

## Histology Request Form

**University of Michigan**  
**Comparative Pathology ULAM**  
 Dr. Erby Wilkinson - Paula Arrowsmith  
 018 Animal Research Facility  
 1150 W. Medical Center Dr.  
 Ann Arbor, MI 48109  
 (734) 936-3803 or (734) 647-0654  
 Email: sdarrow@umich.edu

Requested Date: \_\_\_\_\_

Returned Date: \_\_\_\_\_

Fund	Org	Program	Subclass	Project/Grant	Legacy/Short Code

**Primary Investigator:**  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Grant Name: \_\_\_\_\_  
 Department: \_\_\_\_\_

**Contact Person:**  
 Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

**Case Information:**  
 Species Type: \_\_\_\_\_      Fixative: \_\_\_\_\_  
 Special Instruction: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Service Requested	Quantity		Member Cost		Member Sub-Total
Paraffin Process & Embed		x	\$6.10	=	
Unstained Slides		x	\$2.50	=	
H & E slides		x	\$8.00	=	
Antibody Titer (5 slides)		x	\$65.00	=	
IHC Antibody Stain		x	\$13.00	=	
Special Stains (routine)		x	\$8.00	=	
Special Stains (silver)		x	\$10.00	=	
Rnase Free Setup/Cutting		x	\$8.00	=	
Frozen Cut Slide (Unstain)		x	\$3.75	=	
Frozen Cut Slide (H&E)		x	\$9.00	=	
(Before Discounts)			<b>TOTAL</b>		