



# Anti-Hu CD163 (AKYP0114)-BX069 for PhenoCode Signature

## CATALOG # S6501005

Components				
240182	Anti-Hu CD163 (AKYP0114)-BX069			
PCSD069	HRP-HX069 PhenoCode™ Signature Detector			

# Quantity

Up to 20 Slides

### **Storage & Stability**

Component #	Component Description	Storage Temp	Storage Notes	Stability
240182	Anti-Hu CD163 (AKYP0114)-BX069	4°C	Do Not Freeze	Refer to expiration date on antibody tube
PCSD069	HRP-HX069 PhenoCode Signature Detector	-20°C	Do Not Exceed 5 Freeze-Thaw Cycles	Refer to expiration date on PhenoCode Signature Detector tube

Target & Clone Information						
Alternative Name/s	Scavenger receptor cysteine-rich type 1 protein M130, Hemoglobin scavenger receptor					
Cell Type Expression	Primarily M2 Macrophages, Monocytes					
Expected Localization	Membrane					
Reactivity	Human, Mouse, Rat					
Host Species/Isotype	Rabbit IgG					
Clonality	Monoclonal					

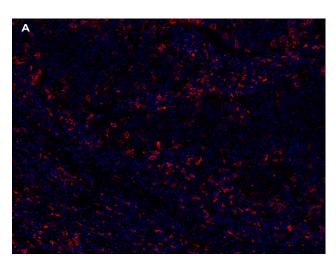
PhenoCode Signature Workflow							
Tissue Type	Sample Types Used for Testing	Recommended Starting Dilution	Opal® Dye				
Human FFPE	Tonsil, Lung Cancer	1:300-1:1200	Opal 620				

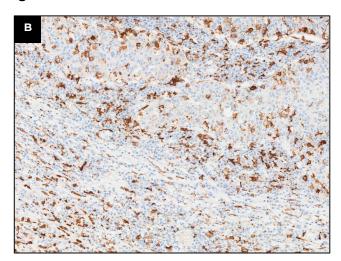
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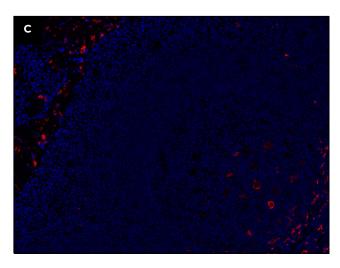
CD163 is a membrane protein primarily expressed on the surface of monocytes and mature macrophages in liver (Kupffer cells), spleen (red pulp macrophages), thymus (cortical macrophages) bone marrow and the CNS. CD163 is a differentiation marker for M2 macrophages, which are associated with anti-inflammatory phenotypes. The following images compare the performance of anti-CD163 as a barcoded primary antibody and as an unconjugated primary antibody. Comparisons are provided in human FFPE lung cancer and human FFPE tonsil tissues.

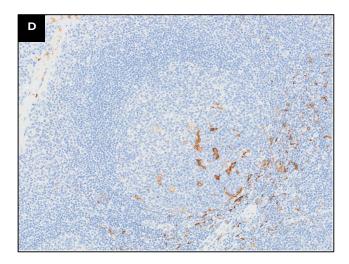
### **Human FFPE Lung Cancer**





#### **Human FFPE Tonsil**





**A.** Barcoded anti-CD163 paired with Opal 620 was used in the PhenoCode Signature M1/M2 Polarization Human Protein Panel on lung cancer tissue. **B.** The image on the right shows human FFPE lung cancer tissue stained with DAB using unconjugated anti-CD163 antibody. Each assay was performed using the same tissue block; sections were chosen to be as close as possible. **C and D.** Identical assays were run on human tonsil tissue and images are displayed in the same manner as sections A and B.

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