

Rabbit COVID 19 Spike S Coronavirus Polyclonal Antibody | anti-COVID-19 antibody

SARS-COV-2 S Spike protein

CATALOG # AAA71442	HOST Rabbit	APPLICATIONS Immunohistochemistry, Western Blot, ELISA
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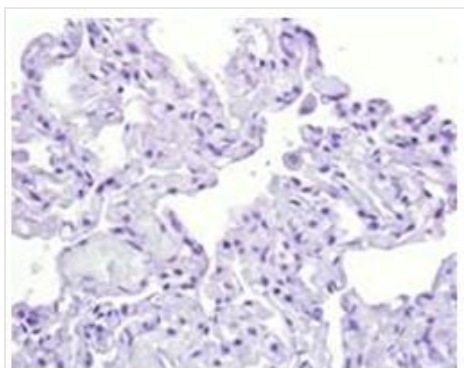
PRODUCT SYNONYMS

COVID 19 Spike S Coronavirus; Polyclonal Antibody; SARS-COV-2 S Spike protein; 2019 Novel Coronavirus; Coronavirus; CoV; COVID-19 virus; HCoV-2; Human Coronavirus 2019; SARS2; SARS-CoV-2; Severe acute respiratory syndrome coronavirus 2; Spike S; anti-COVID-19 antibody

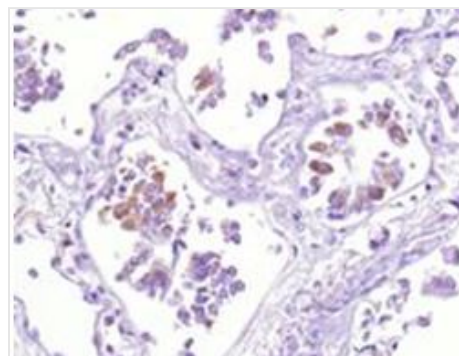
PRODUCT SPECIFICATIONS

Host	Rabbit
Clonality	Polyclonal
Isotype	IgG
Specificity	This antibody recognizes ~SARS-CoV2 Spike protein. This antibody has been tested in human infected tissues.
Purity/Purification	The Rabbit IgG is purified by Epitope Affinity Purification
Form/Format	This affinity purified antibody is supplied in sterile Phosphate buffered saline (pH7.2) containing antibody stabilizer
Applicable Applications for anti-COVID-19 antibody	IHC (Immunohistochemistry), WB (Western Blot), ELISA
Preparation	A synthetic peptide derived from C-term sequence of SARS-COV-2 Spike protein
Preparation and Storage	The antibodies are stable for 12 months from date of receipt when stored at -20 degree C to -70 degree C. The antibodies can be stored at 2oC-8oC for three-month without detectable loss of activity. Avoid repeated freezing-thawing cycles.

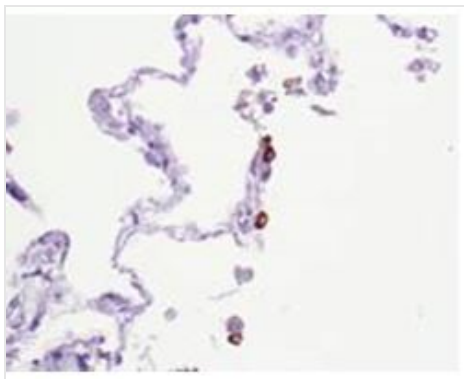
IMAGES



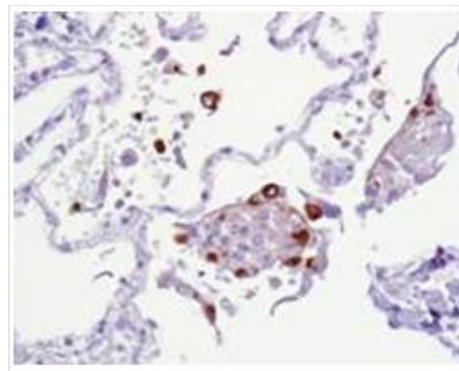
IHC (Immunohistochemistry)
Fig. 4 Negative control (lung tissue).



IHC (Immunohistochemistry)
Fig. 3 Positive bronchial ciliated epithelial cells.



IHC (Immunohistochemistry)
Fig.2 Positive type 2 pneumocytes.



IHC (Immunohistochemistry)
Fig. 1 Positive alveolar macrophages in lung tissue

ADDITIONAL INFORMATION

Related Product Information for anti-COVID-19 antibody

The SARS-CoV-2 virion contains four structural proteins: E (envelope), M (membrane), S (spike), and N (nucleocapsid) proteins. The N protein holds the RNA genome, and the S, E, and M proteins form the viral envelope. Coronavirus S protein is a large, multifunctional class I viral transmembrane protein. It is required for the entry of the virion particles into the cell through a contact with host cellular receptors. The S-protein of coronavirus consists of S1 and S2 functional units. S1 is responsible for host receptor binding, S2 is in charge of fusion.

Coronaviruses are a family of viruses that can cause diseases in animals and humans that vary between the common cold and more severe diseases that include severe acute respiratory syndrome (SARS) and Middle East respiratory syndrome (MERS). SARS-CoV-2 belongs to the broad family of coronaviruses. It is an enveloped positive-sense RNA virus. SARS-CoV-2 contains four structural proteins: E (envelope), M (membrane), S (spike), and N (nucleocapsid) proteins.

Coronavirus S protein is a large, multifunctional class I viral transmembrane protein. It is required for the entry of the virion particles into the cell through a contact with host cellular receptors. The S-protein of coronavirus consists of S1 and S2 functional units. S1 is responsible for host receptor binding, S2 is in charge of fusion. The nucleocapsid (N) is a 45 kDa protein, one of the major structural proteins of the virus. It binds directly to viral RNA and provides stability. It is involved in viral RNA transcription and replication, packaging of the genome into helical ribonucleocapsid, and interference with cell cycle processes of host cells.

Since its discovery in late December 2019, the novel coronavirus-related pneumonia COVID-19 continues to disseminate. Studies indicate that lung involvement is present in many cases, SARS-CoV-2 invades the lung parenchyma, resulting in severe interstitial inflammation of the lungs. It was shown before that histological examination indicated bilateral diffuse alveolar damage with cellular fibromyxoid exudates. Chest computer tomography displays the presence of lesions in lung lobes.

Our polyclonal antibodies can detect the presence of nucleocapsid (N) and spike (S) proteins in tissues of SARS-CoV-2 infected individuals.

References

Jiansheng Huang, et. al. J Clin Med. 2020 Apr; 9(4): 1131 Kui L, et al. Chin Med J 2020133:1025–1031 Van Elslande J, et al. Clin Microbiol Infect. 2020 Aug;26(8):1082-1087.

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.

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Online datasheet: <https://stage.aaabiotech.com/polyclonal/covid-19-spike-s-coronavirus-antibody-immunohistochemistry-western-blot-elisa/71442>