

## **Growth Factor Data Sheet**

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CCL16 is a chemokine containing four conserved cysteine residues, two of which are adjacent. It is expressed at highest levels in liver tissue and monocytes, and at lower levels in spleen, thymus, and some lymphocytes. Expression of CCL16 is induced by IFNG, LPS, and IL10. It is chemotactic for peripheral blood mononuclear cells, induces a change in intracellular calcium levels of monocytes, and inhibits proliferation of myeloid progenitor cells. It is a weak ligand for CCR1, CCR2, CCR5, CCR8, and histamine receptor H4.

Catalog Number Product Name	2140-16 CCL16, Human Recombinant Human Chemokine (C-C motif) Ligand 16 (CCL16) Hemofiltrate CC Chemokine 4 (HCC4, HCC-4) Small Inducible Cytokine Subfamily A Member 16 (SCYA16)
	New CC Chemokine 4 (NCC4, NCC-4) Liver-Expressed Chemokine (LEC) Lymphocyte and Monocyte Chemoattractant (LMC) Monotactin 1 (MTN1, MTN-1)
Source	Escherichia coli
MW	~11.2 kDa (97 amino acids)
Sequence	QPKVPEWVNT PSTCCLKYYE KVLPRRLVVG YRKALNCHLP AIIFVTKRNR EVCTNPNDDW VQEYIKDPNL PLLPTRNLST VKIITAKNGQ PQLLNSQ
Accession Number	<u>015467</u>
Purity	>97% by SDS-PAGE and HPLC analyses
Biological Activity	Fully biologically active when compared to standard. The biological activity determined by a chemotaxis bioassay using human monocytes is in a concentration range of 10-100 ng/ml.
Formulation	Sterile filtered white lyophilized powder. Purified and tested for use in cell culture.
Storage/Handling	This lyophilized preparation is stable at 2-8°C, but should be kept at -20°C for long term storage. The reconstituted sample can be apportioned into working aliquots and stored at -80 °C for up to 6 months. Avoid repeated freeze/thaw cycles.
Reconstitution	The sample should be briefly centrifuged prior to opening to bring the contents to the bottom. Reconstitute in a siliconized tube using PBS that contains a 0.1% BSA to a concentration of 0.1-1.0 mg/mL. Reconstituted solutions are stable for up to one week at 2-8°C. Stock solutions should be aliquoted and stored at -80°C. Further dilutions should be made in appropriate buffered solutions containing BSA or serum.

GoldBio · FM-000019/ 2140-16 DES Version 1 Page 1 of 1 DES Date: 12/13/2019