abcam

Product datasheet

Anti-FGFR2 antibody [SP273] - N-terminal ab227683

Recombinant RabMAb

1 References 9 Images

Overview

Product name	Anti-FGFR2 antibody [SP273] - N-terminal
Description	Rabbit monoclonal [SP273] to FGFR2 - N-terminal
Host species	Rabbit
Tested applications	**Suitable for:** Indirect ELISA, Flow Cyt, IHC-P **Unsuitable for:** ICC/IF or WB
Species reactivity	**Reacts with:** Human **Predicted to work with:** Mouse
Immunogen	Synthetic peptide. This information is proprietary to Abcam and/or its suppliers.
Positive control	Flow Cytometry: Kato III cells. IHC-P: Human stomach adenocarcinoma, colon adenocarcinoma tissue, cervical squamous cell carcinoma, hepatocellular carcinoma, breast ductal carcinoma and bladder transitional cell carcinoma tissues.
General notes	This product has switched from a hybridoma to recombinant production method on 23rd May 2023. This product is a recombinant monoclonal antibody, which offers several advantages including: - High batch-to-batch consistency and reproducibility - Improved sensitivity and specificity - Long-term security of supply - Animal-free production For more information **see here**. Our RabMAb® technology is a patented hybridoma-based technology for making rabbit monoclonal antibodies. For details on our patents, please refer to **RabMAb® patents**.

Properties

Form	Liquid
Storage instructions	Shipped at 4°C. Store at +4°C short term (1-2 weeks). Upon delivery aliquot. Store at -20°C long term. Avoid freeze / thaw cycle.
Storage buffer	pH: 7.60 Preservative: 0.1% Sodium azide Constituents: PBS, 1% BSA

Purity	Protein A/G purified
Purification notes	Purified from TCS by protein A/G.
Clonality	Monoclonal
Clone number	SP273
Isotype	IgG

Applications

The Abpromise guarantee Our **Abpromise guarantee** covers the use of ab227683 in the following tested applications.

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

Application	Abreviews	Notes
Indirect ELISA		Use a concentration of 1 µg/ml.
Flow Cyt		1/400.
IHC-P		1/100. Boil tissue section in citrate buffer pH 6.0 for 10 minutes followed by cooling at room temperature for 20 minutes. Incubate with primary antibody for 10 minutes at room temperature.

Application notes Is unsuitable for ICC/IF or WB.

Target

Function Receptor for acidic and basic fibroblast growth factors.

Involvement in disease Defects in FGFR2 are the cause of Crouzon syndrome (CS) [MIM:123500]; also called craniofacial dysostosis type I (CFD1). CS is an autosomal dominant syndrome characterized by craniosynostosis (premature fusion of the skull sutures), hypertelorism, exophthalmos and external strabismus, parrot-beaked nose, short upper lip, hypoplastic maxilla, and a relative mandibular prognathism.
Defects in FGFR2 are a cause of Jackson-Weiss syndrome (JWS) [MIM:123150]. JWS is an autosomal dominant craniosynostosis syndrome characterized by craniofacial abnormalities and abnormality of the feet: broad great toes with medial deviation and tarsal-metatarsal coalescence.
Defects in FGFR2 are a cause of Apert syndrome (APRS) [MIM:101200]; also known as acrocephalosyndactyly type 1 (ACS1). APRS is a syndrome characterized by facio-cranio-synostosis, osseous and membranous syndactyly of the four extremities, and midface hypoplasia. The craniosynostosis is bicoronal and results in acrocephaly of brachysphenocephalic type. Syndactyly of the fingers and toes may be total (mitten hands and sock feet) or partial affecting the second, third, and fourth digits. Intellectual deficit is frequent and often severe, usually being associated with cerebral malformations.
Defects in FGFR2 are a cause of Pfeiffer syndrome (PS) [MIM:101600]; also known as acrocephalosyndactyly type V (ACS5). PS is characterized by craniosynostosis (premature fusion of the skull sutures) with deviation and enlargement of the thumbs and great toes, brachymesophalangy, with phalangeal ankylosis and a varying degree of soft tissue syndactyly. Three subtypes of Pfeiffer syndrome have been described: mild autosomal dominant form (type 1); cloverleaf skull, elbow ankylosis, early death, sporadic (type 2); craniosynostosis, early demise, sporadic (type 3).

