Data Sheet (Cat.No.TMPK-00928)

TargetMol

VLDLR Protein, Mouse, Recombinant (His)

General Information

Synonyms:	CHRMQ1;VLDLR;FLJ35024;VLDLRCH;RP11-320E16.1;VLDL-R
Protein Construction:	Gly28-Ser797
Species:	Mouse
Expression Host:	HEK293 Cells
Accession:	P98156
Molecular Weight:	86.1 kDa (predicted). Due to glycosylation, the protein migrates to 110-130 kDa based on Tris-Bis PAGE result.

QC Testing

Biological Activity:	Mouse VLDLR, His Tag immobilized on CM5 Chip can bind Mouse PCSK9, His Tag with an affinity constant of 0.28 nM as determined in SPR assay.
Purity:	> 95% as determined by Tris-Bis PAGE
Endotoxin:	< 1.0 EU/μg of the protein as determined by the LAL method.
Formulation:	Lyophilized from a solution filtered through a 0.22 μm filter, containing PBS (pH 7.4). Typically, 8% trehalose is incorporated as a protective agent before lyophilization.

Preparation and Storage

Reconstitution:

Reconstitute the lyophilized protein in distilled water. The product concentration should not be less than 100 μg/ml. Before opening, centrifuge the tube to collect powder at the bottom. After adding the reconstitution buffer, avoid vortexing or pipetting for mixing.

Stability & Storage:

It is recommended to store recombinant proteins at -20°C to -80°C for future use. Lyophilized powders can be stably stored for over 12 months, while liquid products can be stored for 6-12 months at -80°C. For reconstituted protein solutions, the solution can be stored at -20°C to -80°C for at least 3 months. Please avoid multiple freeze-thaw cycles and store products in aliquots.

Actual storage temperature shall be subject to the COA.

Shipping:

In general, lyophilized powders are shipped with blue ice, while solutions are shipped with dry ice.

Protein Background

VLDLR cerebellar hypoplasia (VLDLR-CH) is characterized by non-progressive congenital ataxia that is predominantly truncal and results in delayed ambulation, moderate-to-profound intellectual disability, dysarthria, strabismus, and seizures.VLDLR-CH is inherited in an autosomal recessive manner. Carrier testing for at-risk relatives, prenatal testing for a pregnancy at increased risk and preimplantation genetic testing are possible when the pathogenic variants in a family are known.

Reference

Boycott KM, et al. VLDLR Cerebellar Hypoplasia. 2008 Aug 26 [updated 2020 Feb 27]. In: Adam MP, Ardinger HH, Pagon RA, Wallace SE, Bean LJH, Mirzaa G, Amemiya A, editors. GeneReviews® [Internet]. Seattle (WA): University of Washington, Seattle; 1993-202PMID: 20301729.

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