

For Lab Use Only:

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## W.M. Keck Center for Cancer Gene Therapy Vector Core Laboratory

### Request for Recombinant Adenovirus

**Please read the attached guidelines before completing Adenovirus Service Request Form. Failure to read and understand these guidelines and/or failure to provide correct and complete information will result in the return of this form. Give all requests to either Allan Prejusa or Trupti Mehta, phone: (713) 792-8905.**

Name of Requestor (Print)	Date of Request	Date Required
Virus requested		Batch ID
Total Virus Required		Concentration

<b>Attach appropriate approval forms:</b>	<b>Source of funding:</b>	<b>Are animals involved?</b>
Material Transfer Agreement <input type="checkbox"/>	Federal <input type="checkbox"/>	Yes <input type="checkbox"/>
IBC <input type="checkbox"/>	Non-Federal <input type="checkbox"/>	No <input type="checkbox"/>
IACUC <input type="checkbox"/>	Other <input type="checkbox"/>	

Principal Investigator (Print)	Department
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Grant Name & Award No.	IBC Approval Date
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Company Center (to be charged)	Authorized Signature
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#	Adenovirus Services	Amount	Price	Quantity	Total Cost
1	Whole production (includes production amplification, CsCl banding, RCA assay, endotoxin assay, TCID50 assay)	1 batch	\$1300		
2	Glycerol stock prep (includes RCA determination) 1 ml @ 10 <sup>12</sup> particles/ml	1-4 aliquots	\$250/aliquot		
		> 5 aliquots	\$210/aliquot		
3	Production Amplification (50 X 150 mm plates)	50 plates/batch	\$500		
4	CsCl banding of provided lysate	1 batch	\$280		
5	Plaque Assay	1 cell line	\$220		
6	RCA determination	1 virus	\$300		
		2-4 viruses	\$246/virus		
7	Endotoxin Assay	1 virus	\$170/virus		
8	TCID50 Assay	1 virus	\$170/virus		
9	<i>Special Processing</i>		\$100		
10	<i>Pre-production expansion</i>		\$100		

SubTotal	
Adjustments	
<b>TOTAL</b>	

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### Recombinant Adenovirus Request Guidelines

Prior to the submission of a request for recombinant adenovirus, each requestor must read and adhere to the following guidelines:

1. All requests should be given to Allan Prejusa or Trupti Mehta, phone: (713) 745-4620.
2. A separate form should be filled out for each virus requested.
3. Please indicate the minimum amount of virus required based on either total number of viral particles (O.D.) and/or number of infection particles (plaque forming units). Approximately 30% more will be given to allow for loss during pipetting, etc.
4. All virus will be supplied in frozen form unless otherwise requested. All virus should be stored frozen at -80°C and diluted in appropriate buffers, e.g. PBS, just prior to use. Avoid freezing diluted virus, or repeatedly freezing/thawing virus as a significant loss of viral titer will occur.
5. If a large amount of vector is requested (> 1 ml of concentrated vector ( $1\sim 2 \times 10^{12}$  particle/ml)), please notify the Vector Core one month prior to the date of vector being provided.
6. **Production of new vectors requires 6 weeks prior to the date of the vector being provided. All new vectors must be approved by the Institutional Biosafety Committee before production begins in the Vector Core Laboratory.**