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Institut für Laboratoriumsmedizin,  
Klinische Chemie und Molekulare Diagnostik



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ZLG-AP-252.10.65-01

## Order form for laboratory diagnostics for clinical studies and research projects

for external institutions

Project name: .....

Short description of the project (if necessary please use an additional sheet):

Study duration: from ..... till .....

Principal investigator (PI): .....

Institution: .....

Address: .....

Phone: ..... Mail: .....

Study coordinator: .....

Phone: ..... Mail: .....

### Study type:

- contract research
- scientific cooperation with ILM (Please attach the concept of the project and the study protocol)

Note: Before the initiation of the study, the allocation of the work during the study performance should be pre-discussed and agreed by the upper management of the ILM. ILM supports the project with standardized and research-based laboratory analysis and scientific support, whereas principal investigator is in charge of study design, selection of the method, study performance, and the analysis of the results. Responsible person(s) in ILM will share the authorship in the publication according to the rules of the German Research Society (DFG) for good scientific practice.

### Ethics committee approval:

Yes ethics committee reference number:

### Request for QM-documents:

- Certificate of external quality assessment test
- Reference ranges
- CV of institute director

### Study organization (Please mark the necessary items to be requested to ILM):

- Design and preparation of lab kit for taking blood/urine/saliva samples
- Design of laboratory request form (LRF)
- Design of barcodes
- Design of lab manual and/or flowchart
- Other: .....

## Laboratory Analysis

Specimen:

Human                       Animal (Species: .....)

Cell culture                       Other

Note: The analytical methods and their reference ranges are generally specified for human specimen only.

Parameter	Material (e.g. serum, EDTA-plasma, etc.)

Sample storage (-80 °C) needed: if yes, duration of sample storage: .....

Sample shipment:             single sample transfer to ILM (Monday - Friday from 8 am to 5 pm)

transfer as batch at the end of the study

Estimated number of total analyses:

- Number of subjects planned: .....

- Samples per subject: .....

### Immediate notification in case of pathological values expected?

If yes, please enter the name of a contact person and the telephone number: .....

### Transfer method of lab report:

per post                       per fax                       e-mail per lab report (pdf)                       data query (additional costs)

Address for lab report transfer: Name: .....

Street name, postcode, city: .....

Fax: ..... E-Mail: .....

Note:

1. The processing time of this application is up to 6 weeks.
2. Cost quotation can only be prepared on the basis of the complete order form.

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Below here will be filled out by ILM

Study feasibility     Yes                       No

If yes:

1. Agreement preparation / Responsible person in ILM: .....
2. Scientific supervision in ILM: .....
3. Comments: .....