Anti-CD11c, mouse monoclonal (BS116)

BSH-2016-100 (0.1 ml), BSH-2016-1 (1 ml)

Clonality:	Mouse monoclonal antibody
Clone:	BS116
Application:	IHC
Species Reactivity:	Human
Control tissues:	Appendix, tonsil
Alias names:	Integrin alpha X, ITGAX
Buffer:	TRIS with 0.03% sodium azide, pH 7.2
Storage:	Store at 4°C

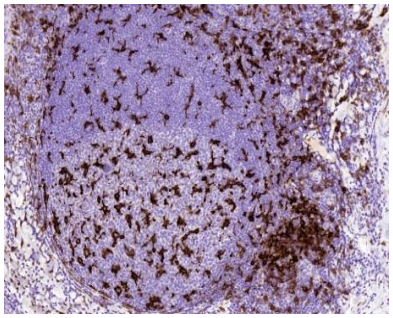
Description

CD11c is cell surface transmembrane receptor which is mostly expressed on granulocytes, macrophages, monocytes, NK-cells, and some of T- and B-lymphocytes. CD11c is useful especially for diagnosis of hairy cell leukemia (HCL). CD11c can be offer great value for detection panel of HCL with DBA.44, CD103 and other HCL markers.

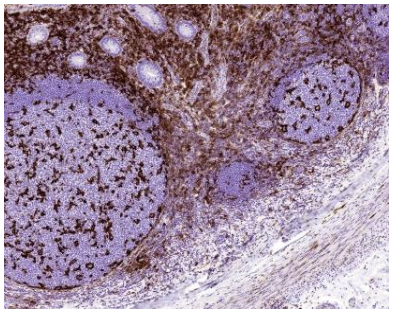
Protocol

1. Deparaffinize and rehydrate tissue section
2. Wash: aqua dest, 2×5 min
3. Pre-treatment: PT-module HIER pH 9.0 (20min at 98°C)
4. H_2O_2 (concentration 3%), 10 min
5. Wash: PBS or TBS buffer, 2×5 min
6. Primary antibody diluted as recommended, 30 min
7. Wash: PBS or TBS buffer, 2×5 min
8. One step HRP-polymer detection, 30 min
9. Wash: PBS or TBS buffer, 2×5 min
10. DAB Substrate, 8 min
11. Wash: aqua dest, 2×2 min
12. Counterstain, dehydrate and coverslip

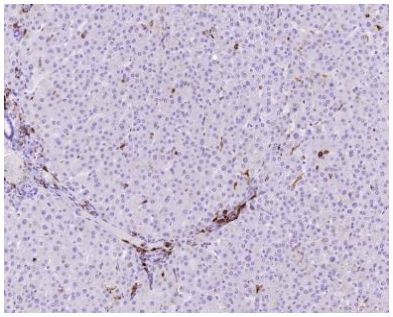
Dilution of concentrated antibody depends on the pre-treatment method and detection system used. Above protocol used in Optibodies evaluation and is meant as a reference. Final working dilution and protocol applied needs to be determined by the user always.



a)



b)



c)

CD11c stained tissue sections. Tonsil (a), appendix (b) and liver sections (c) have been stained using CD11c optibody (Clone: BS116) with 1:200 dilution. Especially macrophages have strong membranous label in tonsil (a) as well as in appendix (b). Follicular dendritic cells have also strong label (a,b). Kupfer cells of liver have moderate membranous staining reaction (c).