

REGISTRATION FORM FOR FLOW CYTOMETRIC CELL SORTING

Only samples of biosafety level (BSL) 1 and 2 are allowed to be sorted in the FCF. Please submit the completed form at least 48 hours prior to the sort to Romain Bedel at romain.bedel@unil.ch (Epalinges site) or Danny Labes at danny.labes@unil.ch (Agora site). One form per sample type (same genotype, staining, biosafety level) should be submitted. Biological or technical replicates can be described in the same form.

1. Client information

First name, Last name		Billing address	
E-mail			
Phone number			
Group leader (PI)			
Organisation			

2. Reservation details

--

3. Sample specification

Species		<input type="checkbox"/> Primary cells	<input type="checkbox"/> Cell line	Details (e.g. cell line name, tissue preparation)	
Sample containing potential pathogens	<input type="checkbox"/>	<i>If yes, please specify:</i>			
Sample genetically modified	<input type="checkbox"/>	<i>If yes, please specify:</i>			
Biosafety level		Additional Info			
Number of samples		Cell number per sample	*10 ⁶	Cell concentration	*10 ⁶ /ml

4. Staining

Antibody specificity	Fluorochrome	Antibody specificity	Fluorochrome
DNA/RNA staining		Fluorescent proteins	
Live/Dead staining		Other fluorescent compounds	

5. Sort parameters

Temperature during sort		Downstream application	
Requirement for sterility		(e.g. RNAseq, cell culture, western blot)	

6. Target populations (If available attach the sorting scheme including FCS/SSC, fluorescence patterns and gating hierarchy)

	% of target cell population in sample	# cells needed after sort	Population description (e.g. CD45+ CD3+ CD4+ CD25+ CD127- CD8-)	Collection into
Population 1				
Population 2				
Population 3				
Population 4				
Population 5				
Population 6				