

Human Receptor For Advanced Glycation End Products (RAGE/AGER) ELISA Kit | RAGE/AGER elisa kit

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CATALOG #
AAA331145

REACTIVITY
Human

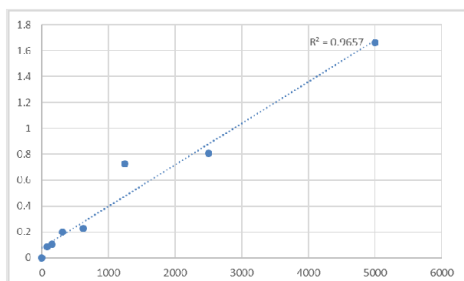
PRODUCT SYNONYMS

Receptor For Advanced Glycation End Products (RAGE/AGER); Human Receptor For Advanced Glycation End Products (RAGE/AGER) ELISA Kit; AGER; DAMA-358M23.4; MGC22357; RAGE; receptor for advanced glycosylation end-products; RAGE/AGER elisa kit

PRODUCT SPECIFICATIONS

Reactivity	Human
Specificity	Human Receptor for advanced glycation end products (RAGE/AGER) ELISA Kit has high sensitivity and excellent specificity for detection of Human AGER. No significant cross-reactivity or interference between Human AGER and analogues was observed.
Sequence Length	347
Assay Type	Sandwich ELISA (Quantitative)
Samples	Cell Culture Supernatants, Serum, Plasma, Other Biological Fluids
Detection Method	Colorimetric
Usage Notes	* Do not mix components from different kit lots or use reagents beyond the kit expiration date. * Allow all reagents to warm to room temperature for at least 30 minutes before opening. * Pre-rinse the pipet tip with reagent, use fresh pipet tips for each sample, standard and reagent to avoid contamination. * Unused wells must be kept desiccated at 4 degree C in the sealed bag provided. * Mix Thoroughly is very important for the result. It is recommended using low frequency oscillator or slight hand shaking every 10 minutes. * It is recommended that all samples and standards be assayed in duplicate or triplicate.
Preparation and Storage	Store at 2-8 degree C.

IMAGES



Standard Curve (Sample)

Fig.1. Human Receptor for advanced glycation end products (RAGE/AGER) Standard Curve.

ADDITIONAL INFORMATION

Related Product Information for RAGE/AGER elisa kit	Description: This Human Receptor for advanced glycation end products (RAGE/AGER) ELISA Kit employs a two-site sandwich ELISA to quantitate AGER in samples. An antibody specific for AGER has been pre-coated onto a microplate. Standards and samples are pipetted into the wells and any AGER present is bound by the immobilized antibody. After removing any unbound substances, a biotin-conjugated antibody specific for AGER is added to the wells. After washing, Streptavidin conjugated Horseradish Peroxidase (HRP) is added to the wells. Following a wash to remove any unbound avidin-enzyme reagent, a substrate solution is added to the wells and color develops in proportion to the amount of AGER bound in the initial step. The color development is stopped and the intensity of the color is measured. Background: RAGE, the receptor for advanced glycation endproducts is a 35kD transmembrane receptor of the immunoglobulin super family which was first characterized in 1992 by Neeper et al.. Its name comes from its ability to bind advanced glycation endproducts (AGE), a heterogeneous group of non-enzymatically altered proteins. Besides AGEs, RAGE is also able to bind other ligands and is thus often referred to as a pattern recognition receptor. The interaction between RAGE and its ligands is thought to result in pro-inflammatory gene activation. Due to an enhanced level of RAGE ligands in diabetes or other chronic disorders, this receptor is hypothesised to have a causative effect in a range of inflammatory diseases such as diabetic complications, Alzheimer's disease and even some tumors.
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NCBI AND UNIPROT INFORMATION

NCBI GI #	332800988
NCBI GeneID	177
NCBI Accession #	NP_001193895.1
NCBI GenBank Nucleotide #	NP_001193895.1
UniProt Accession #	Q15109
NCBI Official Full Name	advanced glycosylation end product-specific receptor isoform 6
NCBI Official Synonym Full Names	advanced glycosylation end-product specific receptor
NCBI Official Symbol	AGER
NCBI Official Synonym Symbols	RAGE; SCARJ1
NCBI Protein Information	advanced glycosylation end product-specific receptor
UniProt Protein Name	Advanced glycosylation end product-specific receptor
UniProt Gene Name	AGER
UniProt Synonym Gene Names	RAGE
UniProt Entry Name	RAGE_HUMAN

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.