

**SAMPLE WORKSHEET  
VET AXCEL CHEMISTRY ANALYZER**

PI Name \_\_\_\_\_ Department \_\_\_\_\_

Funding Source: PPG \_\_\_\_\_ COBRE \_\_\_\_\_ Grant # \_\_\_\_\_

Assays Requested: \_\_\_\_\_

Sample Type (circle one): Serum Plasma Urine Species: \_\_\_\_\_

Calculated Sample Need: \_\_\_\_\_ Dead Volume Included: \_\_\_\_\_

Samples must be arranged on rack in order listed below. Samples can NOT contain radioisotopes.  
Indicate if samples apt to have high (off scale) values. Keep a copy of this worksheet for your own records.

Assay Lab Only	Sample ID	Volume	Comments
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____
5	_____	_____	_____
6	_____	_____	_____
7	_____	_____	_____
8	_____	_____	_____
9	_____	_____	_____
10	_____	_____	_____
11	_____	_____	_____
12	_____	_____	_____
13	_____	_____	_____
14	_____	_____	_____
15	_____	_____	_____

**ASSAY LAB ONLY**

Date Received: \_\_\_\_\_

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Date Assayed: \_\_\_\_\_

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**Required Dead Volume:  
(For calculated sample need)**

10 µl  
(for <150 µl)

60 µl  
(for >150 µl)