**Advanced Translational Pharmacology and Analytical Chemistry Core**

**Sample/Study Request Form**

**Collaborating PI:**

Name: Click or tap here to enter text. Email: Click or tap here to enter text.

Phone: Click or tap here to enter text.

**Lab Contact:**

Name: Click or tap here to enter text. Email: Click or tap here to enter text.

Phone: Click or tap here to enter text.

**Affiliation**

UNC investigator

UNC investigator + LCCC member

External

**Request a meeting (teleconference or in-person)**

*You will be contacted by Suzie Roth (sroth@email.unc.edu) to set up the meeting.*

**Brief Description of Study:**

Click or tap here to enter text.

**Start Date of Animal Study:** Click or tap here to enter text.

**Treatment Information:**

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| --- | --- | --- |
| **Treatment Arm** | **# Patients in Arm** | **Dosing and Harvest Schedule** |
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**Dosing Information:**

Drug(s): Click or tap here to enter text.

Drug concentration(s) in dosing solution: Click or tap here to enter text.

Drug vehicle: Click or tap here to enter text.

Dose(s): Click or tap here to enter text.

Route of administration: Click or tap here to enter text.

**Samples to Collect:**

Blood Serum Plasma

Anticoagulant: Click or tap here to enter text.

Tumor Liver Spleen Kidney Heart Brain

Lung Muscle White Fat Brown Fat

Other(s): Click or tap here to enter text.

**Samples to be Analyzed by ATPAC:**

Blood Serum Plasma

Tumor Liver Spleen Kidney Heart Brain

Lung Muscle White Fat Brown Fat

Other(s): Click or tap here to enter text.

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| --- |
| Notes/ Drug structure(s)/ Additional information for study: |
| Click or tap here to enter text. |