NEUROMICS

Activin RIIA Data Sheet

Catalog Number:	GT15149	**Host:**	Goat
Product Type:	Affinity purified	**Species Reactivity:**	Human
Immunogen Sequence:	Insect cell line *Sf* 21-derived, recombinant human Activin RIIA (rhActivin RIIA) extracellular domain.	**Format:**	Liquid 1mg/ml Solution in phosphate-buffered saline (PBS) with 5% Trehlose
Applications:	Immunohistochemistry : 15 µg/mL. Western Blot: 0.1 - 0.2 µg/mL ELISA: 0.5 - 1.0 µg/mL		
	Dilutions listed as a recommendation. Optimal dilution should be determined by investigator.		
Storage:	Antibody can be aliquotted and stored frozen at -20° C to -70° C in a manual defrost freezer for six months without detectable loss of activity. The antibody can be stored at 2° - 8° C for 1 month without detectable loss of activity. *Avoid repeated freeze-thaw cycles.*		

Application Notes

Specificity

This antibody has been selected for its ability to block receptor-ligand interaction. Based on direct ELISA and western blot results, this antibody shows less than 2% cross-reactivity with rhActivin RIIB.

Direct ELISA

This antibody can be used at 0.5 - 1.0 µg/mL with the appropriate secondary reagents to detect human Activin RIIA. The detection limit for rhActivin RIIA is approximately 0.3 ng/well.

Western blot

This antibody can be used at 0.1 - 0.2 µg/mL with the appropriate secondary reagents to detect human Activin RIIA. The detection limit for rhActivin RIIA is approximately 5 ng/lane and 25 ng/lane under non-reducing and reducing conditions, respectively.

Immunohistochemistry

This antibody can be used with the appropriate secondary reagents to detect human Activin RIIA. Staining may be done on paraffin-embedded human tissues. Working dilution for 5 - 15 µm thick sections is 15 µg/mL. For detection of labeling, the ABC technique using chromogenic substrates (NovaRED, AEC, DAB, etc.) is recommended.1

Note: *Due to autofluorescence of tissues dissected from non-human primates or humans, the use of fluorescent probes such as FITC or Cy3 are not recommended if autofluorescence is not quenched (for example, by treating tissues after finishing IHC staining with 1% Sudan Black in 70% methanol for 10 minutes at room temperature). Residual autofluorescence may obscure specific labeling. Non-fluorescent enzymatic protocols (e.g. DAB, AEC, or immunogold-silver staining) may be used.*

FOR RESEARCH USE ONLY

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