



SILABE

Samples request form
mail to : samples@silabe.com

DATE:

Company

Contact:

Phone:

Address:

City, State, Zip:

Email:

Macaca fascicularis - Macaque crabier - Cynomolgus macaca

		Volume (ml)	Qty	Specific gender	Temperature			Volume (ml)	Qty	Specific gender	Temperature
Whole blood	LH	Ind.tube		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen	Plasma	LH	Ind.tube		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen
		Pool		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen			Pool		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen
	K2-EDTA	Ind.tube		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen	Plasma	K2-EDTA	Ind.tube		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen
		Pool		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen			Pool		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen
	K3-EDTA	Ind.tube		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen	Plasma	K3-EDTA	Ind.tube		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen
		Pool		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen			Pool		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen
	NH	Ind.tube		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen	Plasma	NH	Ind.tube		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen
		Pool		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen			Pool		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen
	Na Citrate	Ind.tube		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen	Plasma	Na Citrate	Ind.tube		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen
		Pool		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen			Pool		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen
	CTAD	Ind.tube		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen	Serum	Serum	Ind.tube		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen
		Pool		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen			Pool		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen
CSF	CSF	Ind.tube		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen	Bone marrow	Bone marrow	Ind.tube		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen
		Pool		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen			Pool		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen
PBMC	PBMC	CPT tube/Animal		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	-80°C	CPT tube	CPT tube	centrifugated		<input type="checkbox"/> M _____ <input type="checkbox"/> F _____ <input type="checkbox"/> Indifferent	<input type="checkbox"/> Room T° <input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen
		Others non sterile			Temperature			<input type="checkbox"/> Yes <input type="checkbox"/> No			
Others	Others	Feces			<input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen						
		Urine			<input type="checkbox"/> Chilled T° <input type="checkbox"/> Frozen						

Comments