FabGennix International, Inc.
9191 Kyser Way Bldg. 4 Suite 402
Frisco, TX 75033

Tel: (214)-387-8105, 1-800-786-1236 Fax: (214)-387-8105 Email: info@fabgennix.com Web: www.FabGennix.com

Rabbit Polyclonal Anti-Glucose transporter GLUT2 antibody

Catalog Number: GLUT2-201AP Lot Number:

General Information

Product	Glucose transporter GLUT2 Antibody
Description	Solute carrier family 2 glucose transporter member 2 Antibody
Accession #	Uniprot: P14246 NCBI: NP_112474.2
Verified Applications	CM, ELISA, ICC, IF, IHC, IP, WB
Species Cross Reactivity	Human, Mouse, Rat
Host	Rabbit
Immunogen	Synthetic peptide taken within amino acid region 1-50 on human GLUT2 protein.
Alternative Nomenclature	liver antibody, Glucose transporter, liver/islet antibody, GTT2 antibody, SLC2A2 antibody, Solute carrier family 2, facilitated glucose transporter member 2 antibody

Physical Properties

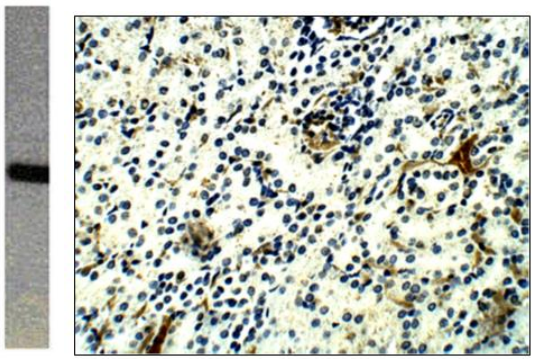
Quantity	100 µg
Volume	200 µl
Form	Affinity Purified Immunoglobulins
Immunoglobulin & Concentration	0.5 mg/ml IgG in antibody stabilization buffer
Storage	Store at -20ºC for long term storage.

Recommended Dilutions

DOT Blot	1:8,000
ELISA	1:8,000
Immunocytochemistry	1:100
Immunofluorescence	1:100
Immunohistochemistry	1:100
Immunoprecipitation	1:200
Western Blot	1:500

Related Products	Catalog #
FITC-Conjugated	GLUT2.1-FITC
Antigenic Blocking Peptide	P-GLUT2.1
Western Blot Positive Control	PC-GLUT2

Application Verification:



WB of GLUT2-201AP with PC-GLUT2. 1:500 antibody, in DiluObuffer. Apparent MW is 40-60 kDa.

IHC of GLUT2 (GLUT2-201AP on FFPE section of mouse kidney. 1:100 antibody dilution in IHC blocking buffer. 40X magnification on Leica DM4000.

Dilutions are for reference only. Applications not listed above are not necessarily precluded from working with this antibody. Investigators intending to use an application that has not been verified can request a complimentary sample.

Overview:

Molecular cloning of glucose transporters have identified a family of closely related genes that encodes at least 12 proteins all in the molecular weight range of 40-60 kDa. Individual members of the Glut family have predicted secondary structure characteristic of 12 membrane-spanning domains as observed in other transport carriers. Majority of the differences in sequence homology in Glut proteins occur at 4 hydrophilic domains that may play a role in tissue specific expression and targeting. All Glut proteins are glycosylated at or near the C-terminus and are present on either cell surface or in intracellular sites. Some transporters exhibit dynamic trafficking between intracellular storage sites and plasma membranes in response to various stimuli. In some tissues Glut proteins are asymmetrically distributed between apical and basolateral membranes as in blood brain barrier and blood testis barriers.

The Glut family-selective antibodies were generated against unique C-terminal peptides characteristics of a particular Glut family. These antibodies have been fully characterized for cross reactivity with in the Glut family and with other cellular proteins. Western blot positive control and antigenic blocking peptides are available. The GLUT2 Antibody wil label a diffuse band of 45-49 kDa and co-migrate with GLUT2 Positive Control (PC-GLUT2), hepatocyte abluminal membranes and pancreateic GLUT2 protein on a 10% SDS-PAGE. For a complete listing of all GLUT antibodies and related pathways, please view our catalog at http://fabgennix.com.

References:

1. Meuckler M. M. Glucose transport and Glucose homeostasis: New insights from transgenic mice. NIPS, 10, 22-29, 1995.
2. Farooqui S. M., Bagdadi A. F., Rhett S., and O'Donnell J. M., Degenerative changes in spermatogonia are associated with loss of glucose transporter (Glut 3) in abdominal testis of surgically induced unilateral cryptorchidism in rats. Biochem. Biophys. Res. Comm. 236, 407-412, 1997.

For users who may require large amounts of the products listed above, please inquire about bulk material discounts.
This Product is for Research Use Only and is NOT intended for use in humans or clinical diagnosis.