Recombinant Protein Technical Manual

Recombinant Mouse Apolipoprotein A-I/ApoAI Protein (Fc Tag)(Active)

RPES3861

Product Data:

Product SKU: RPES3861

Size: 100µg

Species: Mouse

Expression host: HEK293 Cells

Uniprot: Q00623

Protein Information:

Molecular Mass:	55.8 kDa
AP Molecular Mass:	60 kDa
Tag:	C-Fc
Bio-activity:	1. Measured by its binding ability in a functional ELISA.2. Immobilized mouse ApoAI at 10 µg/mL (100 µl/well) can bind biotinylated human SCARB1, The EC50 of biotinylated human SCARB1 is 0.27 µg/mL.
Purity:	> 90 % as determined by SDS-PAGE
Endotoxin:	< 1.0 EU per µg of the protein as determined by the LAL method.
Storage:	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℃ for 2-7 days. Aliquots of reconstituted samples are stable at < -20℃ 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
Reconstitution:	Please refer to the printed manual for detailed information.
Application:	Functional ELISA
Synonyms:	1-Sep;2-Sep;42248;42249;Alp;apo-AI;Apoa;apoA-I;Brp4;Ltw;Lvtw

Immunogen Information:

Sequence: Met 1-Gln 264

Background:

Apolipoprotein A1 (APOA1) is a member of the apolipoprotein family whose members are proteins bind with lipids and form lipoproteins to translate these oil-soluble lipids such as fat and cholesterol through lymphatic and circulatory system. APOA1 is the main component of high density lipoprotein (HDL) in plasma and is involved in the esterification of cholesterol as a cofactor of lecithin-cholesterol acyltransferase (LCAT) which is responsible for the formation of most plasma cholesteryl esters, and thus play a major role in cholesterol efflux from peripheral cells. As a major component of the HDL complex, APOA1 helps to clear cholesterol from arteries. APOA1 is also characterized as a prostacyclin stabilizing factor, and thus may have an anticlotting effect. Defects in encoding gene may result in HDL deficiencies, including Tangier disease, and with systemic non-neuropathic amyloidosis. Men carrying a mutation may develop premature coronary artery disease.