Recombinant Human Calreticulin-3/CALR3 Protein

Catalog Number: PKSH032151

Note: Centrifuge before opening to ensure complete recovery of vial contents.

| Description | | | |
|----------------|--|--|--|
| Species | Human | | |
| Source | E.coli-derived Human Calreticulin-3; CALR3 protein Thr 20-Leu384 | | |
| Calculated MW | 42.9 kDa | | |
| Observed MW | 40-50 kDa | | |
| Accession | Q96L12 | | |
| Bio-activity | Not validated for activity | | |
| Properties | | | |
| Purity | > 95 % as determined by reducing SDS-PAGE. | | |
| Endotoxin | < 1.0 EU per µg of the protein as determined by the LAL method. | | |
| Storage | Generally, 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°C for 2-7 days. Aliquots of | | |
| | reconstituted samples are stable at $< -20^{\circ}$ C for 3 months. | | |
| Shipping | This product is provided as lyophilized powder which is shipped with ice packs. | | |
| Formulation | Lyophilized from a 0.2 µm filtered solution of 20mM Tris-HCl, 150mM NaCl, 5% | | |
| | Trehalose, 5% Mannitol, 0.02% Tween 80, 1mM EDTA, pH8.0. | | |
| | Normally 5% - 8% trehalose, mannitol and 0.01% Tween 80 are added as protectants | | |
| | before lyophilization. | | |
| | Please refer to the specific buffer information in the printed manual. | | |
| Reconstitution | Please refer to the printed manual for detailed information. | | |

Data

| kDa | MK | R |
|-----------------|-------|-----------|
| 120 90 60 | Elabo | abscience |
| 40 | | |
| 30 | | cience |
| 30 20 | | Elabsu |
| 14 🕬 | | |

> 95 % as determined by reducing SDS-PAGE.

Background

Calreticulin-3 belongs to the calreticulin family, members of which are calcium binding chaperones localized mainly in the endoplasmic reticulum. It can be divided into a N-terminal globular domain, a proline-rich P-domain forming an elongated arm-like structure and a C-terminal acidic domain. During spermatogenesis process, Calreticulin-3 may act as a lectin-independent chaperone for specific client proteins such as ADAM3. Defects in CALR3 are the cause of familial hypertrophic cardiomyopathy type 19 (CMH19), it is a hereditary heart disorder characterized by ventricular hypertroph y, which is usually asymmetric and often involves the interventricular septum. The symptoms include dyspnea, syncope, collapse, palpitations, and chest pain.

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