



1705 ENTERPRISE STREET • ATHENS, TEXAS 75751

TEST REQUEST FORM

| |
|---|
| P. O. # Required Before Final Report Issued |
| P. O. # _____ |

Send Technical Report To:

Invoice:

Phone: _____

Sample description (use exact wording desired on final report)

Your lot # _____

Perform the following test(s) on this sample:

| TEST QTY. | STERITEC CODE# | MICROBIOLOGY | |
|-----------|----------------|---|--------------------------------|
| | BF001 | Bacteriostasis/Fungistasis | USP , Per Organism |
| | | Bioburden (100-800 ml wash) | Standard Plate Count |
| | BB001-100 | Total Aerobic | |
| | BB001-200 | Total Aerobic Plus Spores | |
| | BB001-500 | Total Anaerobic | |
| | BB001-700 | Total Fungi Per Sample | |
| | | Bioburden (100-800 ml wash) | Filtration Method |
| | BB001-300 | Total Aerobic | |
| | BB001-400 | Total Aerobic Plus Spores | |
| | BB001-600 | Total Anaerobic | |
| | BB001-800 | Total Fungi Per Sample | |
| | | Sterility Tests | Media Volume 100-800 ml |
| | ST001-Cust | Custom Testing Available | |
| | ST001 | Forty Product, Immersion | 14 days incubation |
| | ST002 | Twenty Products Plus Ten Spore Strips, Immersion | 10 days incubation |



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|--|-----------|---|--|
| | ST003 | Twenty Products Plus Ten Spore Strips, in situ | 10 days incubation |
| | ST004 | Ten Products, Immersion | 7 days incubation |
| | ST005 | Ten Products, in situ | 7 days incubation |
| | ST008 | Ten Products Plus Ten Spore Strips, Immersion | 7 days incubation |
| | ST006 | Membrane Filtration | 7 days incubation (ml varies) |
| | ST007 | Spore Strips, Immersion | 7 days incubation (EO) (Steam) |
| | | Shortened BI Incubation Studies Available | |
| | | Supplemental Sample Testing | |
| | SST01-105 | Biological Indicators | |
| | SST01-107 | Gram Stains | |
| | SST01-108 | Product Inoculation | |
| | SST01-109 | Contact Plates (10, plus report) | |
| | SST01-110 | Settling Plates (10, plus report) | |
| | PA001 | Device Particulate Analysis | |
| | | Spore Strip Population | |
| | PV001-101 | Verification Count | |
| | | LAL Pyrogen Analysis (Gel Clot Method) | |
| | PL001-101 | Extract of Device – Test, Positive Negative and Inhibition Controls | |
| | LAL-VAL | Medical Device Validation Program (USP) | |
| | EO001-101 | Ethylene Oxide Residual Analysis (EO, ECH) | |
| | | Physical Test (Pull Test, Peel Strength Test, etc.) | |
| | | Sterilization Consulting and Testing | |

Comments:

Signed: _____ Date: _____

SOPRQ419/096A