

Histology and Anatomic Pathology Research Submission Form

EXPERIMENTAL PATHOLOGY FACILITY
(970) 297-1281
www.research.colostate.edu/epf/



ACCESSION STICKER

Date _____ Fund (for billing) _____
 PI _____ Contact Person _____
 Contact Phone # _____ Contact Email _____

Materials Submitted _____

Type of Samples	#	Type of	Comments/Special Instructions
Wet tissue Cassettes		Fixation used?	
Paraffin Blocks		Decalcification used?	
Unstained Slides		Other sample prep?	

Test Requested _____

Type	#	Comments/Special Instructions
H&E		
Unstained		
Curls		
Other		
Special Stain*		
IHC*		

Slide Scanning	# for 10X	# for 20X	# for 40X	Comments/Special Instructions
Single Plane				
Stack				

* Please see website for list of special stains and IHC offered.

Lab Use Only

Test completion date _____ Completed by _____
 Results sent to _____ Results sent date _____