

Mouse Anti-IgM [DA4-4]: MC0815, MC0815RTU7

Intended Use: For Research Use Only

Description: Anti-IgM antibody reacts with surface immunoglobulin IgM mu chains. IgM is one of the predominant surface immunoglobulins on B-lymphocytes. This antibody is useful when identifying lymphomas, plasmacytomas, and B-cell lineage derived Hodgkin's lymphomas. Due to the restricted expression of heavy and light chains in these diseases, demonstration of B-cell lymphomas is possible with clonal gene rearrangement studies.

Specifications:

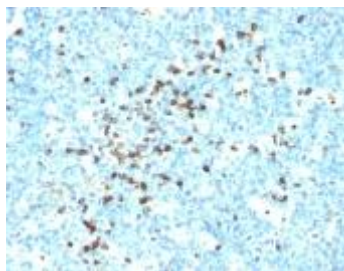
Clone: DA4-4
Source: Mouse
Isotype: IgG1k
Reactivity: Human
Localization: Cytoplasm, membrane, secreted
Formulation: Antibody in PBS pH7.4, containing BSA and $\leq 0.09\%$ sodium azide (NaN₃)
Storage: Store at 2°- 8°C
Applications: IHC, Flow Cyt., ICC/IF
Package:

Description	Catalog No.	Size
IgM Concentrated	MC0815	1 ml
IgM Prediluted	MC0815RTU7	7 ml

IHC Procedure*:

Positive Control Tissue: Tonsil, spleen, 293T, Raji or hPBL cells
Concentrated Dilution: 50-200
Pretreatment: Tris pH9.0 or EDTA pH8.0, 15 minutes using Pressure Cooker, or 30-60 minutes using water bath at 95°-99°C
Incubation Time and Temp: 30-60 min @ RT
Detection: Refer to the detection system manual

* Result should be confirmed by an established diagnostic procedure.



FFPE human tonsil stained with anti-IgM using DAB

References:

1. Molecular mechanisms that control expression of the B lymphocyte antigen receptor complex. Grupp SA, et al. J Exp Med 181:161-8, 1995).
2. Structure and function of the B-cell antigen receptor. DeFranco AL, et al. Chem Immunol 59:156-72, 1994.
3. Characterization of two monoclonal antibodies (UCL4D12 and UCL3D3) that discriminate between human mantle zone and marginal zone B cells. Smith-Ravin J, et al. Clin Exp Immunol 82:181-7, 1990.
4. Activation of human B cells and inhibition of their terminal differentiation by monoclonal anti-mu antibodies. Maruyama S, et. al. Journal of Immunology 1985; 135(1):192-9.
5. Human B cell activation. Evidence for diverse signals provided by various monoclonal anti-IgM antibodies. Rudich SM, et. al. Journal of Experimental Medicine, 1985; 162(4):1236-55.

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Rev. A