

MASS SPECTRAL ANALYSIS REQUEST
FILL IN THIS PAGE COMPLETELY

BioAnalytical Mass Spectrometry Facility
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Submit all samples in properly labeled, closed containers. Items marked with an asterisk are required information.

*Submitted by _____

*Hazards _____

*Telephone _____

*Solubility	Yes	No	Unknown
acetone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
acetonitrile	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
methanol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

E-mail _____

return results by e-mail as Word file

*Sample ID _____

*Other solvents _____

*Faculty advisor/Department _____

*If sample is in solution
solvent _____ conc. _____ volume _____

*Project number _____

*If sample is not in solution, list amount submitted _____

*Document ID _____

Date _____ Time _____

Other compounds present (salts, buffers, etc.)

Structure or sequence (if unknown, give possibilities or source)

*Special handling or storage (standard storage at -20C)

Comments

*Molecular formula _____

*Nominal (integer) molecular weight _____

for MW<3000, use mass of most abundant isotope (e.g., Br=79)

for MW>3000, use average mass (e.g., Br=80)

Analyses requested (check all boxes that apply)

Routine analyses (MW <5000 Da)

- EI
- CI
- FAB
- ESI/APCI
- MALDI
- GC-MS (available only with EI or CI)
- Accurate mass analysis

Special analyses (requires consultation with facility staff)

- LC-MS
- LC-MS/MS
- MALDI-MS/MS
- LC-MALDI
- Nano ESI
- High mass analysis (MW > 5000 Da)
- Quantitation
- 2D LC*
- O-MALDI*
- MSn*

*under development

Lab use only

Sample location _____

Personal time _____

Instrument time _____