Cytometry and Cell Imaging Core Intake Form

Name

Email Address

Please provide a brief description of your project

Sample/Cell Type(s)

When do you expect to have samples ready?

Part A - Requests for Training

Which equipment would you like access to? Please select all that apply.

Microscopes LSM 880 Confocal EVOS M5000 Flow Cytometers Attune NxT Aurora Slide Scanner Aperio AT2

Date

F - -

CyTOF

I have done fluorescence microscopy

Please list which microscopes you have used

I have done flow cytometry

Please list which flow cytometers you have used

I have done whole slide scanning

Please list which whole slide scanners you have used

Part B – Request for Cell Sorting and CyTOF Services

Do you require sorting or CyTOF related services? Sorting

For CyTOF, do you plan to use the MDIPA kit? Yes No

If no, do you have a panel in mind?	No	Yes, please attach an	Excel listing the marker and tags
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For Sorting, please list your potential panel, including the viability dye.

Marker	Antibody Clone (optional)	Tag (Fluorophore)		
Are there any attachments to this form (e.g. additional sheet for the panel)? No Yes				

If you have any additional information, comments, or questions, please include them in the submit email