LIFESOUTH
Community Blood Centers

Request for Flow Cytometry Testing

The sample ID provided below must match the ID on the sample. Pre-collection samples require two patient identifiers. The minimum volume required for Flow testing is 500 µL. Contact the lab at (352) 224-1787 with special requests. Send completed forms to qc@lifesouth.org prior to sending samples.

Date:	Expected Time of Arrival:
Requesting Facility:	Contact Name:
Phone Number:	Send Results to (Fax or Email):

Sample Information

Sample ID	Unit Volume (mL)*	Sample Type	Sample Source (Patient weight is required for pre-collection samples.)	Testing Requested
		☐ Fresh ☐ Frozen ☐ Fixed**	☐ Cord Blood ☐ Leukopak ☐ Mobilized HPC ☐ Isolation ☐ Whole Blood (pre collection); patient weight (kg):__________	☐ CD34/45 ☐ TBNK ☐ Viability Only ☐ Cell Count (hematology analyzer) ☐ STAT*** ☐ Other:
		☐ Fresh ☐ Frozen ☐ Fixed**	☐ Cord Blood ☐ Leukopak ☐ Mobilized HPC ☐ Isolation ☐ Whole Blood (pre collection); patient weight (kg):__________	☐ CD34/45 ☐ TBNK ☐ Viability Only ☐ Cell Count (hematology analyzer) ☐ STAT*** ☐ Other:
		☐ Fresh ☐ Frozen ☐ Fixed**	☐ Cord Blood ☐ Leukopak ☐ Mobilized HPC ☐ Isolation ☐ Whole Blood (pre collection); patient weight (kg):__________	☐ CD34/45 ☐ TBNK ☐ Viability Only ☐ Cell Count (hematology analyzer) ☐ STAT*** ☐ Other:
		☐ Fresh ☐ Frozen ☐ Fixed**	☐ Cord Blood ☐ Leukopak ☐ Mobilized HPC ☐ Isolation ☐ Whole Blood (pre collection); patient weight (kg):__________	☐ CD34/45 ☐ TBNK ☐ Viability Only ☐ Cell Count (hematology analyzer) ☐ STAT*** ☐ Other:
		☐ Fresh ☐ Frozen ☐ Fixed**	☐ Cord Blood ☐ Leukopak ☐ Mobilized HPC ☐ Isolation ☐ Whole Blood (pre collection); patient weight (kg):__________	☐ CD34/45 ☐ TBNK ☐ Viability Only ☐ Cell Count (hematology analyzer) ☐ STAT*** ☐ Other:
		☐ Fresh ☐ Frozen ☐ Fixed**	☐ Cord Blood ☐ Leukopak ☐ Mobilized HPC ☐ Isolation ☐ Whole Blood (pre collection); patient weight (kg):__________	☐ CD34/45 ☐ TBNK ☐ Viability Only ☐ Cell Count (hematology analyzer) ☐ STAT*** ☐ Other:
		☐ Fresh ☐ Frozen ☐ Fixed**	☐ Cord Blood ☐ Leukopak ☐ Mobilized HPC ☐ Isolation ☐ Whole Blood (pre collection); patient weight (kg):__________	☐ CD34/45 ☐ TBNK ☐ Viability Only ☐ Cell Count (hematology analyzer) ☐ STAT*** ☐ Other:
		☐ Fresh ☐ Frozen ☐ Fixed**	☐ Cord Blood ☐ Leukopak ☐ Mobilized HPC ☐ Isolation ☐ Whole Blood (pre collection); patient weight (kg):__________	☐ CD34/45 ☐ TBNK ☐ Viability Only ☐ Cell Count (hematology analyzer) ☐ STAT*** ☐ Other:

**Record "N/A" for pre-collection sample.* ***Fixed samples cannot be assayed for viability.* ****STAT charges may apply.*

For LifeSouth Use Only:

Date/Time Received:	Tech Initials:

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Form Version History

Effective Date	Significant Changes

02 Apr 2026	• Added instructions stating:
	  ○ The sample ID provided below must match the ID on the sample.
	  ○ All pre-collection samples require two patient identifiers.
	• Added the **patient weight (kg)** field to the Whole Blood sample source option, including a note that patient weight is required for pre-collection samples.
	• Made additional minor changes.

28 Jan 2025	Updated the SOP reference in the footer to ***HPM.1.4***.
01 Oct 2024	• Added a note to the Unit Volume (mL) column stating to record "N/A" for pre-collection sample. • Updated the note symbol for the Fixed sample type checkboxes. • Added STAT checkboxes to the Testing Request column and a note stating that STAT charges may apply.
12 Sep 2023	• Added field for Expected Time of Arrival. • Added more sample types. • Added Unit Volume column. • Adjusted testing requested fields. • Updated "Send to qc@lifesouth.org" statement.
07 Mar 2023	Updated footer, previously ***FLOW.3.8***.
26 Apr 2022	• Updated the logo. • Added instructions to send completed requests to qc@lifesouth.org. • Moved the **Date** field to the top of the form. • Added more table rows to the Sample Information section. • Added a For LifeSouth Use Only section to the bottom of the form, including the **Date/Time Received** and **Tech Initials** fields.
05 Oct 2021	New form.