

PRODUCT INFORMATION

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| Target | CD142 |
| Description | Monoclonal Cell Line Derived from K562 Cells, Engineered for Stable Expression of Human CD142 Using Lentiviral Technology |
| Host Cells | K562 |
| Uniprot ID | P13726 |
| Applications | FACS Data |
| Growth media | RPMI-1640+10% FBS+1% P.S+1% Gln+2 ug/mL Puromycin |
| Package | 5E6 Cells/mL |
| Suggested Control | SKU: BME100124 |
| Warranty and Disclaimer | 1. Please inspect cells upon receipt and report any issues promptly. 2. We offer one-time replacements for issues reported within a week of receipt. 3. User-induced issues are not eligible for free replacements. 4. We do not accept liability for damages resulting from cell use, storage, or loss. 5. Feedback received more than one month after receipt will not be processed. |
| Storage&Shipping | Cells are shipped using dry ice and require liquid nitrogen storage for long term preservation. |
| Synonyms | TF; Coagulation factor III; F3 |
| Background | This gene encodes coagulation factor III which is a cell surface glycoprotein. This factor enables cells to initiate the blood coagulation cascades; and it functions as the high-affinity receptor for the coagulation factor VII. The resulting complex provides a catalytic event that is responsible for initiation of the coagulation protease cascades by specific limited proteolysis. Unlike the other cofactors of these protease cascades; which circulate as nonfunctional precursors; this factor is a potent initiator that is fully functional when expressed on cell surfaces; for example; on monocytes. There are 3 distinct domains of this factor: extracellular; transmembrane; and cytoplasmic. Platelets and monocytes have been shown to express this coagulation factor under procoagulatory and proinflammatory stimuli; and a major role in HIV-associated coagulopathy has been described. Platelet-dependent monocyte expression of coagulation factor III has been described to be associated with Coronavirus Disease 2019 (COVID-19) severity and mortality. This protein is the only one in the coagulation pathway for which a congenital deficiency has not been described. Alternate splicing results in multiple transcript variants.[provided by RefSeq; Aug 2020] |
| Usage | For research use only. |



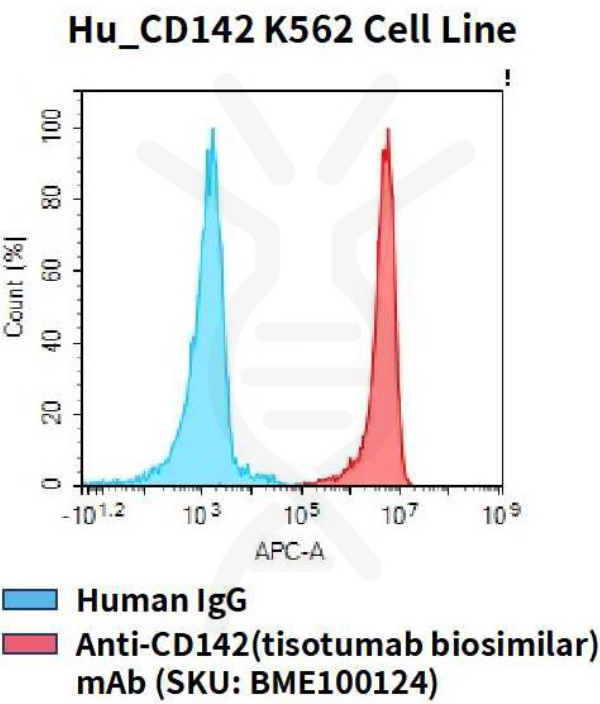


Figure 1. Flow cytometry analysis of human CD142 overexpression using Hu_CD142 K562 Cell Line (Cat. No. CEL100049) and Anti-CD142(tisotumab biosimilar) mAb (Cat. No. BME100124)

