KIR2.1 Rabbit pAb

CatalogNo: YT2473 Orthogonal Validated

Key Features

Host Species
- Rabbit

Reactivity
- Human,Rat

Applications
- WB,IHC,IF,ELISA

MW
- 48kD (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 1:10000
IF 1:50-200

Basic Information

Clonality	Polyclonal

Immunogen Information

Immunogen	The antiserum was produced against synthesized peptide derived from human KCNJ2. AA range:81-130
Specificity	KIR2.1 Polyclonal Antibody detects endogenous levels of KIR2.1 protein.

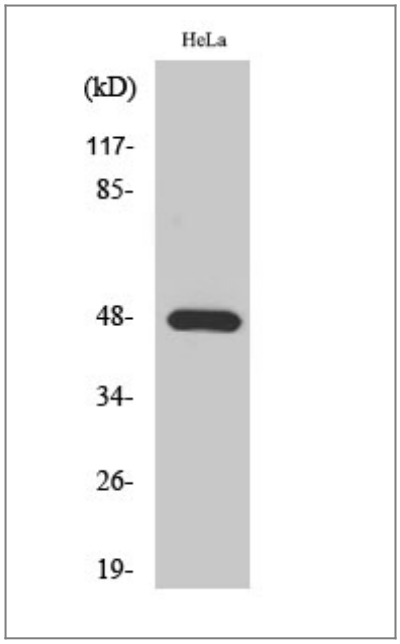
Target Information

Gene name	KCNJ2
Protein Name	Inward rectifier potassium channel 2

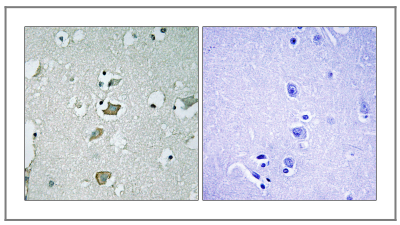
Organism	Gene ID	UniProt ID
Human	3759;	P63252;
Mouse		P35561;
Rat	29712;	Q64273;

Cellular Localization	Membrane; Multi-pass membrane protein. Membrane; Lipid-anchor .
Tissue specificity	Heart, brain, placenta, lung, skeletal muscle, and kidney. Diffusely distributed throughout the brain.
Function	Disease:Defects in KCNJ2 are the cause of long QT syndrome type 7 (LQT7) [MIM:170390]; also called Andersen syndrome or Andersen cardiodysrhythmic periodic paralysis. Long QT syndromes are heart disorders characterized by a prolonged QT interval on the ECG and polymorphic ventricular arrhythmias. They cause syncope and sudden death in response to excercise or emotional stress. LQT7 manifests itself as a clinical triad consisting of potassium-sensitive periodic paralysis, ventricular ectopy and dysmorphic features.,Disease:Defects in KCNJ2 are the cause of short QT syndrome type 3 (SQT3) [MIM:609622]. Short QT syndromes are heart disorders characterized by idiopathic persistently and uniformly short QT interval on ECG in the absence of structural heart disease in affected individuals. They cause syncope and sudden death. SQT3 has a unique ECG phenotype characterized by asymmetrical T waves.,Function:Probably participates in establishing action potential waveform and excitability of neuronal and muscle tissues. Inward rectifier potassium channels are characterized by a greater tendency to allow potassium to flow into the cell rather than out of it. Their voltage dependence is regulated by the concentration of extracellular potassium; as external potassium is raised, the voltage range of the channel opening shifts to more positive voltages. The inward rectification is mainly due to the blockage of outward current by internal magnesium. Can be blocked by extracellular barium or cesium.,similarity:Belongs to the inward rectifier-type potassium channel family.,subunit:Homomultimeric and heteromultimeric association with Kir2.3, resulting in an enhanced G-protein-induced current. Association, via its PDZ-recognition domain, with LIN7A, LIN7B, LIN7C, DLG1, CASK and APBA1 plays a key role in its localization and trafficking.,tissue specificity:Heart, brain, placenta, lung, skeletal muscle, and kidney. Diffusely distributed throughout the brain.,

Validation Data



Western Blot analysis of various cells using KIR2.1 Polyclonal Antibody diluted at 1:500



Immunohistochemistry analysis of paraffin-embedded human brain tissue, using KCNJ2 Antibody. The picture on the right is blocked with the synthesized peptide.

Contact information

Orders:	order@immunoway.com
Support:	tech@immunoway.com
Telephone:	877-594-3616 (Toll Free), 408-747-0185
Website:	http://www.immunoway.com
Address:	2200 Ringwood Ave San Jose, CA 95131 USA

Please scan the QR code to access additional product information:
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