

Recombinant Human G-CSFR/CD114 Protein (Fc Tag)

Catalog Number: PKSH031749

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

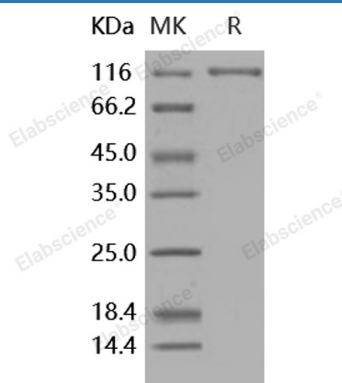
Description

Species	Human
Source	HEK293 Cells-derived Human G-CSFR/CD114 protein Met 1-Pro 621, with an C-terminal hFc
Calculated MW	93.3 kDa
Observed MW	120-130 kDa
Accession	NP_000751.1
Bio-activity	Measured by its ability to inhibit GCSF-induced proliferation of NFS60 mouse myeloid cells. The ED ₅₀ for this effect is typically 2-20 ng/ml in the presence of 0.125ng/ml of recombinant human GCSF.

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°C 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 Normally 5% - 8% trehalose, mannitol and 0.01% Tween 80 are added as protectants before lyophilization.
Reconstitution	Please refer to the specific buffer information in the printed manual. Please refer to the printed manual for detailed information.

Data



> 95 % as determined by reducing SDS-PAGE.

Background

For Research Use Only

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Granulocyte Colony Stimulating Factor Receptor (G-CSFR), also known as CD114, which belongs to the cytokine receptor superfamily, is a cell surface receptor for colony stimulating factor 3 (CSF3). It is a critical regulator of granulopoiesis. This type I membrane protein has a composite structure consisting of an immunoglobulin(Ig)-like domain, a cytokine receptor-homologous (CRH) domain and three fibronectin type III (FNIII) domains in the extracellular region. Mutations in the G-CSF receptor leading to carboxy-terminal truncation transduce hyperproliferative growth responses, and are implicated in the pathological progression of severe congenital neutropenia (SCN) to acute myelogenous leukemia (AML). Additionally, autocrine/paracrine stimulation of G-CSFR may be important in the biology of solid tumors, including metastasis.