

GARVAN HISTOPATHOLOGY REQUEST FORM



I/we have read and agree to the terms and conditions of the Garvan Institute's Academic/Research Services agreement. When reporting or publishing research findings I/we will acknowledge the Garvan Institute Histopathology Facility for their services. I acknowledge that the services are provided for research use only and the samples cannot be used for diagnostic purposes.

Name: _____ Supervisor/PI: _____

Organisation: _____ PO: _____ Date: _____

General Specimen Information									
Tissue Species:	<input type="checkbox"/> Human	<input type="checkbox"/> Mouse	<input type="checkbox"/> Organo	<input type="checkbox"/> Xenograft	<input type="checkbox"/> Other _____				
Tissue Type:	<input type="checkbox"/> Routine	<input type="checkbox"/> Diaphragm	<input type="checkbox"/> Brain	<input type="checkbox"/> Bone	<input type="checkbox"/> Fatty	<input type="checkbox"/> Breast	<input type="checkbox"/> Lung		
Frozen:	<input type="checkbox"/> Yes	<input type="checkbox"/> No							

Select ONE of the following services:

- Processing & Embedding Only.....(Fill out section A)
- Processing, Embedding, Microtomy & Staining..... (Fill out section A & B)
- Microtomy & Staining (*existing blocks*).....(Fill out section B)
- Staining Only (*existing pre-cut slides*)(Fill out section B)

A	Processing & Embedding		
Samples require new labelled cassettes: <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No		No. of Cassettes:	
Specimen placed in: (date/time)		Size:	
<input type="checkbox"/> Formalin _____		<input type="checkbox"/> >3mm <input type="checkbox"/> < 3mm <input type="checkbox"/> Both	
<input type="checkbox"/> 70% Ethanol _____			

B	Microtomy & Staining	No. of Blocks:																																								
Thickness: <input type="checkbox"/> Routine (4µm) <input type="checkbox"/> Other _____																																										
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="3"></th> <th colspan="3">Total No. of Slides</th> </tr> <tr> <th colspan="2">1Block/slide</th> <th rowspan="2">2Blocks/slide</th> </tr> <tr> <th>1 sect</th> <th>2 sects</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> Unstained</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> H&E</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Picrosirius</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> SHG</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Optimised IHC</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Total No. of Slides			1Block/slide		2Blocks/slide	1 sect	2 sects	<input type="checkbox"/> Unstained				<input type="checkbox"/> H&E				<input type="checkbox"/> Picrosirius				<input type="checkbox"/> SHG				<input type="checkbox"/> Optimised IHC				Fill below if optimised IHC required: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Antibody</td><td></td></tr> <tr><td>Catalogue#</td><td></td></tr> <tr><td>Company</td><td></td></tr> <tr><td>Location</td><td><input type="checkbox"/> Histo 4°C Fridge <input type="checkbox"/> Histo -20°C Freezer</td></tr> <tr><td>Optimised Protocol/Barcode</td><td></td></tr> </table>		Antibody		Catalogue#		Company		Location	<input type="checkbox"/> Histo 4°C Fridge <input type="checkbox"/> Histo -20°C Freezer	Optimised Protocol/Barcode	
	Total No. of Slides																																									
	1Block/slide		2Blocks/slide																																							
	1 sect	2 sects																																								
<input type="checkbox"/> Unstained																																										
<input type="checkbox"/> H&E																																										
<input type="checkbox"/> Picrosirius																																										
<input type="checkbox"/> SHG																																										
<input type="checkbox"/> Optimised IHC																																										
Antibody																																										
Catalogue#																																										
Company																																										
Location	<input type="checkbox"/> Histo 4°C Fridge <input type="checkbox"/> Histo -20°C Freezer																																									
Optimised Protocol/Barcode																																										

Comments/ Additional Notes:

(Block/Specimen IDs must be provided. You may use the attached table or provide your own more detailed list)

Staff Use Only											
Process & Embed		Microtomy				TMA section		Staining		Slide Boxes	
Labelled	Needs printing			1B/slide	2B	3B	Control block section		H&E		1-5p
							Levels/block		Picro		25p
>6 pcs.		1 sect					1 Scroll/1 thick section per block		SHG		50p
		2 sects					Additional scrolls				100p
							Labour				
Spatial prep		Capture area	Small		Zap, labour, blade per block		DNA/RNA Zap per block		Completed (Initial & date)		
			Large								

GARVAN HISTOPATHOLOGY REQUEST FORM



Block/Specimen ID	Unstained	H&E	Picro	SHG	IHC	Comments / Instructions
	Total No. of Unstained	Total No. of H&Es	Total No. of Picro SHG		Total No. of IHC	