



Quality Antibody Production Since 1960

Polyclonal Antisera Request Form

Pocono Rabbit Farm & Laboratory, Inc.

666 Dutch Hill Road, PO Box 240, Canadensis, PA 18325
 Phone: (800) 622-6381 Fax: (570) 595-9277
 antibody@prfal.com www.prfal.com

Contact Name _____ PI Name _____ Institution _____

PO Number (include date valid and amount) OR CC Number & Exp. Date _____

ASSURANCE STATEMENT PRF&L *must* have this signed assurance before initiating your project.

I give assurance that *no biohazardous or radioactive materials, toxic, carcinogenic, infectious, or transmissible agents* have been submitted to PRF&L for injection into animals. The animals injected are owned solely by PRF&L. However, all of the serum and products obtained from the animals will be the property of the undersigned. I assure that the information in this form is fully and accurately presented and that I have read and understood PRF&L's disclaimer (www.prfal.com/disclaimer.htm). The USDA and NIH require that assurance be given that this request does not unnecessarily duplicate previous experiments.

Signed _____ Date _____

HOST SPECIES	NUMBER PER ANTIGEN	TOTAL NUMBER REQUIRED ¹	PREIMMUNE BLEED SIZE ²
RABBIT			
GUINEA PIG			
CHICKEN			
GOAT			
SHEEP			
RAT			
MOUSE			

PREIMMUNE SCREENING SERVICE- If background titers that may be present in normal sera in species that you choose for antibody production is a concern, you may select our optional Preimmune Screening Service for an additional charge. Please contact us for availability and details of this service.

SERA STORAGE AND SHIPPING CONDITIONS

Sera will be sent frozen on dry ice unless indicated below.

- Store sera at +4°C and ship with ice packs
- Store sera at +4°C and ship at room temperature (lowest shipping cost)
- Add 0.025% Sodium Azide to sera

1 The number should equal the number of species/antigen times the number of antigens.
 2 Two size bleeds are offered for rabbits **large 15ml** and **small 4ml**; one size for guinea pigs **4ml**; chickens **10ml** (also be sure to indicate how many **preimmune eggs** should be collected); there are three size bleeds for goats and sheep **large 200ml**, **small 60ml**, and **test 4ml**; rats have one size **0.5ml**; and mouse preimmunes are **0.2ml**. If no preimmune serum is required indicate so by stating "None". Please note prebleed volumes are approximate.

Please complete each box as applicable. Please contact us if you need advice on how to complete this section.

ANTIGEN NAME Limit antigen names to 10 characters or less			
NUMBER OF ANIMALS			
AMT SENT (mg) ie - 10 X 0.1ml @ 0.1mg ea			
CONCENTRATION (mg/ml)			
BUFFER			
APPROX PURITY %			
MOLECULAR WEIGHT			
HUMAN/ANIMAL HEALTH HAZARD	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___
ADJUVANT (default = Freund's)			
PROTOCOL (default = Peptide)			
CAN YOU PROVIDE MORE ANTIGEN?	Yes ___ No ___	Yes ___ No ___	Yes ___ No ___
Ag. STORAGE TEMP (default = +4°C)	4°C ___ -80°C ___	4°C ___ -80°C ___	4°C ___ -80°C ___

ADDITIONAL INFORMATION

To assist you with your project goals, it would be helpful to know why you are producing custom antibodies. You may indicate any special antigen handling, storage instructions, precautions, or other procedures desired.