

Troponin I-C (Phospho Ser43) Rabbit pAb

CatalogNo: YP0723

Key Features

Host Species

- Rabbit

Reactivity

- Human, Mouse, Rat

Applications

- WB, IHC, IF, ELISA

MW

- 26kD (Observed)

Isotype

- IgG

Storage

Storage* -15°C to -25°C/1 year (Do not lower than -25°C)

Formulation Liquid in PBS containing 50% glycerol, 0.5% BSA and 0.02% sodium azide.

Recommended Dilution Ratios

WB 1:500-1:2000

IHC 1:100-1:300

ELISA 1:40000

IF 1:50-200

Basic Information

Clonality Polyclonal

Immunogen Information

Immunogen The antiserum was produced against synthesized peptide derived from human TNNI3 around the phosphorylation site of Ser43. AA range:11-60

Specificity Phospho-Troponin I-C (S43) Polyclonal Antibody detects endogenous levels of Troponin I-C protein only when phosphorylated at S43. The name of modified sites may be influenced by many factors, such as species (the modified site was not originally found in human samples) and the change of protein sequence (the previous protein sequence is incomplete, and the protein sequence may be prolonged with the development of protein sequencing technology). When naming, we will use the "numbers" in historical reference to keep the sites consistent with the reports. The antibody binds to the following modification sequence (lowercase letters are modification sites):SAsRK

Target Information

Gene name TNNI3

Protein Name Troponin I cardiac muscle

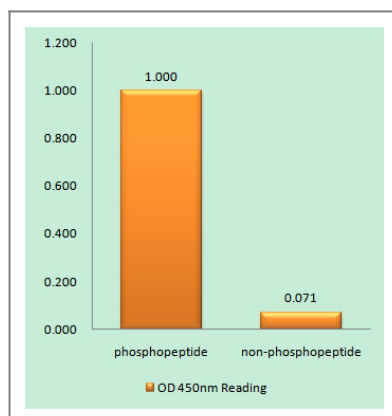
Organism	Gene ID	UniProt ID
Human	7137;	P19429;
Mouse	21954;	P48787;
Rat	29248;	P23693;

Cellular Localization cytosol,troponin complex,sarcomere,

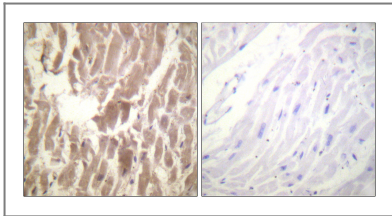
Tissue specificity Heart,Heart muscle,PCR rescued clones,

Function Disease:Defects in TNNI3 are the cause of cardiomyopathy dilated type 2A (CMD2A) [MIM:611880]. Dilated cardiomyopathy is a disorder characterized by ventricular dilation and impaired systolic function, resulting in congestive heart failure and arrhythmia. Patients are at risk of premature death.,Disease:Defects in TNNI3 are the cause of cardiomyopathy familial hypertrophic type 7 (CMH7) [MIM:191044]. Familial hypertrophic cardiomyopathy is a hereditary heart disorder characterized by ventricular hypertrophy, which is usually asymmetric and often involves the interventricular septum. The symptoms include dyspnea, syncope, collapse, palpitations, and chest pain. They can be readily provoked by exercise. The disorder has inter- and intrafamilial variability ranging from benign to malignant forms with high risk of cardiac failure and sudden cardiac death.,Disease:Defects in TNNI3 are the cause of cardiomyopathy familial restrictive type 1 (RCM1) [MIM:115210]. RCM1 is an heart muscle disorder characterized by impaired filling of the ventricles with reduced diastolic volume, in the presence of normal or near normal wall thickness and systolic function.,Function:Troponin I is the inhibitory subunit of troponin, the thin filament regulatory complex which confers calcium-sensitivity to striated muscle actomyosin ATPase activity.,similarity:Belongs to the troponin I family.,subunit:Binds to actin and tropomyosin. Interacts with TRIM63.,

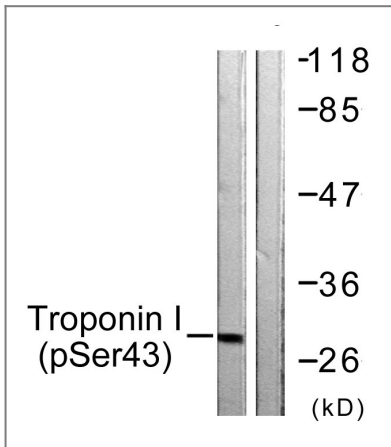
Validation Data



Enzyme-Linked Immunosorbent Assay (Phospho-ELISA) for Immunogen Phosphopeptide (Phospho-left) and Non-Phosphopeptide (Phospho-right), using TNNI3 (Phospho-Ser43) Antibody



Immunohistochemistry analysis of paraffin-embedded human heart, using TNNI3 (Phospho-Ser43) Antibody. The picture on the right is blocked with the phospho peptide.



Western blot analysis of lysates from Jurkat cells, using TNNI3 (Phospho-Ser43) Antibody. The lane on the right is blocked with the phospho peptide.

Contact information

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Please scan the QR code to access additional product information:
**Troponin I-C
(Phospho Ser43)
Rabbit pAb**

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