

Human Asprosin RTU ELISA Kit

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CATALOG #
AAA219628

REACTIVITY
Human

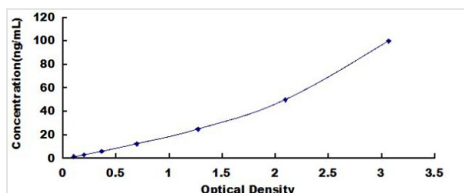
PRODUCT SYNONYMS

Asprosin; Human Asprosin ELISA Kit; Asprosin rtu elisa kit

PRODUCT SPECIFICATIONS

Reactivity	Human
Assay Type	Sandwich
Samples	Serum, Plasma, Tissue Homogenates or Other Biological Fluids.
Detection Range	1.56-100ng/mL
Sensitivity	0.73ng/mL
RTU ELISA Kit's Advantage	The Ready-To-Use (RTU) Kits require fewer steps in setup and take less time to run. Detection Solutions are pre-diluted and total incubation time is shorter than many other ELISA Kits.
Preparation and Storage	For unopened kits: All the reagents should be kept at 4 degree C upon receipt. For opened kits: Once the kit is opened, the remaining reagents still need to be stored according to the above storage conditions. In addition, return the unused wells to the foil pouch containing the desiccant pack and reseal along entire edge of zip-seal.

IMAGES



Standard Curve (Sample)

ADDITIONAL INFORMATION

Related Product Information for Asprosin rtu elisa kit

Test Principle: The microtiter plate provided in this kit has been pre-coated with an antibody specific to Asprosin. Standards or samples are then added to the appropriate microtiter plate wells with a biotin-conjugated antibody preparation specific to Asprosin. Next, Avidin conjugated to Horseradish Peroxidase (HRP) is added to each microplate well and incubated. After TMB substrate solution is added, only those wells that contain Asprosin, biotin-conjugated antibody and enzyme-conjugated Avidin will exhibit a change in color. The enzyme-substrate reaction is terminated by the addition of sulphuric acid solution and the color change is measured spectrophotometrically at a wavelength of 450nm $\pm$ 10nm. The concentration of Asprosin in the samples is then determined by comparing the O.D. of the samples to the standard curve.

For Research Use Only. Not for use in diagnostic or therapeutic procedures. Small volumes of product may become entrapped in the seal of the vial during shipment and storage; if necessary, briefly centrifuge the vial on a tabletop centrifuge to dislodge any liquid in the cap.