

## UAB DEPARTMENT OF PATHOLOGY

### Neuropathology Service Center

**THE CELLULAR AND MOLECULAR NEUROPATHOLOGY CORE IS NOW THE NEUROPATHOLOGY SERVICE CENTER. THE CENTER BEGAN IMPLEMENT CHARGES FOR ITS SERVICES SEPTEMBER 1, 2012. PLEASE NOTE: SERVICES CANNOT BE PROVIDED WITHOUT RECEIPT OF AN ORACLE ACCOUNT NUMBER.**

This Center will continue to provide neuroscientists with three inter-related services facilitating the histopathological and molecular characterization of experimental animals. The Center will provide investigators with access to and expertise in the operation of:

- State-of-the-Art stereology/morphometric system capable of performing several advanced image analysis routines.
  - Fluorescent capabilities on two BX51 upright microscopes.
  - Whole section imaging.
  - Neuron tracing using Neurolucida software.
  - Stereologic cell quantification, volume and distribution using Stereo Investigator software.
- Advanced laser microdissection facility core.
  - Veritas instrumentation using LCM and UV cutting.
  - Fluorescent capabilities.
  - Use for RNA, Protein and DNA analysis.
- Expertise in the processing of mouse embryos and brain tissue.
  - Paraffin embedding and sectioning of mouse embryos and brain tissue.
  - Cryo-sectioning for thick and thin sections using UV capable cryostat or sliding microtome.
  - Basic Cresyl and H & E staining.



**\*\*Our Policies and Price Sheets are Attached.**

#### UAB NEUROPATHOLOGY SERVICE CENTER

1720 7th Avenue South  
SC 843

Steven L. Carroll, M.D., Ph.D., Director  
Amy Turk/Stephanie Byer (LCM/MBF)  
Jamie McNaught (Histology)  
Phone: 205-934-3287  
Fax: 205-934-6700  
E-mail: PATH-MCNP@uab.edu

### GENERAL POLICIES:

- Must reserve/cancel time 24 hours in advance using the online scheduler.
- Will be billed for time if you sign up for the MBF and then do not show up.
- After 15 minutes of use, time is rounded up to an hour.
- Invoices will be sent out by the 5th of each month. An Oracle account number must be received before the equipment is used or access will be denied.

### SERVICE REQUESTS:

- All requests for service, etc. must go through either the core e-mail (PATH-MCNP@uab.edu) or the core phone (934-3287) or they will not be processed.

Due to the limited hours for Amy and Stephanie to address service issues/problems, internet access has been made available for stereology issues for live remote access to MBF.

MBF: <http://www.mbfbioscience.com> >>Support >>Live remote access

## Molecular and Cellular Neuropathology Center Service Fees

Account no.: \_\_\_\_\_

Investigator: \_\_\_\_\_

Department: \_\_\_\_\_

Phone no.: \_\_\_\_\_

E-mail: \_\_\_\_\_

Description	Standard Rate	#	Total
<b>Paraffin</b>			
Process & Embedd Paraffin Tissue Block	\$3.50		
Process Paraffin Tissue Only	\$2.50		
Unstained Paraffin Slide	\$1.40		
H&E Paraffin Slide	\$2.00		
Cresyl Stain Slide	\$1.00		
<b>Frozen</b>			
Freeze&Embedd Tissue Block	\$3.50		
Unstained Frozen Slide	\$1.60		
H&E Frozen Slide	\$2.00		
Cresyl Stain Slide	\$1.00		
<b>Floating</b>			
24 well plate with 24 sections	\$12.00		
24 well plate with 48 sections	\$15.00		
24 well plate with more then 48 sections	\$20.00		
<b>Histology Equipment</b>			
Training/Assistance per hour on all equipment	\$30.00		
Unassisted Paraffin Embedder	\$5.00		
Unassisted Microtome	\$7.00		
Unassisted Cryostat	\$8.00		
Unassisted Sliding Microtome	\$5.00		
<b>Specialty Service</b>			
Gel Coated Slides	\$0.50		
Laser Printed Slides	\$0.50		
Laser Printed Cassettes	\$0.50		
Histogel	\$5.00		
<b>Microscopy Service</b>			
Training/Assistance per hour	\$30.00		
MBF Microscopes per hour	\$10.00		
Laser Capture Microdissection Veritas per hour	\$10.00		
<b>Slide Boxes</b>			
Large	\$15.00		
Small	\$5.00		

Equipment Scheduling Website: <http://foo.vsrc.uab.edu/ps/index.php>  
 Drop Off / Pick up Specimens in Sparks Center 843  
 Contact: Dr. Steve Carroll [scarroll@uab.edu](mailto:scarroll@uab.edu)  
 Histology contact - Jamie McNaught 4-3287  
 \* Please bring slide boxes or fees will occur

TOTAL COST \_\_\_\_\_

# Cellular and Molecular Neuropathology Service Center

## Histology – Research Request Form

Date Submitted: \_\_\_\_\_ Date Completed: \_\_\_\_\_

	Principle Investigator	Contact person
Name		
Phone #		
E-mail		

### Project Funding Information (please check one)

NIH Blueprint \_\_\_\_\_  
 (includes: NCCAM, NCRR, NEI, NIA, NIAAA, NIBIB, NICHD, NIDA, NIDCD, NIDCR, NIEHS, NIGMS, NIMH, NINDS, NINR)

Other NIH \_\_\_\_\_ Non-NIH \_\_\_\_\_

None \_\_\_\_\_

Item Submitted (Check One):    ☐ Tissue    ☐ Cassette    ☐ Paraffin Block    ☐ Frozen Block

Specimen Identification	Type of Tissue	Type of Slide	# of Slides	Cutting Thickness

Total No. of Specimens submitted: \_\_\_\_\_

### Please answer the questions that pertain to the Specimen you are submitting:

What fixative was used? \_\_\_\_\_

How long was the tissue in fixative? \_\_\_\_\_

What solution is tissue in now? \_\_\_\_\_

Who will be responsible for embedding the tissue? \_\_\_\_\_

Will you be cutting the tissue?    Yes \_\_\_\_\_    No \_\_\_\_\_

Which microscope will this tissue be used on? \_\_\_\_\_

Do you want your container back? \_\_\_\_\_  
 (please label with name and phone #)

For unstained sections – Oven or Air dry? \_\_\_\_\_

Slide box provided? \_\_\_\_\_  
 (please label with name and phone #)

Questions? Call 934-3287