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Phospho-BRAF(T439) Antibody Blocking peptide
Synthetic peptide
Catalog # BP3303a

Specification

Phospho-BRAF(T439) Antibody Blocking peptide - Product Information

Primary Accession P15056

Phospho-BRAF(T439) Antibody Blocking peptide - Additional Information

Gene ID 673

Other Names
Serine/threonine-protein kinase B-raf, Proto-oncogene B-Raf, p94, v-Raf murine sarcoma viral oncogene homolog B1, BRAF, BRAF1, RAFB1

Target/Specificity
The synthetic peptide sequence used to generate the antibody AP3303a was selected from the region of human Phospho-BRAF-T439. A 10 to 100 fold molar excess to antibody is recommended. Precise conditions should be optimized for a particular assay.

Format
Peptides are lyophilized in a solid powder format. Peptides can be reconstituted in solution using the appropriate buffer as needed.

Storage
Maintain refrigerated at 2-8°C for up to 6 months. For long term storage store at -20°C.

Precautions
This product is for research use only. Not for use in diagnostic or therapeutic procedures.

Phospho-BRAF(T439) Antibody Blocking peptide - Protein Information

Name BRAF (HGNC:1097)

Synonyms BRAF1, RAFB1

Function
Protein kinase involved in the transduction of mitogenic signals from the cell membrane to the nucleus (Probable). Phosphorylates MAP2K1, and thereby activates the MAP kinase signal transduction pathway (PubMed:21441910, PubMed:29433126). Phosphorylates PFKFB2 (PubMed:36402789). May play a role in the postsynaptic responses of hippocampal neurons (PubMed:1508179).

Cellular Location
Nucleus. Cytoplasm. Cell membrane. Note=Colocalizes with RGS14 and RAF1 in both the cytoplasm and membranes.

Tissue Location
Brain and testis.

Phospho-BRAF(T439) Antibody Blocking peptide - Protocols

Provided below are standard protocols that you may find useful for product applications.

- Blocking Peptides

Phospho-BRAF(T439) Antibody Blocking peptide - Images

Phospho-BRAF(T439) Antibody Blocking peptide - Background

BRAF is involved in the transduction of mitogenic signals from the cell membrane to the nucleus. It may play a role in the postsynaptic responses of hippocampal neuron. Defects in BRAF are a cause of cardiofaciocutaneous syndrome (CFC syndrome), also known as cardio-facio-cutaneous syndrome. CFC syndrome is characterized by a distinctive facial appearance, heart defects and mental retardation. Heart defects include pulmonic stenosis, atrial septal defects and hypertrophic cardiomyopathy. Some affected individuals present with ectodermal abnormalities such as sparse, friable hair, hyperkeratotic skin lesions and a generalized ichthyosis-like condition. Typical facial features are similar to Noonan syndrome. They include high forehead with bitemporal constriction, hypoplastic supraorbital ridges, downslanting palpebral fissures, a depressed nasal bridge, and posteriorly angulated ears with prominent helices. The inheritance of CFC syndrome is autosomal dominant.

Phospho-BRAF(T439) Antibody Blocking peptide - References

Loewe, R., et al., J. Invest. Dermatol. 123(4):733-736 (2004).Yamaguchi, T., et al., J. Biol. Chem. 279(39):40419-40430 (2004).Frattini, M., et al., Oncogene 23(44):7436-7440 (2004).Tsavachidou, D., et al., Cancer Res. 64(16):5556-5559 (2004).Gear, H., et al., Invest. Ophthalmol. Vis. Sci. 45(8):2484-2488 (2004).