EPL Core Services Request Form

Phone: Email: Date: Sept 1 8, 2015 This form is for single label, chromagenic IHC only. Double label, or any flourescent IHC, please fill out the "Other Services" form. Specimen: Species HUMAN Organ LIVER Total number of slides to be stained: 6 Antigen: Ki67 Proposed Antibody: (EPL staff will review antibody choices with researcher) Species:Clonality:Source:Cat #: Based On: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Immunohistochemistry				
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Positive Control:	Positive Con	trol:			
Negative Control:	Negative Cor	ntrol:			
Other information:	Other information	ation:			
Requires additional AgR		Requires additional AgR			
The EPL is not a CLIA certified laboratory. Immunohistochemistry performed in the EPL is for research use only. Reviewed:SMH Estimated Date of Completion: IHC Development Required: X/N Date of Completion:	Reviewed:SMF	1	nohistochemistry per	Estimated Date of Completion:9/25/15	
Notes:	Notes:				

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SMH v1.0