



UNIVERSITY of WASHINGTON
Pathology Research Services Laboratory

Histopathology Service Request Form

UW- External Rates

Requested By:		Billing:	
Phone Number:			
Email:		Date Submitted:	Done:

Specimen Type Submitted:

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Fixed (submitted in 70% ethanol) | <input type="checkbox"/> Paraffin Block(s) | <input type="checkbox"/> Mouse tissue |
| <input type="checkbox"/> Fixed (submitted in formalin) | <input type="checkbox"/> Frozen Block(s) | <input type="checkbox"/> Human tissue |
| <input type="checkbox"/> Fixed, already in cassettes | <input type="checkbox"/> Slides | <input type="checkbox"/> Other: |

Services Requested:

Histology: <input type="checkbox"/> Cassette.....\$8.40 <input type="checkbox"/> Process & Embed >50 blocks.....\$6.20 <input type="checkbox"/> Process & Embed \$13.05 <input type="checkbox"/> Cut Block- <i>paraffin</i>\$13.80 <i>frozen</i>\$22.35	Number of Samples
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_____ Total number of unstained slides requested per block..... \$4.30

- | | | | |
|--|--|--|--|
| Cut & Stain <input type="checkbox"/> H&E.....\$5.60 | <input type="checkbox"/> Oil Red O.....\$5.60 | <input type="checkbox"/> Jone's Silver.....\$54.00 | <input type="checkbox"/> TUNEL.....\$65.30 |
| <input type="checkbox"/> PAS..... \$19.35 | <input type="checkbox"/> Alizarin, Alcian.....\$5.60 | <input type="checkbox"/> MOVATs.....\$54.00 | <input type="checkbox"/> IHC/IF.....\$22.65 |
| <input type="checkbox"/> Trichrome....\$19.35 | <input type="checkbox"/> Picrosirius Red....\$19.35 | <input type="checkbox"/> Other:....inquire for \$ | <input type="checkbox"/> Batch IHC..\$544.00 |
| <input type="checkbox"/> Tech time....\$70.40/hr _____ | | | |

- Consumables:** Slide Tray (20) or Large box (100 slides).....\$15 Small box (25 slides).....\$5.00

Specimen ID's (to be printed on cassettes & slides):	Special Instructions:
1.	<p>Please tell us what you want us to do with your samples, include details about orientation etc, attach sheets if needed:</p>
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16.	<p>Billing summary: Please note that a 6.85% overhead charge will be added to the invoice upon billing</p>
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