

Core C February 2006
MRI Imaging Request Form

PI Approval: _____ Account #: 0200 _____

Contact Information:

Date Ordered: __/__/____ Date Wanted: __/__/____ Date Completed: __/__/____

Allow at least three weeks of advance notice!

Name: _____ VM Ext.: _____

E-mail: _____

Principle Investigator Lab: _____

Number of mice:

Description (please include for example organ, location of tumors, age of mice etc.):

Comments or Additional Information:

Fees:

COBRE users \$250 per day

Other users \$400 per day

Commercial users \$600 per day

Dependent on the protocol about 4-6 mice can be imaged per day.

Long term housing for mice will be added on the MRI fee for out of house users (65c per diem).