abcam

Product datasheet

Anti-FGFR2 antibody [1G3] ab58201

★★★★★ 8 Abreviews 28 References 画像数 2

製品の概要

製品名 Anti-FGFR2 antibody [1G3]

製品の詳細 Mouse monoclonal [1G3] to FGFR2

由来種 Mouse

アプリケーション 適用あり: IHC-P

適用なし: Flow Cyt or WB

種交差性 交差種: Human

免疫原 Recombinant fragment corresponding to Human FGFR2 aa 621-723.

特記事項 This product was changed from ascites to tissue culture supernatant on 13th Feb 2019. Please

note that the dilutions may need to be adjusted accordingly. If you have any questions, please do

not hesitate to contact our scientific support team.

The Life Science industry has been in the grips of a reproducibility crisis for a number of years. Abcam is leading the way in addressing this with our range of recombinant monoclonal antibodies and knockout edited cell lines for gold-standard validation. Please check that this product meets

your needs before purchasing.

If you have any questions, special requirements or concerns, please send us an inquiry and/or contact our Support team ahead of purchase. Recommended alternatives for this product can be

found below, along with publications, customer reviews and Q&As

製品の特性

製品の状態 Liquid

保存方法 Shipped at 4°C. Upon delivery aliquot and store at -20°C or -80°C. Avoid repeated freeze / thaw

cycles.

バッファー pH: 7.40

Constituent: PBS

精製度 Tissue culture supernatant

ポリ/モノ モノクローナル

クローン名1G3アイソタイプlgG2b軽鎖の種類kappa

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The Abpromise guarantee <u>Abpromise保証は、</u>次のテスト済みアプリケーションにおけるab58201の使用に適用されますアプリケーションノートには、推奨の開始希釈率がありますが、適切な希釈率につきましてはご検討ください。

アプリケーション	Abreviews	特記事項
IHC-P	★★★★ (3)	Use at an assay dependent concentration.

追加情報

Is unsuitable for Flow Cyt or WB.

ターゲット情報

機能

関連疾患

Receptor for acidic and basic fibroblast growth factors.

Defects in FGFR2 are the cause of Crouzon syndrome (CS) [MIM:123500]; also called craniofacial dysostosis type I (CFD1). CS is an autosomal dominant syndrome characterized by craniosynostosis (premature fusion of the skull sutures), hypertelorism, exophthalmos and external strabismus, parrot-beaked nose, short upper lip, hypoplastic maxilla, and a relative mandibular prognathism.

Defects in FGFR2 are a cause of Jackson-Weiss syndrome (JWS) [MIM:123150]. JWS is an autosomal dominant craniosynostosis syndrome characterized by craniofacial abnormalities and abnormality of the feet: broad great toes with medial deviation and tarsal-metatarsal coalescence. Defects in FGFR2 are a cause of Apert syndrome (APRS) [MIM:101200]; also known as acrocephalosyndactyly type 1 (ACS1). APRS is a syndrome characterized by facio-cranio-synostosis, osseous and membranous syndactyly of the four extremities, and midface hypoplasia. The craniosynostosis is bicoronal and results in acrocephaly of brachysphenocephalic type. Syndactyly of the fingers and toes may be total (mitten hands and sock feet) or partial affecting the second, third, and fourth digits. Intellectual deficit is frequent and often severe, usually being associated with cerebral malformations.

Defects in FGFR2 are a cause of Pfeiffer syndrome (PS) [MIM:101600]; also known as acrocephalosyndactyly type V (ACS5). PS is characterized by craniosynostosis (premature fusion of the skull sutures) with deviation and enlargement of the thumbs and great toes, brachymesophalangy, with phalangeal ankylosis and a varying degree of soft tissue syndactyly. Three subtypes of Pfeiffer syndrome have been described: mild autosomal dominant form (type 1); cloverleaf skull, elbow ankylosis, early death, sporadic (type 2); craniosynostosis, early demise, sporadic (type 3).

Defects in FGFR2 are the cause of Beare-Stevenson cutis gyrata syndrome (BSCGS) [MIM:123790]. BSCGS is an autosomal dominant condition is characterized by the furrowed skin disorder of cutis gyrata, acanthosis nigricans, craniosynostosis, craniofacial dysmorphism, digital anomalies, umbilical and anogenital abnormalities and early death.

Defects in FGFR2 are the cause of familial scaphocephaly syndrome (FSPC) [MIM:609579]; also known as scaphocephaly with maxillary retrusion and mental retardation. FSPC is an autosomal dominant craniosynostosis syndrome characterized by scaphocephaly, macrocephaly, hypertelorism, maxillary retrusion, and mild intellectual disability. Scaphocephaly is the most common of the craniosynostosis conditions and is characterized by a long, narrow head. It is due to premature fusion of the sagittal suture or from external deformation.

Defects in FGFR2 are a cause of lacrimo-auriculo-dento-digital syndrome (LADDS) [MIM:149730]; also known as Levy-Hollister syndrome. LADDS is a form of ectodermal dysplasia, a heterogeneous group of disorders due to abnormal development of two or more ectodermal

structures. LADDS is an autosomal dominant syndrome characterized by aplastic/hypoplastic lacrimal and salivary glands and ducts, cup-shaped ears, hearing loss, hypodontia and enamel hypoplasia, and distal limb segments anomalies. In addition to these cardinal features, facial dysmorphism, malformations of the kidney and respiratory system and abnormal genitalia have been reported. Craniosynostosis and severe syndactyly are not observed.

Defects in FGFR2 are the cause of Antley-Bixler syndrome (ABS) [MIM:207410]. ABS is a multiple congenital anomaly syndrome characterized by craniosynostosis, radiohumeral synostosis, midface hypoplasia, malformed ears, arachnodactyly and multiple joint contractures. ABS is a heterogeneous disorder and occurs with and without abnormal genitalia in both sexes.

Belongs to the protein kinase superfamily. Tyr protein kinase family. Fibroblast growth factor receptor subfamily.

Contains 3 lg-like C2-type (immunoglobulin-like) domains.

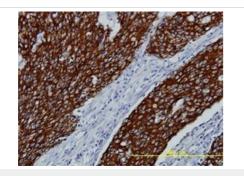
Contains 1 protein kinase domain.

細胞内局在

配列類似性

Secreted and Cell membrane.

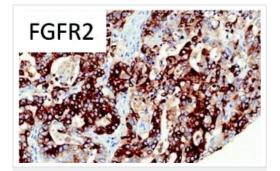
画像



Immunohistochemistry (Formalin/PFA-fixed paraffinembedded sections) - Anti-FGFR2 antibody [1G3] (ab58201)

FGFR2 antibody (ab58201) used in immunohistochemistry at 5ug/ml on formalin fixed and paraffin embedded human stomach carcinoma tissue.

This image was generated using the ascites version of the product.



Immunohistochemistry (Formalin/PFA-fixed paraffinembedded sections) - Anti-FGFR2 antibody [1G3] (ab58201)

Image from Guo T et al., J Proteome Res 11:3405-3413 (2012). Epub 2012 May 7. Fig 4.; DOI: 10.1021/pr300212g; April 25, 2012, J. Proteome Res., 2012, 11 (6), pp 3405–3413 with permission from the American Chemical Society.

Immunohistochemical analysis of Human gastric adenocarcinoma, staining FGFR2 with ab58201 at 0.2 μg/ml.

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