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Human Dynein, Cytoplasmic 1, Heavy Chain 1 (DYNC1H1) ELISA Kit

Catalogue No.:abx151360



Human DYNC1H1 ELISA Kit is a sandwich ELISA kit for use with Tissue homogenates and other biological fluids. This assay has high sensitivity and excellent specificity for detection of Dynein, Cytoplasmic 1, Heavy Chain 1 (DYNC1H1) No significant cross-reactivity or interference between Dynein, Cytoplasmic 1, Heavy Chain 1 (DYNC1H1) and analogues was observed.

Please note that this kit is also available as a CLIA Kit abx495637.

Target: Dynein, Cytoplasmic 1, Heavy Chain 1 (DYNC1H1)

Reactivity: Human

Tested Applications: ELISA

Recommended dilutions: Optimal dilutions/concentrations should be determined by the end user.

Test Range: 0.312 ng/ml - 20 ng/ml

Sensitivity: < 0.113 ng/ml

Validity: The validity for this kit is 6 months.

Storage: Store at 2°C to 8°C upon receipt.

Stability: The stability of the kit is determined by the rate of activity loss. The loss rate is less than 5% within

the expiration date under appropriate storage conditions. To minimize performance fluctuations, operation procedures and lab conditions should be strictly controlled. It is also strongly suggested

that the whole assay is performed by the same user throughout.

Standard Form: Lyophilized

ELISA Detection: Colorimetric



DATASHEET

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ELISA Type: Sandwich

ELISA Data: Quantitative

Sample Type: Tissue homogenates and other biological fluids.

Note: This product is for research use only.

The range and sensitivity is subject to change. Please contact us for the latest product information. For accurate results, sample concentrations must be diluted to mid-range of the kit. If you require a

specific range, please contact us in advance or write your request in your order comments.

Please note that our ELISA and CLIA kits are optimised for detection of native samples, rather than recombinant proteins. We are unable to guarantee detection of recombinant proteins, as they may

have different sequences or tertiary structures to the native protein.