

ANALYSIS REQUEST FORM (Health & Pharmaceuticals)

Client: _____ Clie: _____ nt number: _____
 Contact: _____ Project: _____ number: _____
 Address: _____ Project: _____
Chemical testing and sub-contracting
 Sub-project: **Heavy metals testing, NHP and chemical testing**

Phone: _____ Contact: _____ Manon Beaudry, ext. 5157
 E-mail: _____ manonbeaudry@labenvironex.com
 _____ suzanneperron@labenvironex.com

TO BE COMPLETED BY THE SENDER

Purchase order number: _____ Certificate of analysis: French English
 Method: USP <61> USP <2021>, <2022> USP <1231> Other (specify): _____
 Sampled/Fabricated on: _____

| Sample Number (Laboratory use only) | Please Fill Sample Identification Here and Check Requested Analysis | TMC (swab) | YM (swab) | TMC (RODAC plates) | YM (RODAC plates) | TMC (AIR) | YM (AIR) | Escherichia coli (AIR) | Pseudomonas aeruginosa(AIR) | Staphylococcus aureus(AIR) | Other |
|--|---|------------|-----------|--------------------|-------------------|-----------|----------|------------------------|-----------------------------|----------------------------|-------|
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Shipping date: _____ By: _____
 Comments: _____