abcam

ab283576

Anti-IL-2 Receptor alpha antibody [YTH906.9HL]

Recombinant

Key facts

Isotype	IgG2b
Host species	Mouse
Storage buffer	pH: 7.2 - 7.4 Preservative: 0.01% Sodium azide Constituents: PBS, 40% Glycerol (glycerin, glycerine), 0.05% BSA
Form	Liquid
Clonality	Monoclonal
Clone number	YTH906.9HL
Purification technique	Affinity purification Protein A
Concentration	0.886 mg/mL The concentration of this product may be batch-dependent Batch concentration finder →

Reactivity data

Flow Cyt

Tested

Species	Human
Dilution info	1/1000
Notes	-

Not recommended

Species	Mouse
Dilution info	-
Notes	-

Target data

See full target information IL2RA

Function	Receptor for interleukin-2. The receptor is involved in the regulation of immune tolerance by controlling regulatory T cells (TREGs) activity. TREGs suppress the activation and expansion of autoreactive T-cells.

Storage

Shipped at conditions	Blue Ice
Appropriate short-term storage duration	1-2 weeks
Appropriate short-term storage conditions	+4°C
Appropriate long-term storage conditions	-20°C
Aliquoting information	Upon delivery aliquot
Storage information	Avoid freeze / thaw cycle

Notes

What are the advantages of a recombinant monoclonal antibody?
This product is a recombinant monoclonal antibody, which offers several advantages including:

- High batch-to-batch consistency and reproducibility
- Improved sensitivity and specificity
- Long-term security of supply
- Animal-free batch production

For more information, read more on recombinant antibodies.

Want a custom formulation?
This antibody clone is manufactured by Abcam. If you require a custom buffer formulation or conjugation for your experiments, please contact orders@abcam.com

Product promise

Tested

We have tested this species and application combination and it works. It is covered by our product promise.

Expected

We have not tested this specific species and application combination in-house, but expect it will work. It is covered by our product promise.

Predicted

This species and application combination has not been tested, but we predict it will work based on strong homology. However, this combination is not covered by our product promise.

Not recommended

We do not recommend this combination. It is not covered by our product promise.

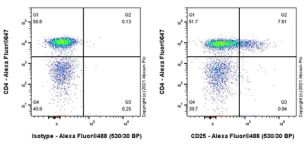
We are dedicated to supporting your work with high quality reagents and we are here for you every step of the way should you need us.

In the unlikely event of one of our products not working as expected, you are covered by our product promise.

Full details and terms and conditions can be found here:
Terms & Conditions.

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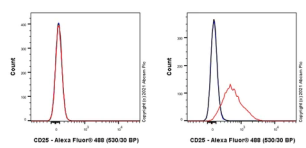
2 product images



Flow Cytometry - Anti-IL-2 Receptor alpha antibody [YTH906.9HL] (ab283576)

IL-2 Receptor alpha Flow Cytometry staining using mouse Anti-IL-2 Receptor alpha antibody

Flow cytometric analysis of Human peripheral blood mononuclear cell (PBMC) cells labelling IL-2 Receptor alpha with ab283576 at 1/1000 dilution (0.1ug) (Right) compared with a Rat monoclonal IgG (Left) isotype control. Goat F(ab)2 Anti-Rat IgG Fc (Alexa Fluor® 488, ab150161) at 1/2000 dilution was used as the secondary antibody. Cells were stained with rat IgG or ab283576. Then stained with anti-CD4 conjugated to Alexa Fluor® 647. Gated on viable lymphocytes.



Flow Cytometry - Anti-IL-2 Receptor alpha antibody [YTH906.9HL] (ab283576)

IL-2 Receptor alpha Flow Cytometry staining using mouse Anti-IL-2 Receptor alpha antibody

Flow cytometric analysis of HeLa (Human cervix adenocarcinoma epithelial cell, Left) / HDLM2 (Human Hodgkin lymphoma, Right) cells labelling IL-2 Receptor alpha with ab283576 at 1/1000 dilution (0.1ug) (Red) compared with a Rat monoclonal IgG (Black) isotype control and an unlabelled control (cells without incubation with primary antibody and secondary antibody)

(Blue). Goat F(ab)2 Anti-Rat IgG Fc (Alexa Fluor® 488, ab150161) at 1/2000 dilution was used as the secondary antibody. **Negative control**: HeLa (PMID:25894527). Gated on viable cells.

Please note: All products are 'FOR RESEARCH USE ONLY. NOT FOR USE IN DIAGNOSTIC OR THERAPEUTIC PROCEDURES'.