

Product datasheet for **SR312148**

Axotrophin (MARCH7) Human siRNA Oligo Duplex (Locus ID 64844)

Product data:

Product Type:	siRNA Oligo Duplexes
Purity:	HPLC purified
Quality Control:	Tested by ESI-MS
Sequences:	Available with shipment
Stability:	One year from date of shipment when stored at -20°C.
# of transfections:	Approximately 330 transfections/2nmol in 24-well plate under optimized conditions (final conc. 10 nM).
Note:	Single siRNA duplex (10nmol) can be ordered.
RefSeq:	NM_001282805 , NM_001282806 , NM_001282807 , NM_022826
UniProt ID:	Q9H992
Synonyms:	AXO; AXOT; MARCH-VII; MARCH7; RNF177
Components:	MARCH7 (Human) - 3 unique 27mer siRNA duplexes - 2 nmol each (Locus ID 64844) Included - SR30004, Trilencer-27 Universal Scrambled Negative Control siRNA Duplex - 2 nmol Included - SR30005, RNase free siRNA Duplex Resuspension Buffer - 2 ml
Summary:	MARCH7 is a member of the MARCH family of membrane-bound E3 ubiquitin ligases (EC 6.3.2.19). MARCH proteins add ubiquitin (see MIM 191339) to target lysines in substrate proteins, thereby signaling their vesicular transport between membrane compartments (Bartee et al., 2004 [PubMed 14722266]).[supplied by OMIM, Mar 2010]
Performance Guaranteed:	OriGene guarantees that at least two of the three Dicer-Substrate duplexes in the kit will provide at least 70% or more knockdown of the target mRNA when used at 10 nM concentration by quantitative RT-PCR when the TYE-563 fluorescent transfection control duplex (cat# SR30002) indicates that >90% of the cells have been transfected and the HPRT positive control (cat# SR30003) provides 90% knockdown efficiency.

For non-conforming siRNA, requests for replacement product must be made within ninety (90) days from the date of delivery of the siRNA kit. To arrange for a free replacement with newly designed duplexes, please contact Technical Services at techsupport@origene.com. Please provide your data indicating the transfection efficiency and measurement of gene expression knockdown compared to the scrambled siRNA control (quantitative RT-PCR data required).



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