

**Cellcheck Services
Submission Form**

Ship samples to:
4011 Discovery Drive
Columbia, MO 65201

www.idexxbioanalytics.com
email: idexxbioanalytics@idexx.com
Toll Free: 800-669-0825
Customer Service: 573-499-5700
Fax: 573-499-5701

SUBMITTER INFORMATION:

Name: _____
Institution / Firm: _____
Address: _____

City: _____ State: _____ Zip: _____
Country: _____
Phone Number: _____
Fax Number: _____
E-mail: _____
Quote # (if applicable): _____

Case report will be sent to the e-mail address provided above.

BILL TO:

Institution / Firm: _____
Attention: _____
Address: _____

City: _____ State: _____ Zip: _____
Phone Number: _____
Fax Number: _____
E-mail: _____
PO Number: _____
Invoice Type: Emailed Mailed Faxed

Payment information is required in order to ensure prompt processing of samples.

IF MULTIPLE SPECIES ARE SUBMITTED, THE SPECIES MUST BE INDICATED ON THE SAMPLE INFORMATION TABLE.

Shipping Date _____ Total # of Samples _____ Specime Description _____

CellCheck Profile: Human: CellCheck 9 CellCheck 9 Plus CellCheck 16 CellCheck 16 Plus
 Mouse CellCheck Mouse CellCheck Plus Rat CellCheck Rat CellCheck Plus Canine CellCheck
 Canine CellCheck Plus Interspecies Contamination Other _____

Additional Testing: Mycoplasma sp. C. Bovis Human Pathogens: h-IMPACT I h-IMPACT II h-IMPACT III
 IMPACT I IMPACT II IMPACT III IMPACT IV IMPACT V IMPACT VI IMPACT VII IMPACT VIII
 IMPACT SC Other assays _____

Cell Source: Repository/Cell Bank/Distribution Center Which one? _____
 In House Other _____

Are your cells growing on feeders? Yes No If yes, what species? _____

Reason for study: Authentication Establish cell line genetic reference profile Cross contamination detection
 Other _____

Do you suspect cross contamination? What species? _____

	SAMPLE ID	CELL LINES NAMES <small>(required for comparison to published cell data)</small>	SPECIES	ATCC/DSMZ # <small>(if known)</small>	OTHER _____	OTHER _____
1	_____	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____	_____
4	_____	_____	_____	_____	_____	_____
5	_____	_____	_____	_____	_____	_____
6	_____	_____	_____	_____	_____	_____
7	_____	_____	_____	_____	_____	_____
8	_____	_____	_____	_____	_____	_____
9	_____	_____	_____	_____	_____	_____
10	_____	_____	_____	_____	_____	_____

Are you aware of any potential human health hazards associated with these specimens? If yes, please state nature. _____