Project ID: _____

GCC CENTER FOR COMPREHENSIVE
PK/PD & FORMULATION

GCC Center for Comprehensive PK/PD & Formulation (CCPF)

For bioanalysis services, please list sample information in the table below.

Biological Sample Information Form

This information will be kept confidential

Please be as complete and succinct as possible; indicate if the information is not available or not applicable to your request. Indicate in the check boxes any information you do not wish to share with our contractors.

Project Name:				
Sample Species:				
☐ Human	☐ Rat	☐ Mice	☐ Other, specify:	
Sample type:				
☐ Blood	☐ Plasma	☐ Serum	☐ Urine	☐ Tissue
# of samples:				
Sample amount:	☐ mg	☐ mL		

PROVIDE A SUMMARY OF EXISTING PRECLINICAL DATA (use of tables and/or figures is encouraged).

In Vitro Data: Provide a brief summary of relevant in-vitro data. Include methods, biological and physical characteristics and effective titer and concentration information. Indicate if not available.	
Pharmacokinetic Data: Provide a brief summary of relevant pharmacokinetic data. Indicate if data are not available.	
Efficacy Data: Provide a summary of efficacy data. May include unrelated efficacy models or previous studies using the requested animal efficacy model. Identify the reason for any repeat assays. Indicate if data are not available.	
Toxicity Data: Provide a brief summary of existing toxicity data on tested models. Include dose/timing, concentration/titer, positive controls, results and other relevant details. Indicate if data are not available.	