

LABORATORY SERVICE REQUEST- CLASS PLASTICS

Client Info	Report To <i>(Please include contact name and company info.)</i>		Invoice To <i>(If different than Report To info.)</i>		
	Phone	Fax		P.O.	
	Email			Quote	
Test Article Info	Test Article ID <i>(Please use the exact wording you want to appear in the final report.)</i>				
	Quantity	Lot No.	Code		
	Storage Conditions	<input type="checkbox"/> 20 to 25°C	<input type="checkbox"/> 2 to 8°C	<input type="checkbox"/> -16 to -24°C	<input type="checkbox"/> -60 to -80°C
	Controlled Substance	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Schedule	
	Hazardous	<input type="checkbox"/> No	<input type="checkbox"/> Yes	Type of Hazard	
	<i>(Please include MSDS if samples are hazardous. Client will incur charges for disposal of hazards.)</i>				
	List part(s) of the Test Article that should be tested				
	Final intended use/application of Test Article?				
	GLP Stability Testing and Test Article Characterization		To Be Completed by Sponsor and:		
	Completed and:		<input type="checkbox"/> Will be provided during study		
	<input type="checkbox"/> Will be provided during study		<input type="checkbox"/> Will not be provided during study		
	<input type="checkbox"/> Will not be provided during study		<input type="checkbox"/> Will be provided during study		
	<input type="checkbox"/> Will not be provided during study		<input type="checkbox"/> Will not be provided during study		
	Sterility Status		<input type="checkbox"/> Non-Sterile		<input type="checkbox"/> Sterile <i>(Please indicate method)</i>
Can Test Article be cut?		<input type="checkbox"/> Yes		<input type="checkbox"/> No	
Extraction Conditions					
<input type="checkbox"/> 121°C for 1 hour <input type="checkbox"/> 70°C for 24 hours <input type="checkbox"/> 50°C for 72 hours					
Surface Area in cm ² if Known		Thickness			
Surface Area Calculations Completed By					
<input type="checkbox"/> Client <input type="checkbox"/> Consultant <input type="checkbox"/> To Be Completed By PBL <input type="checkbox"/> Via CAD (technical) Drawing <input type="checkbox"/> Other					
Return Test Articles		<input type="checkbox"/> No		<input type="checkbox"/> Yes	
<i>(Client will incur charges for shipping and handling.)</i>					
Service	Regulatory Treatment		<input type="checkbox"/> cGMP <input type="checkbox"/> GLP <input type="checkbox"/> Non-regulatory		
	<i>(GLP will incur an additional fee.)</i>				
	Regulatory Compliance Needed (GLP only):		<input type="checkbox"/> FDA <input type="checkbox"/> European Union <input type="checkbox"/> Other		
	Purpose of Testing:		<input type="checkbox"/> 510K <input type="checkbox"/> IND <input type="checkbox"/> Other		
	Rush <i>(Will incur a 50% surcharge.)</i>		<input type="checkbox"/> No <input type="checkbox"/> Yes		
Do You Want Report Date Confirmation?		<input type="checkbox"/> No <input type="checkbox"/> Yes			
Report Format		<input type="checkbox"/> Paper <input type="checkbox"/> PDF <input type="checkbox"/> Paper and PDF			
<i>(First format NC, \$6.00 for each additional.)</i>					

Service	Archive Options (for Paper Records and Specimens – tissues, blocks and slides)		
	All paper records will be scanned and stored at PBL indefinitely by a system that is validated to comply with GMP and GLP regulations. Paper records and GLP Specimens will be stored by PBL at no charge for the first year after study completion. If no options are selected, default options will take effect. Extended storage will be invoiced annually per Fee Schedule at www.PacificBioLabs.com/archivefeeschedule.asp .		
	Non GLP RPT	GLP RPT	GLP Specimen
	Archive Options		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Discard (after one year) – Non-GLP Default		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Return to Client (after one year) – GLP Default (Shipping charges apply)			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Return Immediately to Client (at study completion) – (Shipping charges apply)			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Extended Storage by PBL (after one year) - Invoiced annually for continued PBL retention.			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Client Default – Previously selected options by Client			

Test Procedure	CLASS PLASTICS TESTS – USP	
	<input type="checkbox"/> Class I	<input type="checkbox"/> Class IV w/7 Day Implant
	<input type="checkbox"/> Class II	<input type="checkbox"/> Class V
	<input type="checkbox"/> Class III	<input type="checkbox"/> Class VI w/7 Day Implant

OTHER TESTS/SPECIAL INSTRUCTIONS

TESTING AUTHORIZED BY (Please sign) _____ **DATE:** _____