

ARHGDIA Antibody (monoclonal) (M02)

Mouse monoclonal antibody raised against a full length recombinant ARHGDIA. Catalog # AT1182a

Specification

ARHGDIA Antibody (monoclonal) (M02) - Product Information

Application WB, E **Primary Accession** P52565 Other Accession BC016031 Reactivity Human Host mouse Clonality **Monoclonal** Isotype IgG1 Kappa Calculated MW 23207

ARHGDIA Antibody (monoclonal) (M02) - Additional Information

Gene ID 396

Other Names

Rho GDP-dissociation inhibitor 1, Rho GDI 1, Rho-GDI alpha, ARHGDIA, GDIA1

Target/Specificity

ARHGDIA (AAH16031, 1 a.a. \sim 204 a.a) full-length recombinant protein with GST tag. MW of the GST tag alone is 26 KDa.

Dilution

WB~~1:500~1000

E~~N/A

Format

Clear, colorless solution in phosphate buffered saline, pH 7.2.

Storage

Store at -20°C or lower. Aliquot to avoid repeated freezing and thawing.

Precautions

ARHGDIA Antibody (monoclonal) (M02) is for research use only and not for use in diagnostic or therapeutic procedures.

ARHGDIA Antibody (monoclonal) (M02) - Protocols

Provided below are standard protocols that you may find useful for product applications.

- Western Blot
- Blocking Peptides
- Dot Blot

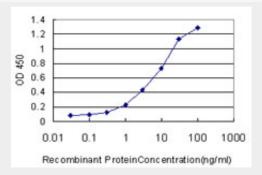


- Immunohistochemistry
- Immunofluorescence
- <u>Immunoprecipitation</u>
- Flow Cytomety
- Cell Culture

ARHGDIA Antibody (monoclonal) (M02) - Images



Antibody Reactive Against Recombinant Protein. Western Blot detection against Immunogen (48.18 KDa).



Detection limit for recombinant GST tagged ARHGDIA is approximately 0.3ng/ml as a capture antibody.

ARHGDIA Antibody (monoclonal) (M02) - Background

Aplysia Ras-related homologs (ARHs), also called Rho genes, belong to the RAS gene superfamily encoding small guanine nucleotide exchange (GTP/GDP) factors. The ARH proteins may be kept in the inactive, GDP-bound state by interaction with GDP dissociation inhibitors, such as ARHGDIA (Leffers et al., 1993 [PubMed 8262133]).

ARHGDIA Antibody (monoclonal) (M02) - References

1.Comparative proteomic analysis on human L-02 liver cells treated with varying concentrations of trichloroethyleneLiu J, Huang H, Xing X, Xi R, Zhuang Z, Yuan J, Yang F, Zhao J.Toxicol Ind Health. 2007 Mar;23(2):91-101.