

BTRF service request form for Pathology Department members (biospecimen procurement)

Requestor: _____ check one: faculty trainee
 Contact info: (ph) _____ (PIC) _____ (email) _____

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 FAX 4-9438, PO Box 800904

Sample type being supplied/procured*:

- fresh tissue
 frozen tissue
 fixed tissue Fixation type: _____
 other: _____

Services requested: (check all that reply)

- Sectioning of tissue sample into cassettes prior to processing
 Processing and embedding tissue into paraffin blocks
 Cryostat sectioning of frozen tissue
 Number of slides per sample: _____
 Section thickness: _____ (4 microns standard for histology, 8 microns standard for laser microdissection)
 Histologic sectioning of paraffin-embedded tissue
 Number of slides per sample: _____
 Section thickness: _____ (4 microns standard for histology, 8 microns standard for laser microdissection)
 Other service (add comments below)

Stains

- Hematoxylin and eosin (H&E)
 Masson trichrome
 Other (must make special arrangements)

Other services/ special instructions:

For BTRF staff use:

Specimen identification:

SP#	MAD#

Service units & initials:

Date obtained:

Date completed: