



## Request Histology Services for Research

Principle Investigator:	Department/College:
Requesting/Contact Person:	Phone Number:
Fax Number:	E-mail Address:
Date Requested:	Date Requested for Completion:
Specimen Identification	Billing Information (Name and Address) and Cost Center
	(Government Funding <input type="checkbox"/> Yes <input type="checkbox"/> No)

### Processing and Paraffin Block Requests:

Subtotal \$ \_\_\_\_\_

- ☐ Gross, Process and Embed **\$5.32 per paraffin block**. # of blocks: \_\_\_\_\_
- ☐ One Unstained Slides (1) per paraffin block (**\$8.27**)
- ☐ 2-10 Unstained Slides (**\$12.51 per paraffin block**) . # of blocks: \_\_\_\_\_
- ☐ 11-20 Unstained Slides (**\$16.75 per paraffin block**) . # of blocks: \_\_\_\_\_
- ☐ Other \_\_\_\_\_ **Price to be discussed**

### Paraffin block with Hematoxylin and Eosin Stain Requests:

Subtotal \$ \_\_\_\_\_

- ☐ One H&E slide(s) x \_\_\_\_\_ block (**\$10.44 including processing, embedding, and cutting per block**)
- ☐ Additional H&E slide(s)(\_\_\_\_\_)x\_\_\_\_\_ block (\$4.24 for 2-10 slides per block)
- ☐ Additional H&E slide(s)(\_\_\_\_\_)x\_\_\_\_\_ block (\$8.48 for 11-20 slides per block)

### Special Stain Requests:

Subtotal \$ \_\_\_\_\_

- ☐ Special Stains x \_\_\_\_\_ (**\$14.84 per special stain per slide**)
- Specify: PAS, Trichrome, Iron, Reticulin, Other: \_\_\_\_\_
- ☐ Other \_\_\_\_\_ **Price to be discussed**

### Immunohistochemistry Requests:

Subtotal \$ \_\_\_\_\_

- ☐ Immunostains x \_\_\_\_\_ (**\$28.24 per test. Antibody on current PDL Immuno requisition**)
- ☐ **\$100.00 Set-up Fee for antibody not present on PDL requisition.**
- ☐ Other \_\_\_\_\_ **Price to be discussed**

### Other Requests:

Subtotal \$ \_\_\_\_\_

- ☐ Specify: \_\_\_\_\_ **Price to be discussed**

Date of Service Completed \_\_\_\_\_

**Total \$** \_\_\_\_\_

Medical Director of PDL Approval: \_\_\_\_\_

Signature