


# ANATOMICAL PATHOLOGY RESEARCH WORK REQUEST

FOR-ANAT-010  
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Prepared by: A. McDonald  
Approved by: T. Leong

<b>RESEARCH, APR</b> <b>APR32803</b>  APR32803	Ext ID( Researcher Name ):	(Lab use) <b>ATTACH</b> <b>LAB NUMBER</b>
	Email:	
	Phone:	

If the project requires the use of human or animal tissue has approval been granted for the use of this tissue by the relevant Austin Health Ethics Committee.

YES / NO / Not Applicable

Ethics Committee number: \_\_\_\_\_

**DETAILS**

SERVICE/ITEM	QUANTITY	PRICE	INSTRUCTIONS	TOTAL
Administration Fee	1	\$28		\$28
Archive Retrieval		\$10		
Grossing		\$6		
Processing and Embedding		\$6		
Cut sections		\$3		
H&E		\$3		
Special stains		\$20		
IHC		\$45		
Complex IHC		\$85		
Other (specify)		TBA		

**Bill to:**

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**Institution**

**Account code (if ONJCRI)**

**Address**

Any research enquires can be directed to: [DLPathologyResearch@austin.org.au](mailto:DLPathologyResearch@austin.org.au). You will receive an email or phone call when your research is ready for collection from Anatomical Pathology, HSB level 6.