UCLA Health System
Pathology & Laboratory Medicine
Translational Pathology Core Laboratory

REQUEST WORKSHEET FOR PARAFFIN BLOCK AND/OR SLIDE

Requested By		PI	
Ext/Phone		Date Requested	
Email		Requested For	
IRB#		IRB Expiration Date	

Note: TPCL operating policies may require that this request be reviewed and approved by our TPCL advisory board prior to this request being fulfilled.

Samples to be anonymized (no IRB required)	☐YES ☐NO	Sample List Attached	☐YES ☐NO
Own Blocks brought in	☐YES ☐NO	Anonymized pathology Report required	☐YES ☐NO

Paraffin Tissue Blocks

Total Blocks: _____

Tissue Type: _____

tumor: _____

normal: _____

Source: ☐TPCL
☐Pathology
☐Both

Cut: ☐H&E Block
☐Unstained Block

Slides

Total # of Slides: _____

Consulting Pathologist: _____

Special Instructions:

LAB USE ONLY BILLING **LAB USE ONLY* BILLING **LAB USE ONLY* BILLING *	
A. Request approved by: Name: _____ Date: _____	
B. ☐Anonymous ☐Coded-TPCL retains ☐Coded-TPCL releases ☐PHI release	
C. PI Signed release received on: Date: _____	
D. Job completed and email sent: Date: _____	
E. Materials picked up by: Name: _____ Date: _____	
F. Original Materials returned by: Name: _____ Date: _____	
Slide / Block request _____	=$
Pathology Report _____	=$
Usage – TPCL _____	=$
Database Search _____	=$