



PRODUCT DATA SHEET – ePBMC® Cryopreserved Human Pooled PBMC

Catalog No.:	CTL-PP4
Product name:	ePBMC® Cryopreserved Human PBMC, pooled from 4 donors
Size:	≥10 million cells per vial as ≥2.5 million cells/donor/vial)
Description:	Human PBMC (Peripheral Blood Mononuclear Cells) isolated from leukopacks cryopreserved in CTL-CryoABC™ serum-free freezing medium. The leukopacks were ethically collected from healthy donors with no risk of breaching privacy; tested at collection according to current FDA requirements for allogeneic blood donations. The following screening tests have been performed: RBC Ab screen, CMV Ab (Anti-CMV IgG and IgM), Anti-HBc EIA, HBsAb EIA, Anti-HCV EIA, HIV ½ plus 0, HTLV I/II, STS by serology; as well as HIV I/HCV/HBV, West Nile Virus by NAT and Trypanosoma cruzi Ab.
Performance:	Cell functionality equivalent to fresh cells tested by ELISPOT
Applications:	PBMCs are suited for T cell and B cell monitoring in ELISPOT, ELISA, cytokine bead array, tetramer/ pentamer, and cytokine capture assays or any assay that requires live PBMC
Recommended test concentration:	Investigators are advised to determine optimal concentrations for individual applications. CTL recommends of 100,000 to 800,000 cells / well concentration for ELISPOT
Stability and Storage:	Cryopreserved cells are shipped on LN2 vapors in dry cryoshipper, and should be unpacked immediately upon receipt. Short-term storage of cells at -80°C is acceptable for <24h, but should be minimized to ensure maximum stability. For long-term storage, cryopreserved cells must be stored in liquid nitrogen vapor. Thawed samples must be used immediately and have a finite life span in culture. Avoid repeated freeze-thaw cycles!
Long term storage:	-169°C to -196°C (must be on LN2 vapor)
Thawing:	Thaw protocol included
Usage:	For laboratory research use only! Not for diagnostics, food, or therapeutics use!
Sample Identification and donor data:	PBMC vial contain PBMC pooled from 4 healthy donors

Please see attached Appendix to PDS table for further donor info!

Donor#	X	X	X	X
Sample ID#	X	X	X	X
LP_#	X	X	X	X
Ethnicity	---	---	---	---
Age	---	---	---	---
Gender	---	---	---	---
ABO/Rh	---	---	---	---

RI

CTL Representative

Date

Collection Date				
Freezing date				
Donor#				
Sample ID	HHU18104M4F			
LP#				
Ethnicity	Caucasian	Hispanic	African/American	Caucasian
Age	43	30	30	46
Gender	Male	Male	Female	Female
ABO/Rh	A/Pos	A/Pos	A/Pos	B/Pos
Other Info	NO NSAIDS for 1 week, NO steroids for 1 month	NO NSAIDS for 1 week, NO steroids for 1 month	NO NSAIDS for 1 week, NO steroids for 1 month	NO NSAIDS for 1 week, NO steroids for 1 month

Vial = ≥10million cells (2.5million cells per donor)

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