BMPR1B Polyclonal Antibody

Catalog Number: E-AB-60551



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

Description

Reactivity Human, Mouse, Rat

Immunogen Recombinant fusion protein of human BMPR1B (NP_001194.1).

Host Rabbit
Isotype IgG

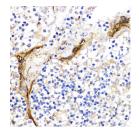
Purification Affinity purification
Conjugation Unconjugated

Formulation PBS with 0.02% sodium azide, 50% glycerol, pH7.3.

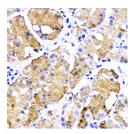
Applications Recommended Dilution

IHC 1:50-1:200 IF 1:50-1:200

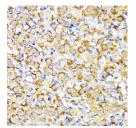
Data



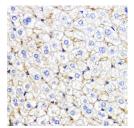
Immunohistochemistry of paraffin-embedded Human tonsil using BMPR1B Polyclonal Antibody at dilution of 1:200 (40x lens).



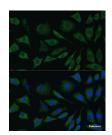
Immunohistochemistry of paraffin-embedded Human gastric cancer using BMPR1B Polyclonal Antibody at dilution of 1:200 (40x lens).



Immunohistochemistry of paraffin-embedded Rat ovary using BMPR1B Polyclonal Antibody at dilution of 1:200 (40x lens).



Immunohistochemistry of paraffin-embedded Mouse liver using BMPR1B Polyclonal Antibody at dilution of 1:200 (40x lens).



Immunofluorescence analysis of L929 cells using BMPR1B Polyclonal Antibody at dilution of 1:100.

For Research Use Only

Toll-free: 1-888-852-8623 Tel: 1-832-243-6086 Fax: 1-832-243-6017

Web: www.elabscience.com
Email: techsupport@elabscience.com

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Blue: DAPI for nuclear staining.

Preparation & Storage

Storage Store at -20°C. Avoid freeze / thaw cycles.

Background

This gene encodes a member of the bone morphogenetic protein (BMP) receptor family of transmembrane serine/threonine kinases. The ligands of this receptor are BMPs, which are members of the TGF-beta superfamily. BMPs are involved in endochondral bone formation and embryogenesis. These proteins transduce their signals through the formation of heteromeric complexes of 2 different types of serine (threonine) kinase receptors: type I receptors of about 50-55 kD and type II receptors of about 70-80 kD. Type II receptors bind ligands in the absence of type I receptors, but they require their respective type I receptors for signaling, whereas type I receptors require their respective type II receptors for ligand binding. Mutations in this gene have been associated with primary pulmonary hypertension. Several transcript variants encoding two different isoforms have been found for this gene.

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