

Sheep Anti-Human Factor I (IgG Fraction)

PRODUCT CODE: PC031

This product is intended for *in vitro* research use only.

1 REAGENT

1.1 PRESENTATION

Sheep immunoglobulin fraction in 1 mL of glycine buffered saline pH7.4 (containing 0.099% sodium azide, 0.1% E-amino-n-caproic acid, 0.01% benzamidine, and 1mM ethylenediaminetetraacetic acid).

1.2 IMMUNOGEN

Human Factor I, purified from plasma.

1.3 SPECIFICITY

This product gives a single arc when tested by IEP against fresh human plasma.

Identity has been confirmed by double diffusion (Ouchterlony) against fresh human plasma and a known anti-human Factor I.

1.4 PROTEIN CONCENTRATION

Determined by measuring optical density at 280nm (extinction coefficient of a 1% solution, using a 1cm lightpath = 14.5). See vial label.

2 CAUTION

This product contains sodium azide and must be handled with caution – do not ingest or allow contact with skin or mucous membranes. If contact does occur, wash with a large volume of water and seek medical advice. Explosive metal azides may be formed with lead and copper plumbing; on disposal of reagent, flush with a large volume of water to prevent azide build up.

3 STORAGE AND STABILITY

Upon receipt this product should be stored at 2-8°C where it will remain stable until the given expiry date.

4 APPLICATIONS

This product is suitable for use in a variety of gel techniques including radial immunodiffusion (RID), double diffusion and immunoelectrophoresis (IEP). It has been evaluated using the conditions described below, which should be used as guidelines for determining those appropriate for the users system.

The use of 3% PEG 6000 with 1.2% agarose in a suitable buffer (such as Tris borate EDTA or Tris-barbital (pH ≥ 8.2)) is recommended.

RID: 1.5µL antiserum/cm² gel vs 10µL fresh plasma, neat - 1/4

Double diffusion: 10µL antiserum vs 10µL fresh plasma

IEP: 100µL antiserum vs 10µL fresh plasma

Suitability for use in other techniques such as rocket IEP, immunohistochemical procedures, enzyme-linked immunosorbent assays and Western blot has not been assessed but use in such assays should not necessarily be excluded.