Pacific BioLabs Laboratory Service Request form … EXPLAINED

Client Info

Report To – Name and address of the report contact person and who we should contact regarding testing.

Invoice To – Name, address, and phone number of the person or department to whom the invoice should be sent. This is only needed if different from the Report To information.

Phone – Phone number of the report contact person.

Fax – Fax number of the report contact person.

P.O. – A **P.O.** number is required for all testing; many clients issue standing P.O.'s for routine testing.

Email – Email address of the report contact person(s).

Quote – Quote number from the Request for Quotation.

Test Article Info

Test Article ID – Complete Test Article description and the identifying information as they should appear on the final report. Please include a description of sample container or packaging.

Quantity – The number of samples being submitted.

Lot No. – The number that identifies what lot the samples came from.

Code – The Test Article code if present.

Storage Conditions – Indicate temperature range at which Test Article should be stored.

Controlled Substance – Is the Test Article a controlled substance? If yes, indicate schedule level.

Hazardous – Is the Test Article hazardous? If yes, indicate hazard type. For Hazardous materials client **must** include an MSDS with their Test Article submission.

Return Test Articles – Does the Test Article need to be returned? If yes, what is your carrier and account number?

List part(s) of the Test Article that should be tested – For devices, indicate if specific parts of the Test Article should be tested.

Final intended use/application of Test Article? – Please indicate use of product in its final form.

Sterility Status – If sample is Sterile, indicate the method of sterilization (ETO, Gamma, Steam, E-beam).

Stability Testing – For GLP testing, please include a copy of the stability data along with Test Article submission.

Extraction Conditions – Indicate if specific temperature and extraction durations are required for your Test Article.

Surface Area in cm2 – For devices only

Surface Area Calculations Completed By – Applicable if Surface Area has been provided.

Service

Regulatory Treatment – Indicate whether the testing should be done in accordance with cGMP, GLP or Non-regulatory.

Rush – Does the testing need to be done faster than standard Turnaround Time? Indicate desired report date.

Do You Want Report Date Confirmation? – Indicate if you want to be notified of the study director email address, expected date on test, expected date off test, and expected report date.

Report Format – Indicate the format you would like the Report To person(s) to receive the report in.

Archive Options – Indicate archive option for your reports (either non-GLP or GLP) and GLP specimens. After study completion, all paper records will be scanned by a fully validated system that complies with GMP and GLP regulations. The scanned copies will be stored at PBL indefinitely. Paper records and GLP Specimens will be stored by PBL at no charge for the first year after study completion.

For additional information on archiving, please visit www.PacificBiolabs.com/archivefeeschedule.asp

Testing Authorized By

Testing Authorized By – By signing the LSR, PBL has your permission to proceed with testing.