

**Accession Form – SMRV direct detection (B)
Squirrel Monkey Retrovirus SMRV Diagnostic Service**



Minerva Biolabs GmbH

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Name: _____
Institute/Company: _____
Address: _____

Phone: _____
Fax: _____

Your customer No.: _____
(if known)

Your P.O. No.: _____
(if required)

<i>completed by Minerva Biolabs:</i>	Probe(n) i.O. eingegangen:
Zugangsnummer: _____	Eingangsdatum: _____ ja <input type="checkbox"/> nein <input type="checkbox"/>

Please Note: Minerva Biolabs only accepts biological sample material classified laboratory containment level 1 or 2 (L1, L2) according to the regulations of the German BiostoffV. The offered detection service is for quality control and research purposes only. The service is not to be used for clinical diagnosis or applications involving humans. **No samples are accepted unless Minerva Biolabs receives this signed form.**

Sample preparation for the second testing (only on request by Minerva Biolabs and if the first PCR (A) was positive): Collect 500 µl of cells and cell culture supernatant under sterile conditions. Use 1.5 ml reaction tubes or tubes with screw caps. Elimination of antibiotics is not necessary. The tubes should be labelled properly and sent on cool packs with an overnight service. Please mind local guidelines for shipment of infectious material (e.g. DIN 58956-10). Enclose with all samples a completed copy of this form sheet. Package your samples to protect them from crushing.

Please accept our order for the PCR testing of the following samples

No.	Sample Code	Preparation Date	No.	Sample Code	Preparation Date
1			11		
2			12		
3			13		
4			14		
5			15		
6			16		
7			17		
8			18		
9			19		
10			20		

Minerva Biolabs GmbH

Köpenicker Str. 325

D-12555 Berlin
Germany

Date _____

Signature _____

Please ship your samples to the address given on the left hand side.