



## Source

Anti-SARS-CoV-2 Spike Antibody, Mouse IgG1 (2C9C9) (XBB.1.5/Omicron Specific) is isolated from a Spike protein infected Mouse and is recombinantly produced from Hybridoma

## Clone

2C9C9

## Species

Mouse

## Isotype

Mouse IgG1 | Mouse Kappa

## Conjugate

Unconjugated

## Antibody Type

Hybridoma Monoclonal

## Reactivity

Virus

## Immunogen

Recombinant SARS-CoV-2 Spike Trimer Protein (XBB.1.5/Omicron) derived from human 293 cells.

## Specificity

This product is a specific antibody specifically reacts with SARS-CoV-2 Spike Trimer Protein, His Tag (XBB/Omicron) (MALS verified) (Cat. No. SPN-C5248), SARS-CoV-2 Spike Trimer Protein, His Tag (XBB.1/Omicron) (MALS verified) (Cat. No. SPN-C522t) and SARS-CoV-2 Spike Trimer Protein, His Tag (XBB.1.5/Omicron) (MALS verified) (Cat. No. SPN-C524i). No cross-reactivity is detected with Protein of WT (Cat. No. SPN-C52H9), Alpha (Cat. No. SPN-C52H6), Beta, Gamma (Cat. No. SPN-C52Hg), Delta (Cat. No. SPN-C52He), B.1.1.529/Omicron (Cat. No. SPN-C52Hz), BA.2/Omicron (Cat. No. SPN-C5223), BA.3/Omicron (Cat. No. SPN-C5225), BA.4/Omicron (Cat. No. SPN-C5229), BA.5/Omicron (Cat. No. SPN-C522e), BA.2.12.1/Omicron (Cat. No. SPN-C522d), BQ.1.1/Omicron (Cat. No. SPN-C522s), BA.2.75/Omicron (Cat. No. SPN-C522f), BA.4.6/Omicron (Cat. No. SPN-C522m), BF.7/Omicron (Cat. No. SPN-C522q).

## Application

Application

Recommended Usage

## Purity

>95% as determined by SDS-PAGE.

## Purification

Protein A purified/ Protein G purified

## Formulation

Lyophilized from 0.22  $\mu$ m filtered solution in PBS, pH7.4 with trehalose as protectant.

Contact us for customized product form or formulation.

## Reconstitution

Please see Certificate of Analysis for specific instructions.

*For best performance, we strongly recommend you to follow the reconstitution protocol provided in the CoA.*

## Storage

For long term storage, the product should be stored at lyophilized state at  $-20^{\circ}\text{C}$  or lower.

*Please avoid repeated freeze-thaw cycles.*

This product is stable after storage at:

- $-20^{\circ}\text{C}$  to  $-70^{\circ}\text{C}$  for 12 months in lyophilized state;
- $-70^{\circ}\text{C}$  for 3 months under sterile conditions after reconstitution.

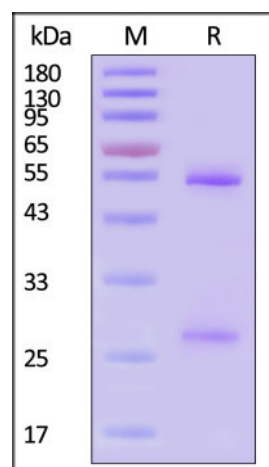
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and more!





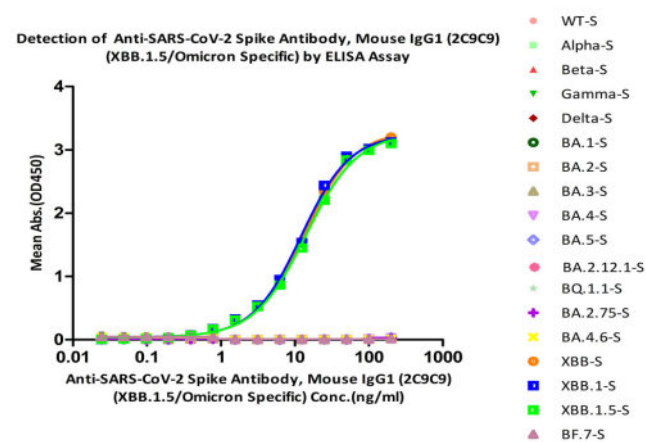
Application	Recommended Usage
ELISA	0.8-200 ng/mL

## SDS-PAGE



Anti-SARS-CoV-2 Spike Antibody, Mouse IgG1 (2C9C9) (XBB.1.5/Omicron Specific) on SDS-PAGE under reducing (R) condition. The gel was stained with Coomassie Blue. The purity of the protein is greater than 95% (With [Star Ribbon Pre-stained Protein Marker](#)).

## Bioactivity-ELISA



Immobilized SARS-CoV-2 Spike Trimer Protein, His Tag (XBB/Omicron) (MALS verified) (Cat. No. SPN-C5248), SARS-CoV-2 Spike Trimer Protein, His Tag (XBB.1/Omicron) (MALS verified) (Cat. No. SPN-C522t) and SARS-CoV-2 Spike Trimer Protein, His Tag (XBB.1.5/Omicron) (MALS verified) (Cat. No. SPN-C524i) can bind Anti-SARS-CoV-2 Spike Antibody, Mouse IgG1 (2C9C9) (XBB.1.5/Omicron Specific) (Cat. No. SPN-Y169) with a linear range of 0.391-25 ng/mL (QC tested). The antibody does not bind Spike Protein of WT (Cat. No. SPN-C52H9), Alpha (Cat. No. SPN-C52H6), Beta, Gamma (Cat. No. SPN-C52Hg), Delta (Cat. No. SPN-C52He), B.1.1.529/Omicron (Cat. No. SPN-C52Hz), BA.2/Omicron (Cat. No. SPN-C5223), BA.3/Omicron (Cat. No. SPN-C5225), BA.4/Omicron (Cat. No. SPN-C5229), BA.5/Omicron (Cat. No. SPN-C522e), BA.2.12.1/Omicron (Cat. No. SPN-C522d), BQ.1.1/Omicron (Cat. No. SPN-C522s), BA.2.75/Omicron (Cat. No. SPN-C522f), BA.4.6/Omicron (Cat. No. SPN-C522m), BF.7/Omicron (Cat. No. SPN-C522q) (QC tested).

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## Background

It's been reported that SARS-CoV-2 can infect the human respiratory epithelial cells through interaction with the human ACE2 receptor. The spike protein is a large type I transmembrane protein containing two subunits, S1 and S2. S1 mainly contains a receptor binding domain (RBD), which is responsible for recognizing the cell surface receptor. S2 contains basic elements needed for the membrane fusion. The S protein plays key parts in the induction of neutralizing-antibody and T-cell responses, as well as protective immunity.

## Clinical and Translational Updates

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