

IMMUNE MONITORING LAB MOLECULAR ASSAYS WORK ORDER

Internal



Date/Time Received _____ Contact Name _____

Investigator _____ Contact Phone & Email _____

Project ID # _____ Contact Location _____

Authorized Signature _____ Project Info _____

Assay:

Standing Order:

Samples:

Notes:

For Resource Use

Date/Time Started _____ Date/Time Completed _____

Charge Code	Description	UOM	Quantity
IMS10541	TCRB Spectrotyping – Gene Scan	EA	
IMS10542	Clonal TCRB Anal w/o Seq	EA	
IMS10543	Clonal TCRB Anal – Full	EA	
IMS10544	Clonal TCRB Anal cDNA prov	EA	
IMS10545	T Cell Recept Assay Dev	EA	
IMS10546	TCRB Tracking	EA	
IMS10551	TREC Assay	EA	
IMS10561	Technician Time	HR	
IMS10562	Data Analysis	HR	
IMS10563	Consulting	HR	