Core Facility Tumor Models - Preliminary Information	on for Corporate Planning-
please fill in and send back  Principle Investigator	bill to cost center:
Prename	bill to cost center.
Name	
Department	
Cost Center	
Adress	
Tel	
Fax	
E-mail	
Responsible contact person	Support by
Prename	Prename
Name	Name
Department	Department
Cost Center	Cost Center
Adress	Adress
Tel	Tel
Fax	Fax
E-mail	E-mail
full service (for short-time experiments only)	
partial service with reduced costs	
Project title: (in the case of limited ressources, a brief description of the project will be demanded)	
Downit number of the Designan requisition Keyleyuke.	
Permit number of the Regierungspräsidium Karlsruhe:	
species strain	
line	
genotype control line	
current localisation in ZTL: barrier 2, barrier 3, barrier 4, other:	
requested start of experiment	
Timetable	
all treatment groups simultaneously	
groups consecutiveto	
	_
1. TPA-induced acute irritation of skin	Ш
2. Ear edema test	Ш
3. Multi-stage carcinogenesis protocol in mouse skin	
4. Tumorgrowth in immunodeficient mice	П
Nude	
NOD/SCID	Ц
strain	
allograft	
xenograft	
cell type cell line	
tumor type	
inoculation: ectopic : orthotopic :	organ:
cell number/injection	supplements
5. K5-COX-2 Tumormaus	
	_
6. Help in design of experiments	
Actual requirements	
number of groups:	Biopsies: ☐ yes, ☐ no
	1 27 2
number of animals/group:	liquid nitrogen ; -70°C
total number of animals:	tissue-tek OCT-compound
gender: female, males only on request	paraffin
In vivo imaging intended: ☐ yes; ☐ no	organs:
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