

Product datasheet

Anti-Factor VII antibody - C-terminal ab197656

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Overview

Product name	Anti-Factor VII antibody - C-terminal
Description	Rabbit Polyclonal to Factor VII - C-terminal
Host species	Rabbit
Specificity	ab197656 detects endogenous level of total Factor VII protein.
Tested applications	Suitable for: IHC-P, WB
Species reactivity	Reacts with: Mouse, Human Predicted to work with: Rat 
Immunogen	Fusion protein within Human Factor VII (C terminal). The exact sequence is proprietary. Fusion protein corresponding to residues near the C terminal of human Factor VII Isoform B. NCBI Accession No. BC130468. The protein fusion partner is GST. Database link: P08709-2
Positive control	293T, Jurkat and mouse NIH 3T3. Human lung cancer tissue.

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: 7.3 Preservative: 0.05% Sodium azide Constituents: 50% Glycerol, 49% PBS
Purity	Immunogen affinity purified
Clonality	Polyclonal
Isotype	IgG

Applications

Our [Abpromise guarantee](#) covers the use of **ab197656** in the following tested applications.

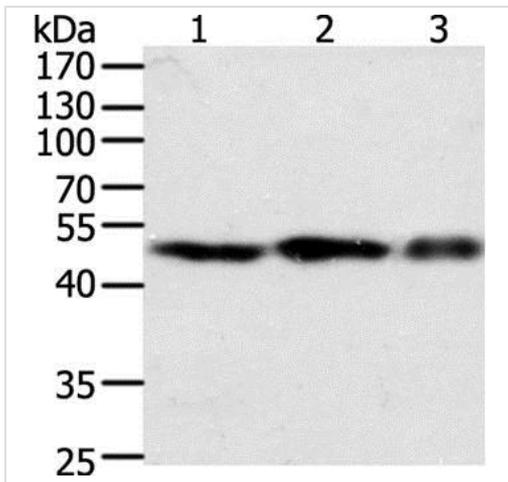
The application notes include recommended starting dilutions; optimal dilutions/concentrations should be determined by the end user.

Application	Abreviews	Notes
IHC-P		1/25 - 1/100. Perform heat mediated antigen retrieval with citrate buffer pH 6 before commencing with IHC staining protocol.
WB	★★★★★	1/400 - 1/2000. Predicted molecular weight: 49 kDa.

Target

Function	Initiates the extrinsic pathway of blood coagulation. Serine protease that circulates in the blood in a zymogen form. Factor VII is converted to factor VIIa by factor Xa, factor XIIa, factor IXa, or thrombin by minor proteolysis. In the presence of tissue factor and calcium ions, factor VIIa then converts factor X to factor Xa by limited proteolysis. Factor VIIa will also convert factor IX to factor IXa in the presence of tissue factor and calcium.
Tissue specificity	Plasma.
Involvement in disease	Defects in F7 are the cause of factor VII deficiency (FA7D) [MIM:227500]. FA7D is a rare hereditary hemorrhagic disease. The clinical picture can be very severe, with the early occurrence of intracerebral hemorrhages or hemarthroses, or, in contrast, moderate with cutaneous-mucosal hemorrhages (epistaxis, menorrhagia) or hemorrhages provoked by a surgical intervention. Numerous subjects are completely asymptomatic despite a very low F7 level.
Sequence similarities	Belongs to the peptidase S1 family. Contains 2 EGF-like domains. Contains 1 Gla (gamma-carboxy-glutamate) domain. Contains 1 peptidase S1 domain.
Post-translational modifications	The vitamin K-dependent, enzymatic carboxylation of some glutamate residues allows the modified protein to bind calcium. The iron and 2-oxoglutarate dependent 3-hydroxylation of aspartate and asparagine is (R) stereospecific within EGF domains.
Cellular localization	Secreted.

Images



Western blot - Anti-Factor VII antibody - C-terminal (ab197656)

All lanes : Anti-Factor VII antibody - C-terminal (ab197656) at 1/400 dilution

Lane 1 : mouse NIH 3T3 cell lysate

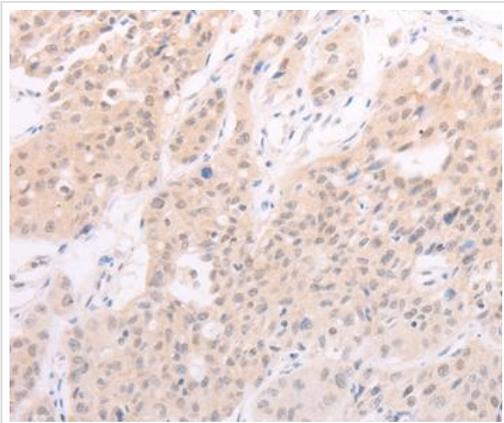
Lane 2 : 293T cell lysate

Lane 3 : Jurkat cell lysate

Lysates/proteins at 40 µg per lane.

Predicted band size: 49 kDa

Exposure time: 30 seconds



Immunohistochemistry (Formalin/PFA-fixed paraffin-embedded sections) - Anti-Factor VII antibody - C-terminal (ab197656)

Immunohistochemical analysis of paraffin-embedded Human lung cancer tissue labeling Factor VII using ab197656 at a 1/40 dilution.

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