Defects in FGFR2 are the cause of Beare-Stevenson cutis gyrata syndrome (BSCGS) [MIM:123790]. BSCGS is an autosomal dominant condition is characterized by the furrowed skin disorder of cutis gyrata, acanthosis nigricans, craniosynostosis, craniofacial dysmorphism, digital anomalies, umbilical and anogenital abnormalities and early death.
Defects in FGFR2 are the cause of familial scaphocephaly syndrome (FSPC) [MIM:609579]; also known as scaphocephaly with maxillary retrusion and mental retardation. FSPC is an autosomal dominant craniosynostosis syndrome characterized by scaphocephaly, macrocephaly, hypertelorism, maxillary retrusion, and mild intellectual disability. Scaphocephaly is the most common of the craniosynostosis conditions and is characterized by a long, narrow head. It is due to premature fusion of the sagittal suture or from external deformation.
Defects in FGFR2 are a cause of lacrimo-auriculo-dento-digital syndrome (LADDS) [MIM:149730]; also known as Levy-Hollister syndrome. LADDS is a form of ectodermal dysplasia, a heterogeneous group of disorders due to abnormal development of two or more ectodermal structures. LADDS is an autosomal dominant syndrome characterized by aplastic/hypoplastic lacrimal and salivary glands and ducts, cup-shaped ears, hearing loss, hypodontia and enamel hypoplasia, and distal limb segments anomalies. In addition to these cardinal features, facial dysmorphism, malformations of the kidney and respiratory system and abnormal genitalia have been reported. Craniosynostosis and severe syndactyly are not observed.
Defects in FGFR2 are the cause of Antley-Bixler syndrome (ABS) [MIM:207410]. ABS is a multiple congenital anomaly syndrome characterized by craniosynostosis, radiohumeral synostosis, midface hypoplasia, malformed ears, arachnodactyly and multiple joint contractures. ABS is a heterogeneous disorder and occurs with and without abnormal genitalia in both sexes.

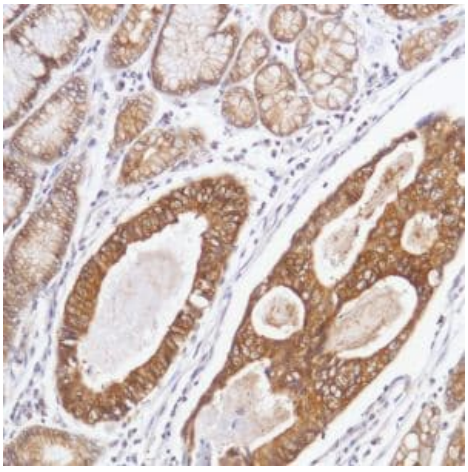
Sequence similarities

Belongs to the protein kinase superfamily. Tyr protein kinase family. Fibroblast growth factor receptor subfamily.
Contains 3 Ig-like C2-type (immunoglobulin-like) domains.
Contains 1 protein kinase domain.

Cellular localization

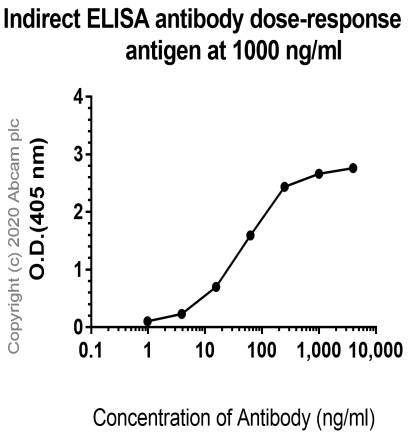
Secreted and Cell membrane.

