Data Sheet (Cat.No.TMPS-00022)

TargetMol

EGFR Protein, Human, Recombinant (CHO, His)

General Information

Synonyms: HER1;ERBB1;ERBB

Protein Construction: Leu25-Ser645

Species: Human

Expression Host: CHO Cells

Accession: P00533-1

Molecular Weight: 95~115 kDa (Reducing conditions)

QC Testing

Biological Activity: ED 50 < 1.0 μg/ml, measured in a bioassay using 3T3 cells in the presence of 25.0 pg/ml human EGF.

Purity: > 95% as determined by SDS-PAGE

Endotoxin: < 0.2 EU/μg of protein as determined by the LAL method.

Formulation: Lyophilized from a 0.2 μm filtered solution in PBS.

Preparation and Storage

Reconstitution:

Reconstitute the lyophilized protein in sterile deionized 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:

Upon receiving, this product remains stable for up to 6 months at lower than -70°C. Upon reconstitution, the product should be stable for up to 1 week at 4°C or up to 3 months at -20°C. For long term storage it is recommended that a carrier protein (example 0.1% BSA) be added. Avoid repeated freeze-thaw cycles.

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

EGF Receptor, also known as ERBB, ERBB1 and HER1, is a type I transmembrane protein belonging to the tyrosine protein kinase family. It belongs to a family of tyrosine kinase receptors including Human EGF Receptors (HER) 2, 3, and 4 which all play important roles in cell growth and differentiation. Their primary ligands are EGF, Heparin-Binding EGF and Transforming Growth Factor α. Upon ligand binding, EGFR undergoes asymmetric dimerization, composed of an “activator” and a “receiver”. EGFR and its family members are disregulated in numerous cancers. In particular, EGFR is overexpressed in many epithelial solid tumors. Evidence suggests EGFR is an excellent target for pharmacologic intervention in Non Small Cell Lung Cancer (NSCLC) due to its high level of

expression and prominent role in tumor growth and metastasis.

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