

AHDL #

LOG BOOK #

INTERNAL USE ONLY

Please Submit one form for each sample

Date submitted: _____

INFORMATION REQUIRED FOR MHV PCR ASSAY

Persons submitting sample _____

Investigators: _____ Program: _____

Building _____ Room: _____ Phone # (____) ____ - ____ Fax # (____) ____ - ____

Cost Center #. _____ APO# _____

Received from: _____ at (location) _____

TYPE OF MATERIAL: Species of origin Mouse Rat Human // other _____

If hybridoma, fusion between what species Mouse / Mouse Mouse / Rat Human // other _____

Sample designation: _____ Cell type _____

Ascites (type) _____ Other _____

Does it contain virus? Yes Type _____ in what cell type: _____ No Unknown

If of human origin has reverse transcriptase activity been tested for? Yes No Unknown if so. Please attach copy of result.

PASSAGE HISTORY:

Passage # _____ In what? _____

Has the material ever been in animals? Yes No At what passage?

In what animals? _____

Is this material currently being passaged in animals at NCI-FCRDC? Yes building _____ No Unknown

Human carcinogen? Yes No Unknown Human pathogen? Yes No

Lethal when injected into mice/rat? Yes No At what dosage? _____ In what animals? _____ No Unknown
