

Clinical Trial Histology Service Request
MUSC Department of Pathology and Laboratory Medicine

THIS SECTION TO BE COMPLETED BY REQUESTOR

Protocol Title: Request Date: _____
 Sponsor: _____ Protocol #: _____ IRB#: _____ CTO# (HCC studies): _____
 PI Name: _____ PI Dept: _____ PI Phone: _____
 Study Coord Name: _____ Study Coord E-mail: _____ Study Coord Phone/Pager: _____

Special Instructions: Study Type:
 Corporate
 Non-Corporate

THIS SECTION TO BE COMPLETED BY HISTOLOGY

| Service | Unit | # Units | Unit Cost | Total Charge |
|--|--|----------|--------------------------------|---------------|
| Tissue Preparation | | | | |
| Tissue prep and embed in paraffin | Block | | \$38.52 | \$0.00 |
| Tissue prep and embed in OCT | Block | | \$38.74 | \$0.00 |
| Cut and mount Paraffin/OCT section on slide | Slide | | \$11.25 | \$0.00 |
| Block recut/facing charge | Block | | \$11.75 | \$0.00 |
| Thick, Scroll or Punch section for RNA/DNA analysis | Slide | | \$70.50 | \$0.00 |
| Staining | | | | |
| Hematoxylin and eosin (H & E) | Slide | | \$5.41 | \$0.00 |
| Immunostain (labor cost per batch + unit cost per slide) | # Batches: 1 Labor cost per batch: \$564.00 | Slide | \$9.15 | \$0.00 |
| Special Stains | Periodic Acid Schiff | Slide | \$18.21 | \$0.00 |
| | Oil Red O | Slide | \$16.59 | \$0.00 |
| | Picro Sirius Red | Slide | \$16.59 | \$0.00 |
| | Luxol Fast Blue | Slide | \$18.94 | \$0.00 |
| | Massons Trichrome | Slide | \$30.61 | \$0.00 |
| | Bielschowski | Slide | \$33.28 | \$0.00 |
| Other: | | Slide | \$0.00 | \$0.00 |
| Other Services | | | | |
| Block/Slide retrieval from archive | Hourly Rate: \$141.00 | Minutes | \$2.35 | \$0.00 |
| Other technical assistance | Hourly Rate: \$141.00 | Minutes | \$2.35 | \$0.00 |
| Other administrative assistance (IRB paperwork, report searches, etc .) | Hourly Rate: \$141.00 | Minutes | \$2.35 | \$0.00 |
| Pathologist Review | | Flat Fee | \$300.00 | \$0.00 |
| Expedited pathology review for clinical trials | | Flat Fee | \$300.00 | \$0.00 |
| Other Svc: | | | | \$0.00 |
| | | | Total | \$0.00 |
| | | | Discount % | |
| | | | TOTAL COST PER PATIENT: | \$0.00 |

Submit this form to:
 Histochemical Core Lab
 Phone: 792-5648 • Fax: 792-4157 • email: histocore@muscu.edu