

Direct Questions to Pat Pramoonjago: 434-982-0487 | pp6f@uvahealth.org

Date: _____ Principal Investigator: _____ UVA Member: ☐ YES ☐ NO

Contact: _____ Phone: _____ Email: _____

Address (if outside UVA): _____

Worktag: _____

Method of Payment if Other Than Worktag: _____

Samples being supplied:

☐ Fresh Tissue ☐ Frozen Tissue* ☐ Fixed Tissue. Fixative Type: _____
☐ Paraffin Blocks ☐ Unstained Slides ☐ Other: _____

Services Requested: (check all that apply)

☐ DNA Extraction ☐ RNA Extraction ☐ Other: _____

Downstream Application: _____

Amount of DNA/RNA Needed: _____

Note: We will measure DNA /RNA quality using Nanodrop instrument and provide the information to you (amount of DNA/RNA in ng/ul, 260/280, and 260/230, total volume, and total amount of DNA/RNA).

**Amount of frozen specimen for one reaction is around 50mg – 100mg.*

Number	Sample Name	Amount	Note

Special Instructions / Comments:
