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Occipital Lobe Membrane Lysate

CATALOG NUMBER: XBL-10184

Specifications	
TISSUE/CELL TYPE:	Brain: Occipital Lobe
SPECIES:	Human
SOURCE:	Human Brain: Occipital Lobe tissue
DIAGNOSIS:	Normal
TESTED APPLICATIONS:	WB
APPLICATIONS:	Brain: Occipital Lobe membrane protein lysate is for use in Western blotting, 10 ug to 20 ug per lane is recommended for mini gel.

Properties	
BUFFER:	HEPES pH 7.9, MgCl ₂ , KCl, EDTA, Sucrose, Glycerol, Sodium deoxycholate, and NP-40.
CONCENTRATION:	2 mg/mL or better
STORAGE CONDITIONS:	Store at 2-8°C for continuous use. For extended storage, freeze working aliquots at -70°C. Repeated freezing and thawing is not recommended. Under proper storage conditions the shelf life is half a year from the date of receipt.
SHIPPING:	

Product Description

Human brain occipital lobe tissue membrane protein lysate was prepared by isolating the membrane protein from whole tissue homogenates using a proprietary technique. The human occipital lobe tissue was frozen in liquid nitrogen immediately after excision and then stored at -70°C. The membrane protein is provided in a buffer including HEPES (pH 7.9), MgCl₂, KCl, EDTA, Sucrose, Glycerol, sodium deoxycholate, NP-40, and a cocktail of protease inhibitors. For quality control purposes, the isolated brain occipital lobe tissue membrane protein pattern on SDS-PAGE gel is shown to be consistent for each lot by visualization with coomassie blue staining. The isolated brain occipital lobe tissue membrane protein is then Western analyzed by either GAPDH or β -actin antibody to confirm there is no signal or very weak signal.

Disclaimer: This product is for research use only.

Additional Disclaimer: Products are intended for laboratory research purposes only and should be used by qualified personnel only. They are not intended for use in humans. ProSci is not liable for damages or injuries resulting from receipt and/or use of ProSci materials. Please refer to the Material Safety Data Sheet (MSDS) for safe storage, handling, and use procedures. Also, for further information on the biosafety classification of human etiologic agents, please consult the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention's Office of Health and Safety (www.cdc.gov/od/ohs).

FOR RESEARCH USE ONLY

January 9, 2018