

Information Assisting Generation of Pathology Quote and Report

(Please provide as much detail as possible)

Sponsor Information

Sponsor/ Company Name: _____ Study ID: _____
Contact: _____ GLP or Non GLP: _____
Email: _____ Phone: _____

Basic Study Type

Efficacy Species and strain _____
 Model Characterization Duration _____
 Toxicity Treatment Scheme _____

Sample Details (please fill in the number per category)

Animals _____ Groups _____ Tissue per animal _____ Blood samples per animal _____ Sections per tissue to be analyzed _____

Study Design and Study Objective (please include animal and group numbering scheme):

List of Stain

Evaluation Expectations

General

Special Grading Schemes (NASH scoring systems for liver; Tumor Grading) or others:

Qualitative _____
 Semi-Quantitative _____
 Quantitative _____

Data Sets (if not restricted to histopathology)

Gross Clinical Pathology
 Organ Weight Ultrastructural Micrographs
 Histology Others, _____

Reporting

Report Text and Data Tables
 Images
 Travel Required (include location and number of days) _____

Other Information You Wish to Share
