BYU RIC Facility Services - Flow Cytometric Analysis

Submitter's Name:_____ Date:_____

Lab:_____ Contact Phone:_____

Please list all samples. Include information on the stain(s) used in each sample, cell type of each sample & other notes about the sample that may be useful.

Tube #	Fluorochrome	Cell Type	Notes

Modification Ref. File_____ Page #_____

Cover page for Flow Analysis

Note: You should save a blank copy, a template copy, and data copies for your records