Recombinant Human TCN2 Protein (His Tag)

Catalog Number: PKSH031521



Note: Centrifuge before opening to ensure complete recovery of vial contents.

Description

Synonyms Transcobalamin-II;D22S676;D22S750;TC-2;TC2;TCII

Species Human

Expression Host

Sequence

Met 1-Trp 427

Accession

NP_000346.2

Calculated Molecular Weight

Observed molecular weight

Tag

CHis

Properties

Purity > 90 % as determined by reducing SDS-PAGE.

Endotoxin < 1.0 EU per µg of the protein as determined by the LAL method.

Storage Generally, lyophilized proteins are stable for up to 12 months when stored at -20 to

-80°C. Reconstituted protein solution can be stored at 4-8°C for 2-7 days. Aliquots

of reconstituted samples are stable at < -20°C for 3 months.

Shipping This product is provided as lyophilized powder which is shipped with ice packs.

Formulation Lyophilized from sterile PBS, pH 7.4

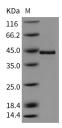
Normally 5 % - 8 % trehalose, mannitol and 0.01% Tween80 are added as

protectants before lyophilization.

Please refer to the specific buffer information in the printed manual.

Reconstitution Please refer to the printed manual for detailed information.

Data



> 90 % as determined by reducing SDS-PAGE.

Background

Transcobalamin II, also known as TCN2 and TC II, is a plasma protein that binds cobalamin (Cbl; vitamin B12) as it is absorbed in the terminal ileum and distributes to tissues. The circulating transcobalamin II-cobalamin complex binds to receptors on the plasma membrane of tissue cells and is then internalized by receptor-mediated endocytosis. Transcobalamin II is a non-glycolated secretory protein of molecular mass 43 kDa. Its plasma membrane receptor (TC II-R) is a heavily glycosylated protein with a monomeric molecular mass of 62 kDa. Human TCN2 gene is composed of nine exons and eight introns spanning approximately 20 kb with multiple potential transcription start sites. A number of genetic abnormalities are characterized either by a failure to express TCN2 or by synthesis of an abnormal protein. The TCN2 deficiency results in cellular cobalamin deficiency, an early onset of megaloblastic anaemia, and neurological

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