

Human Recombinant Lag3 Stable Cell Line
Cat. No. M00532**Version 04282015**

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I. INTRODUCTION

Catalog Number: M00532

Cell Line Name: CHO-K1/Lag3

Gene Synonyms: CD223

Expressed Gene: Codon Optimized from NM_002286.5; no expressed tags

Host Cell: CHO-K1

Quantity: Two vials of frozen cells (1×10^6 per vial)

Stability: 15 passages

Application: Binding assay or use as immunogen

Freeze Medium: 95% complete growth medium, 5% DMSO

Complete Growth Medium: F12K, 10% FBS

Culture Medium: F12K, 10% FBS, 8 μ g/ml Puromycin

Mycoplasma Status: Negative

Storage: Liquid nitrogen immediately upon receipt

II. BACKGROUND

Lymphocyte-activation gene 3, also known as LAG-3, is a protein which in humans is encoded by the LAG3 gene.[1] LAG3, which was discovered in 1990[2] and was designated CD223 (cluster of differentiation 223) after the Seventh Human Leucocyte Differentiation Antigen Workshop in 2000[3]. LAG-3 is a cell surface molecule with diverse biologic effects on T cell function. It is an immune checkpoint receptor and as such is the target of various drug development programs by pharmaceutical companies seeking to develop new treatments for cancer and autoimmune disorders.

§: GenScript employs a PCR-based method to test the mycoplasma. The test covers 11 of the most common strains of mycoplasma, (covering approximately 95% of *M. fermentans*, *M. hyorhinis*, *M. arginini*, *M. orale*, *M. salivarium*, *M. hominis*, *M. pulmonis*, *M. arthritidis*, *M. neurolyticum*, *M. hyopneumoniae* and *M. capricolum*) and one species *Ureaplasma* (*U. urealyticum*), with sufficient sensitivity and specificity.

III. REPRESENTATIVE DATA

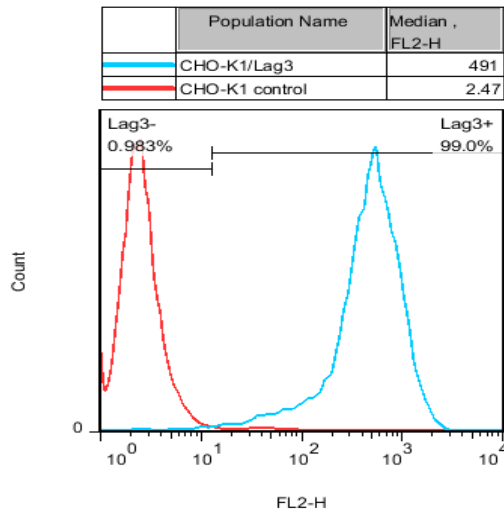


Figure 1. FACS analysis of Lag3 expression in CHO-K1/Lag3 cells.

IV. THAWING AND SUBCULTURING

Thawing Protocol

1. Remove the vial from liquid nitrogen tank and thaw cells quickly in a 37°C water-bath.
2. Just before the cells are completely thawed, decontaminate the outside of the vial with 70% ethanol and transfer the cells to a 15 ml centrifuge tube containing 9 ml of complete growth medium.
3. Pellet cells by centrifugation at 200 x g for 5 min, and remove the medium.
4. Resuspend the cells in complete growth medium.
5. Transfer the cell suspension to a 10 cm dish with 10 ml of complete growth medium.
6. Grow the cells in incubator with 37°C, 5 %CO₂.
7. Add antibiotic the following day.

Sub-culturing Protocol

1. Remove the culture medium from cells.
2. Wash cells with PBS (pH 7.4) to remove all traces of serum that contains trypsin inhibitor.
3. Add 2.0 ml of 0.05% (w/v) Trypsin- EDTA (GIBCO, Cat No. 25300) solution into 10 cm dish and observe the cells under an inverted microscope until cell layer is dispersed (usually within 3 to 5 minutes).
 Note: To avoid cells clumping, do not agitate the cells by hitting or shaking the dish while waiting for the cells detach. If cells are difficult to detach, please place the dish in 37°C incubator for ~2 min.
4. Add 6.0 to 8.0 ml of complete growth medium into dish and aspirate cells by gently pipetting.

5. Centrifuge the cells at 200 x g for 5min, and remove the medium.
6. Resuspend the cells in culture medium and add the cells suspension to new culture dish.
7. Grow the cells in incubator with 37°C, 5 %CO₂.

Subcultivation Ratio: 1:3 to 1:8 weekly.

Medium Renewal: Every 2 to 3 days

* GenScript uses a PCR-based method to test the mycoplasma. Our PCR mycoplasma test covers 11 of the most common species of mycoplasma (*M. fermentans*, *M. hyorhinitis*, *M. arginini*, *M. orale*, *M. salivarium*, *M. hominis*, *M. pulmonis*, *M. arthritidis*, *M. neurolyticum*, *M. hyopneumoniae*, *M. capricolum*) and one species of *Ureaplasma* (*U. urealyticum*), with sufficient sensitivity and specificity.

V. REFERENCES

1. Mahoney KM1, Rennert PD2, Freeman GJ3. Combination cancer immunotherapy and new immunomodulatory targets. *Nat Rev Drug Discov.* 2015 Jul 31;14(8):561-84.
2. Triebel F, Jitsukawa S, Baixeras E, Roman-Roman S, Genevee C, Viegas-Pequignot E, Hercend T (May 1990). "LAG-3, a novel lymphocyte activation gene closely related to CD4". *The Journal of Experimental Medicine* 171 (5): 1393–405.

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