Images



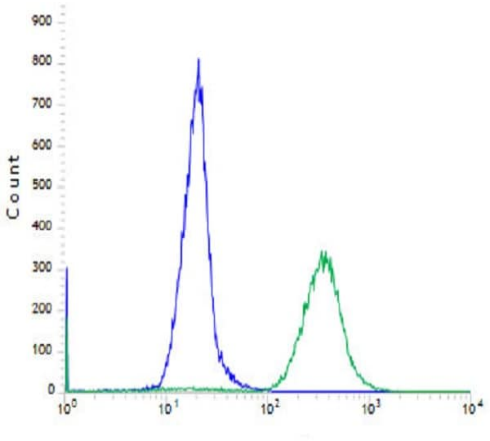
Immunohistochemistry (Formalin/PFA-fixed paraffin-embedded sections) - Anti-FGFR2 antibody [SP273] - N-terminal (ab227683)

Formalin-fixed, paraffin-embedded human stomach adenocarcinoma tissue stained for FGFR2 using ab227683 at 1/100 dilution in immunohistochemical analysis.



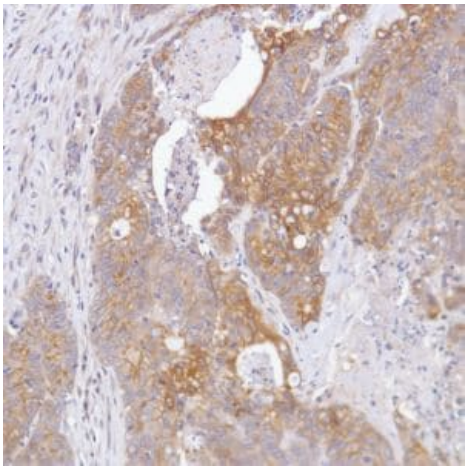
Indirect ELISA - Anti-FGFR2 antibody [SP273] - N-terminal (ab227683)

Indirect ELISA using ab227683 at varying antibody concentrations (4000~0 ng /ml) and FGFR2 antigen at 1000 ng/ml. Alkaline Phosphatase-conjugated AffiniPure Goat Anti-Rabbit IgG (H+L) at 1/2500 dilution dilution was used as a secondary antibody.



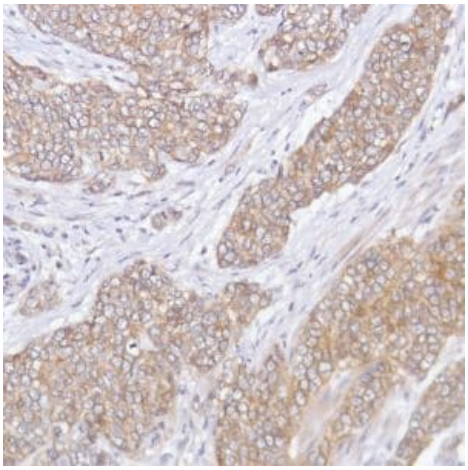
Flow Cytometry - Anti-FGFR2 antibody [SP273] - N-terminal (ab227683)

Flow Cytometry analysis of Kato III (human gastric carcinoma cell line) cells labeling FGFR2 with ab227683 at 1/400 dilution (green) compared to a Rabbit IgG negative control (blue).



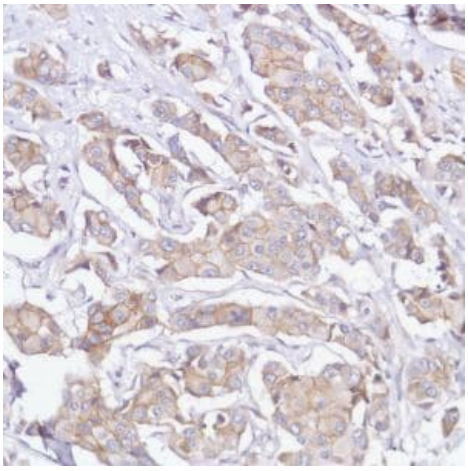
Immunohistochemistry (Formalin/PFA-fixed paraffin-embedded sections) - Anti-FGFR2 antibody [SP273] - N-terminal (ab227683)

Formalin-fixed, paraffin-embedded human colon adenocarcinoma tissue stained for FGFR2 using ab227683 at 1/100 dilution in immunohistochemical analysis.



