

CFTR (Cystic Fibrosis Transmembrane Conductance Regulator); Clone CFTR/1643 (Concentrate)

Availability/Contents:	<u>Item #</u>	<u>Volume</u>
	RA0500-C.1	0.1 ml
	RA0500-C.5	0.5 ml
	RA0500-C1	1 ml

Description:

Species:	Mouse
Immunogen:	Recombinant human CFTR fragment (aa258-385) (exact sequence is proprietary).
Clone:	CFTR/1643
Isotype:	IgG2b
Entrez Gene ID:	1080
Hu Chromosome Loc.:	7q31.2
Synonyms:	ABC35; ATP Binding Cassette Superfamily C Member 7 (ABCC7); cAMP-dependent chloride channel; CFTR; CFTR/MRP; Channel conductance-controlling ATPase; Cystic Fibrosis Transmembrane Conductance Regulator; MRP7; TNR CFTR.
Mol. Weight of Antigen:	165-170kDa
Format:	200ug/ml of Ab purified from Bioreactor Concentrate by Protein A/G. Prepared in 10mM PBS with 0.05% BSA & 0.05% azide.
Specificity:	Recognizes a protein of 165-170kDa, identified as cystic fibrosis transmembrane conductance regulator (CFTR).
Background:	CFTR is composed of two membrane-spanning domains (MSD), two nucleotide-binding domains (NBD), and an R domain. It is structurally similar to multidrug resistance (Mdr1) protein and both are members of the superfamily of ATP-binding cassette (ABC) transporters, also known as traffic ATPases, which are implicated in the movement of various substrates. The CFTR protein is a small conductance adenosine 3',5'-cyclic monophosphate (cAMP)-activated chloride ion channel found in the apical membranes of epithelia within the pancreas, airway, intestine, bile duct, sweat gland, and male genital ducts. CFTR is a valuable marker of human pancreatic duct cell development and differentiation.
Species Reactivity:	Reacts with human. Others not known.
Positive Control:	MOLT-4 cells. Pancreas, Kidney or Placenta.
Cellular Localization:	Cell Surface and Cytoplasmic.
Titer/ Working Dilution:	Immunohistochemistry (Frozen and Formalin-fixed): 1-2 µg/ml Immunofluorescence: 0.5-1 µg/ml
Microbiological State:	This product is not sterile.

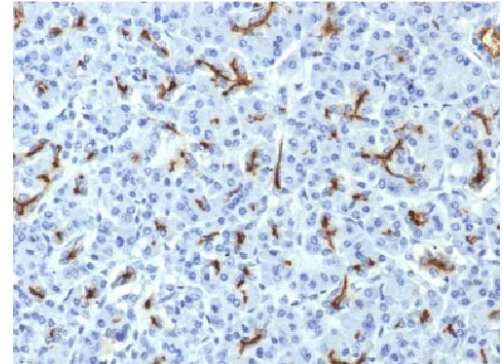
Storage: 2° C  8° C



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Uses/Limitations: Not to be taken internally.
 For Research Use Only.
 This product is intended for qualitative immunohistochemistry with normal and neoplastic formalin-fixed, paraffin-embedded tissue sections, to be viewed by light microscopy.
 Do not use if reagent becomes cloudy.
 Do not use past expiration date.
 Non-Sterile.



Formalin-fixed, paraffin embedded human Pancreas stained with CFTR; Clone CFTR/1643.

Ordering Information and Current Pricing at www.scytek.com

Procedure:

1. **Tissue Section Pretreatment (Recommended):** Staining of formalin fixed, paraffin embedded tissue sections is significantly enhanced by pretreatment with Tris-EDTA HIER Solution (10x) pH 9.0 (ScyTek catalog# TES500).
2. **Primary Antibody Incubation Time:** We suggest an incubation period of 30 minutes at room temperature. However, depending upon the fixation conditions and the staining system employed, optimal incubation should be determined by the user.
3. **Visualization:** For maximum staining intensity we recommend the “CRF Anti-Polyvalent HRP Polymer (DAB) Lab Pack” (ScyTek catalog# CPP125, see IFU for instructions).

Precautions: Contains Sodium Azide as a preservative (0.09% w/v).
 Do not pipette by mouth.
 Avoid contact of reagents and specimens with skin and mucous membranes.
 Avoid microbial contamination of reagents or increased nonspecific staining may occur.
 This product contains no hazardous material at a reportable concentration according to U.S. 29 CFR 1910.1200, OSHA Hazardous Communication Standard and EC Directive 91/155/EC.


References:

1. Riordan, J.R., et al. 1989. Identification of the cystic fibrosis gene: cloning and characterization of complementary DNA. Science 245: 1066-1073.

Warranty:

No products or “Instructions For Use (IFU)” are to be construed as a recommendation for use in violation of any patents. We make no representations, warranties or assurances as to the accuracy or completeness of information provided on our IFU or website. Our warranty is limited to the actual price paid for the product. ScyTek Laboratories, Inc. is not liable for any property damage, personal injury, time or effort or economic loss caused by our products. Immunohistochemistry is a complex technique involving both histological and immunological detection methods. Tissue processing and handling prior to immunostaining can cause inconsistent results. Variations in fixation and embedding or the inherent nature of the tissue specimen may cause variations in results. Endogenous peroxidase activity or pseudoperoxidase activity in erythrocytes and endogenous biotin may cause non-specific staining depending on detection system used.

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