

## Ordering histological preparation (D-1-050725) Reference SOP-4

Date:

First/LastName:	Invoice reference:
Phone number:	Billing address:
Email address:	
The samples are in:	Since:
Animal species/Tissue:	Quantity:
Pick up, date:	Delivery, date:
Address:	Address:

**Which structures/components/cells do you desired to be visible on the slide?** You may attach picture.

Fixation:

Excision:

Decalcification:

Dehydration:

Embedding/Orientation:

Sectioning: Sectioning thickness:

Quantity of cuts/samples:

Quantity of slides/Samples:

Series    Level

Quantity of slides/Stained:

Quantity of level/class:

Quantity of slides/Clear:

Special treated:

Staining/IHC:

Scanning:

Other, marking on samples, etc: