

NATIONAL INSTITUTE OF PHARMACEUTICAL EDUCATION & RESEARCH

Sector-67, S.A.S. Nagar, Mohali.
Central Instrumentation Laboratory
Service Request Form
LCMS - LTQ

		Form No	
Name		Date	
Department		Name of Faculty/Guide	
Institute / Industry			
Complete Address			
Email address		Mobile No	

S. No	Sample Code	Pure	Reaction Mixer	LCMS	MS	Expected Range or Mass or M+H ⁺ Or M+Na ⁺	Solubility (MeOH, ACN, H ₂ O)	Mobile Phase (LCMS)	Flow Rate	λmax	Run Time	Ionization Mode APC/ESI
1												
2												
3												
4												
5												

Maximum limit 5 samples per requisition form (Strikeout blank lines).

The sample concentration should be less than 500 µg/ml (500µl).

The samples should be prepared in HPLC grade solvents.

Sample preparation	Please provide sample filtered through 0.45 micron membrane filter only.
Nature of Sample/Any special storage condition required	Lachrymatory, Explosive, other
Any additional Information	

It is certified that sample is not a reaction mixture and does not contain non-elutable inorganic impurities.

Signature of Authority

For Office Use (Internal / Outside Samples)

Date of sample received	Date of sample analyzed	Date of results delivered	Log Book Entry No.	Analyst

For Outside Sample(s)

Entry No.	Receipt / Invoice No.	Amount (₹)	Date