

Troponin I Rabbit Polyclonal Antibody

Catalog #: EAB10547

| Host/Isotype | Clonality | Applications | MW (kDa) | Reactivity |
|--------------|------------|--------------------------|----------|-------------------|
| Rabbit IgG | Polyclonal | WB, IHC-P, IF/ICC, ELISA | 24 | Human, Mouse, Rat |

Applications Dilutions

The application notes include recommended starting dilutions; optimal dilutions/concentrations should be determined by the end user.

| | |
|--|--------------|
| WB (Western Blotting) | 1:500-2000 |
| IHC-P (Immunohistochemistry-Paraffin) | 1:50-300 |
| IF/ICC (Immunofluorescence/Immunocytochemistry) | 1:50-300 |
| ELISA (Enzyme-linked Immunosorbent Assay) | 1:5000-20000 |

Product Information

| | |
|-----------------------|---|
| Conjugate | Unconjugate |
| Specificity | Troponin I Rabbit Polyclonal Antibody detects endogenous levels of Troponin I protein. |
| Purification | Affinity purification |
| Concentration | 1mg/ml |
| Format | Liquid |
| Formulation | In PBS, pH 7.4, Containing 0.02% sodium azide, 0.5% BSA and 50% Glycerol |
| Shipping | Gel Pack |
| Storage | Store at -20°C least 1 year from the date of shipment. Avoid repeated freeze/thaw cycles. Aliquots may be stored at +4°C for 1-2 weeks |
| UniProt ID | P19429 |
| Entrez-Gene Id | 7137 |

Product Description

Troponin I (TnI), along with troponin T (TnT) and troponin C (TnC), is one of 3 subunits that form the troponin complex of the thin filaments of striated muscle. TnI is the inhibitory subunit; blocking actin-myosin interactions and thereby mediating striated muscle relaxation. The TnI subfamily contains three genes: TnI-skeletal-fast-twitch, TnI-skeletal-slow-twitch, and TnI-cardiac. This gene encodes the TnI-cardiac protein and is exclusively expressed in cardiac muscle tissues. Mutations in this gene cause familial hypertrophic cardiomyopathy type 7 (CMH7) and familial restrictive cardiomyopathy (RCM). Troponin I is useful in making a diagnosis of heart failure, and of ischemic heart disease. An elevated level of troponin is also now used as indicator of acute myocardial injury in patients hospitalized with moderate/severe Coronavirus Disease 2019 (COVID-19). Such elevation has also been associated with higher risk of mortality in cardiovascular disease patients hospitalized due to COVID-19.

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