



Pathology Research Resources

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Histology Laboratory Submission Form

Clients: Please complete the gray shaded sections and the Service Description Box below

UM Charge and Billing Information Must be Provided

UM Charge Account #	Department Name
Billing Contact Name	Investigator Name
Internal (Lab) Account #	Contact Name and Number
Date Submitted	Date Collected
Date Completed	Type of Fixative
Date Picked Up/Signature	# Cassettes/blocks Submitted
Species	If this project involves human specimens, provide IRB Number

Describe the type of service you require. Include information such as # H&E and/or unstained slides, # sections per slide, thickness of section, special embedding instructions, etc. Further instructions can also be placed on page 2 with specimen description.

To be completed by the laboratory

Service	Price	Number	Quote for Service
Process/Embed/1HE			
Unstained Sections			
Recut			
Addl HE slides			
Process/Embed only			
Special Stain			
Slide Boxes			
Tech Time, 1/2hr			
Total			