**SOLICITUD ANÁLISIS NANOQUANT**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **DATOS DEL SOLICITANTE** *(cubra los datos en mayúsculas)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Nombre:** | | | | | | ……………………………………………. | | | | | | | | | | | | **Apellidos:** | | | | …………………………………………………….………. | | | | | | | | | |
| **Grupo investigación:** | | | | | | | | | | | | ……………………………………………………………………………………..…………………… | | | | | | | | | | | | | | | | | | | |
| **Responsable grupo investigación:** | | | | | | | | | | | | ……………………………………………………………………………………..…………………… | | | | | | | | | | | | | | | | | | | |
| **Departamento/Institución/Empresa:** | | | | | | | | | | | | ……………………………………………………………………………………..…………………… | | | | | | | | | | | | | | | | | | | |
| **Dirección:** | | | | | | | | | | | | ……………………………………………………………………………………..…………………… | | | | | | | | | | | | | | | | | | | |
| **Teléfono:** | | | ……………………………………………….………. | | | | | | | | | | | | | | | **e-mail:** | | | | …………………………………………….………………. | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **DATOS DE LA SOLICITUD** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Fecha propuesta para la realización del análisis:** | | | | | | | | | | | | | | | | | | | ………………………………………………………………………………… | | | | | | | | | | | | |
| **Hora inicio análisis:** | | | | | | ……………………………………………. | | | | | | | | | | | | **Hora fin análisis:** | | | | | | | ………………………………………… | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **DATOS DEL ANÁLISIS SOLICITADO** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | ***CUANTIFICACION ACIDOS NUCLEICOS EN PLACA NANOQUANT*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Tipo de muestra:** | | | | |  | | | ADN cadena doble | | | | | | |  | | ADN cadena simple | | | | | | |  | | | ARN | |  | | Otras |
| **Otros tipos de muestras:** | | | | | | | | | | ………..…………………………… | | | | | | | | **Número de muestras:** | | | | | | | ……………………………………….… | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | ***CUANTIFICACION ENSAYOS EN PLACA MULTIWELL MEDIANTE ESPECTROFOTOMETRIA*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Nombre del ensayo:** | | | | | | | …………………………………………………………………………………………………………………………………. | | | | | | | | | | | | | | | | | | | | | | | | |
| **Número de placas:** | | | | | | | …………………………………………………………………………………………………………………………………. | | | | | | | | | | | | | | | | | | | | | | | | |
| **Características generales:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **λ del análisis (rango: de 230 a 1000nm):** | | | | | | | | | | | | | | ………………………………………………………………………………………………………… | | | | | | | | | | | | | | | | | |
| **Tipo de placa multiwell utilizada:** | | | | | | | | | | | | | | ………………………………………………………………………………………………………… | | | | | | | | | | | | | | | | | |
| *(Consultar especificaciones del equipo)* | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| **Necesidades específicas:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | **λ de referencia (rango: de 230 a 1000nm):** | | | | | | | | | | | | | | | ………………………………………………………………………………………. | | | | | | | | | | | | | | | |
|  | **Agitación:** | | | | | | | | Tiempo: | | | | | | | ………………………………………………………………………………………. | | | | | | | | | | | | | | | |
|  | **Incubación (rango de 5 a 42ºC):** | | | | | | | | | | | | Temperatura: | | | | | | | …………………. | | | | Tiempo: | | | | | | ………………… | |
|  | **Cinética:** | | | Nº de ciclos: | | | | | | | …………………. | | | | | Duración: | | | | | …………………. | | | | | Intervalo: | | | | ………………… | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **RESULTADOS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| El resultado del análisis se obtendrá en un **archivo de excel** que será enviado a la dirección de correo electrónico que consta en los datos del solicitante. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Observaciones / Comentarios:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Firma responsable petición:** | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| **Nombre responsable petición:** | | | | | | | | | | | | ……………………………………… | | | | | | | | | | | **Fecha:** | | | | | …………………………………… | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Nota del Biobanco:***  ***El/la solicitante se compromete a cumplir las siguientes normas:***   1. *Planificar los experimentos tras recibir la respuesta con la resolución a esta solicitud.* 2. *Cumplir con el horario acordado para la realización del análisis.*   *En caso de previsión de incumplimiento del horario establecido, ponerse en contacto lo antes posible con el personal del Biobanco para coordinarse de manera que no se interfiera con su normal funcionamiento.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

***A cubrir por el Biobanco en el momento de la recepción.***

***Fecha y recepción:*** *…………………………...…………………….* ***Responsable Gestión:*** *……………………….……………………………………….*