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Please contact laboratory prior to sample submission

CP: _____ SN: _____ Cost: \$ _____ (ex. GST)
(Office Use Only)

Sample type:

Collection date:

Collection time:

Account code (USYD only):

(Office use only) Selecting time:

Patient Name/ Project ID:

Name (submitter):

Supervisor:

Faculty/Department:

Organisation:

Species: Age:

Breed: Sex:

Email:

Telephone:

HISTOLOGY/IMMUNOHISTOLOGY			
	No		No
No. of samples (embed only)		Special stains – regular format	
No. of samples (embed & cut)		Special stains – large format	
No. of samples (cut only)			
		List special stains required	
Unstained – regular format			
Unstained – large format			
Unstained (IHC) – regular format			
Unstained (IHC) – large format			
H & E – regular format			
H & E – large format			
Slide box			
Postage			

SCANNING (regular format slides only)	
	No
5x	
10x	
20x	
40x	
63x	
Ensure area for scanning is marked on slide	
HDD supplied	Y / N
Network for image upload (contact lab – USYD only)	Y / N
Slide box	
Postage	

Embed only

Process sample and embed only

Embed and cut

Process sample, embed and cut

Cut only

Block/s supplied for cutting

Regular format

Standard sized slides (76.2 x 25.4 mm)

Large format

Large sized slides (76 x 51 mm)

Contact laboratory if step or serial sectioning required

Sample ID Numbers (attach extra page/s if necessary)

[illegible]