

Rev02
 Update: Aug,08,2025

DATASHEET

EPHB2, His, Human

Cat. No.: Z05254

Product Introduction

Species	Human
Protein Construction	<div style="display: flex; align-items: center; gap: 10px;"> <div style="background-color: #0056b3; color: white; padding: 5px; font-size: 0.8em;"> EPHB2 (Val19-Leu543) Accession # P29323-1 </div> <div style="background-color: #76923c; color: white; padding: 5px; font-size: 0.8em;"> His </div> </div> <div style="display: flex; justify-content: space-around; font-size: 0.7em; margin-top: 2px;"> N-term C-term </div>
Purity	> 95% as determined by BisTris PAGE > 95% as determined by HPLC
Endotoxin Level	Less than 1EU per µg by the LAL method.
Biological Activity	Measured by its binding ability in a functional ELISA. Immobilized EPHB2, His, Human at 2µg/ml (100µl/Well) on the plate can bind Human EphrinB2, hFc Tag . Test result was comparable to standard batch.
Expression System	HEK293
Theoretical Molecular Weight	59.2 kDa
Apparent Molecular Weight	Due to glycosylation, the protein migrates to 65-75 kDa based on Bis-Tris PAGE result.
Formulation	Lyophilized from 0.22µm filtered solution in PBS (pH 7.4).
Reconstitution	Centrifuge the tube before opening. Reconstituting to a concentration more than 100 µg/ml is recommended. Dissolve the lyophilized protein in distilled water.
Storage & Stability	Upon receiving, the product remains stable up to 6 months at -20 °C or below. Upon reconstitution, the product should be stable for 3 months at -80 °C. Avoid repeated freeze-thaw cycles.

Background

Target Background : EphB2, a receptor tyrosine kinase for ephrin ligands, is overexpressed in various cancers and plays an important role in tumor progression. EPHB2 promotes endothelial-mesenchymal transition (EMT) and elicits associated pathologic characteristics of glioblastoma multiforme (GBM) such as invasion and migration. EPHB2 is epigenetically overexpressed in hypoxia, a condition highly prevalent in malignancy. Furthermore, HIF-2α is required for EPHB2 stabilization by hypoxia.

Synonyms : DRT; ERK; HEK5; TYRO5; CAPB; EK5; EPHT3; PCBC; Cek5; EphB2; EPHT3MGC87492; Nuk; Qek2; Sek3

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