of the product vial. For products with volumes of 200 µL or less, we recommend gently tapping the vial on a hard surface or briefly centrifuging the vial in a tabletop centrifuge to dislodge any liquid in the container's cap.*

**FOR RESEARCH USE ONLY; NOT FOR USE IN DIAGNOSTIC
PROCEDURES. NOT FOR HUMAN OR ANIMAL CONSUMPTION**

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