

Recombinant Human KIM-1(C-6His)

Catalog Number: PKSH033813

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

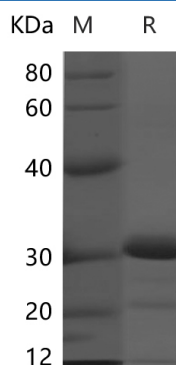
Description

| | |
|----------------------|---|
| Species | Human |
| Source | HEK293 Cells-derived Human KIM-1 protein Ser21-Gly290, with an C-terminal His |
| Calculated MW | 29.8 kDa |
| Observed MW | 80-120 kDa |
| Accession | F1CME6 |
| Bio-activity | Not validated for activity |

Properties

| | |
|----------------------|---|
| Purity | > 90 % as determined by reducing SDS-PAGE. |
| Concentration | Subject to label value. |
| Endotoxin | Please contact us for more information. |
| Storage | Store at < -20°C, stable for 6 months. Please minimize freeze-thaw cycles. |
| Shipping | This product is provided as liquid. It is shipped at frozen temperature with blue ice/ gel packs. Upon receipt, store it immediately at < - 20°C. |
| Formulation | Supplied as a 0.2 µM filtered solution of PBS,pH7.4,5% Trehalose |

Data



> 90 % as determined by reducing SDS-PAGE.

Background

Kidney injury molecule-1 (KIM-1) (also known as TIM-1 and HAVCR) is a type 1 transmembrane glycoprotein found on activated CD4+ T cells, especially Th2 cells, and dedifferentiated proximal tubule epithelial cells. In humans, KIM-1 levels are very low or undetectable in normal samples, but following drug toxicity or ischemic damage to the kidney, the 85 kD, mucin-rich extracellular region of this molecule is shed and detected at elevated levels in urine, serum, and plasma. Therefore, KIM-1 is a suitable renal biomarker capable of early detection and progressive monitoring of acute kidney injury beyond traditional injury markers such as serum creatinine (SCr) and blood urea nitrogen (BUN) which lack specificity and sensitivity. KIM-1 has also been implicated in the development of atopic airway disease (asthma) and Th2-biased autoimmune responses.

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Toll-free: 1-888-852-8623
Web: www.elabscience.com

Tel: 1-832-243-6086
Email: techsupport@elabscience.com

Fax: 1-832-243-6017