SCAC/FOR/0109-03





Cell Sorter Request form

This document reflects the conditions of service between the user (client) and the SCAC. The delivery of this document to the SCAC, duly completed and signed, is essential for carrying out the requested activity. Give the completed form to the facility staff or send it to scac.usuaris@uab.cat. The request confirmation will be sent by e-mail in up to a week.

SCAC technical approval

Please make sure to use an application that supports Java, such as **Adobe Acrobat Reader**, to properly view the content of the document.

Date	
Request #	

1. Requestor Data

Investigator (User) (nar	me and surname)		Signature
e-mail			
Research center	Phone Number	Date	
Project responsible, wh	no assumes the payment of the	expenses (name and surna	me)

2. General terms and conditions

Specified at SCAC/FOR/0320 Sol·licitud de servei USUARIS and at Normativa general de l'SCAC https://www.uab.cat/ca/servei-cultius-anticossos-citometria/normativa

- 2.1. Processing of personal data: For detailed information see https://www.uab.cat/ca/servei-cultius-anticossos-citometria/qualitat
- **2.2.** Report of results: in each experiment the user will receive a folder with the corresponding cytometry files, sort reports and sort analysis documents.
- **2.3. Protocol for the submission of results:** Results will be saved in the *redscac* server (for UAB users) or will be submitted by e-mail (for external users).
- 2.4. Confidentiality: information regarding analysis done and data obtained will be maintained with strict confidentiality.
- **2.5. Technical consulting after analysis:** Any technical consulting related to the service can be done within a maximum period of 6 months after ending the work.
- 2.6. Protocol for returning samples: Biological samples will be delivered to the client at the end of the process.

SCAC/FOR/0109-03





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	Sorting data	a.u.t.						
	Requested date for sort:							
	3.1. Experiment in	nformation						
	_ Learn	more	about	how	to prepare s	orting samp	oles on o	ur website:
					vei-cultius-antic			
	Cell line name:							
	Cell size in microns if	f known:						
	SAMPLES		Call # in a	Cell # in each # of populations % of target cell # of cells			Minimum # of	
	Tube name		sample		to be sorted	population	desired	cells desired
	CONTROLS		Cell # in	each				
	Tube name		sampl			Comme	nts	
	3.2. Markers Fluorochromes	Antibodi	es/probe	Con	nments			
	Suspension buffer: Collection buffer:							
		Collection puller.						
		3.3. Collection format						
	Bulk:12X75 (cytometry tube)15 mL conical1,5 mL PCR/EppendorfMicrotiter plate:384 well96 well48 well24 well							
_	Other (slides, custom containers, please indicate):							
L								
	3.4. Purpose of so							
ſ	Purpose of sort (sterile culture, RNA extraction, etc.):							
L								
	Special instructions:							

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4. Sample Biosafety information

The cell separation process involves aerosol generation. According to biological agents present in the sample, the aerosols lead a risk for both, the staff, and the environment. Information on the type of samples and potentially infectious agents is critical to the effectiveness of biosecurity measures. Therefore, this form must be fully completed and signed by the principal investigator requesting the use of the Service.

Sample name:					
Cell type:		(e.g., Lymphocytes, P	(e.g., Lymphocytes, PBMC, fibroblast, etc)		
Cell source:		(e.g., mouse, human,	(e.g., mouse, human, non-human primate, etc)		
Sample source:		(e.g., Patient, animal t	(e.g., Patient, animal facility, Blood Bank, Outside Institution source, etc)		
Does the sample contain any known	Yes	List agent:	If yes, provide pathogen registration or biosafety review documentation:		
infectious agent?	No				
Were the cells genetically engineered? (i.e., transduced or transfected with	Yes	List agent:	If yes, provide pathogen registration or biosafety review documentation:		
adenovirus, lentivirus, retrovirus, or other vectors)	No				
Were the cells transformed using any virus? (i.e., SV-40, EBV,	Yes	List agent:	If yes, describe a method for determining that no live virus remains in the culture.		
CMV, HTLV-1, or Herpes saimiri?	No				
Other comments or clarifications:					
Will the sample be fixed before submitting to	Yes	If yes, describe the fix exposure time.	xation protocol, fixative and concentration, and		
the laboratory?	No				