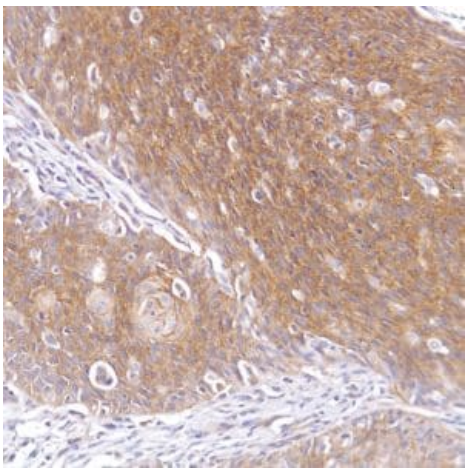
Immunohistochemistry (Formalin/PFA-fixed paraffin-embedded sections) - Anti-FGFR2 antibody [SP273] - N-terminal (ab227683)

Formalin-fixed, paraffin-embedded human bladder transitional cell carcinoma tissue stained for FGFR2 using ab227683 at 1/100 dilution in immunohistochemical analysis.



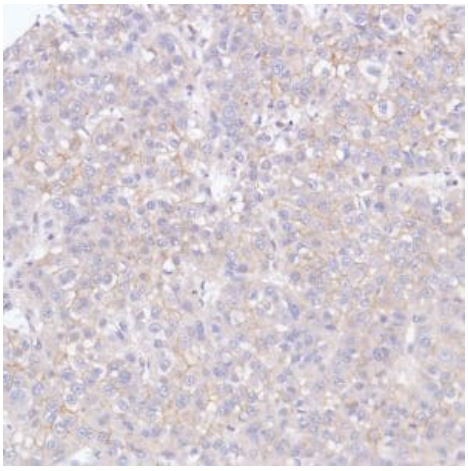
Immunohistochemistry (Formalin/PFA-fixed paraffin-embedded sections) - Anti-FGFR2 antibody [SP273] - N-terminal (ab227683)

Formalin-fixed, paraffin-embedded human breast ductal carcinoma tissue stained for FGFR2 using ab227683 at 1/100 dilution in immunohistochemical analysis.



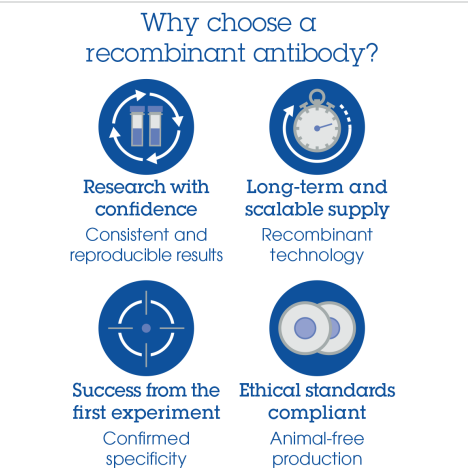
Immunohistochemistry (Formalin/PFA-fixed paraffin-embedded sections) - Anti-FGFR2 antibody [SP273] - N-terminal (ab227683)

Formalin-fixed, paraffin-embedded human cervical squamous cell carcinoma tissue stained for FGFR2 using ab227683 at 1/100 dilution in immunohistochemical analysis.



Immunohistochemistry (Formalin/PFA-fixed paraffin-embedded sections) - Anti-FGFR2 antibody [SP273] - N-terminal (ab227683)

Formalin-fixed, paraffin-embedded human hepatocellular carcinoma tissue stained for FGFR2 using ab227683 at 1/100 dilution in immunohistochemical analysis.



Anti-FGFR2 antibody [SP273] - N-terminal (ab227683)

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