

Job number:

Date:

## Sample information form for analysis by mass spectrometry

Prior to the sending of the samples to OMX GmbH this sample information form must be completed, signed and faxed 0049-(0)8153-9087854.

Name: \_\_\_\_\_ Institute/Company: \_\_\_\_\_

Address: \_\_\_\_\_

Tel/Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

### a) Sample information for proteins stained with Coomassie Blue:

Organism: \_\_\_\_\_

Detergents used during sample preparation: \_\_\_\_\_

Reduction and alkylation performed:  yes  no

Your Sample ID:				
Quantity (ng or pmol)*				
Molecular mass*				
Suggested identity				

\* Estimated values from gel spot.

### b) Health and safety information:

Do samples contain components that are:

	Yes	No	If "Yes" is ticked, please specify level of risk
Toxic	<input type="checkbox"/>	<input type="checkbox"/>	
Carcinogenic	<input type="checkbox"/>	<input type="checkbox"/>	
Biologically active	<input type="checkbox"/>	<input type="checkbox"/>	
Corrosive	<input type="checkbox"/>	<input type="checkbox"/>	
Teratogenic	<input type="checkbox"/>	<input type="checkbox"/>	

Please specify if special waste disposal is required: \_\_\_\_\_

The submitter guarantees that samples are not radioactive, do not require a biohazard facility and contain no living organisms or prions, prion precursors or related compounds.

### c) Gel image:

Please send a scanned image of the gel and indicate sample position including an appropriate molecular mass standard to [research@omx-online.com](mailto:research@omx-online.com). To prevent you from unnecessary expenses, our service facility will evaluate the given information about the sample spot to predict the prospects of a successful analysis and contact you in case of difficulties.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_