



PDS# _____

Histology Laboratory Special Stains Submission Form – Contract and Research Cases

Name of researcher: _____

Contact name and phone #: _____

Additional information: _____

Note: If you have any questions, call the Histology Laboratory at 306-966-7319 or 306-966-7322.**Special Stain Request** (*Check all that apply*)

- | | |
|---|---|
| <input type="checkbox"/> Aluminum – Aluminum | <input type="checkbox"/> Methyl Green Pyronine – plasma cells |
| <input type="checkbox"/> Alcian Blue – acidic mucins | <input type="checkbox"/> Oil Red O – lipids – Note: please submit wet tissue |
| <input type="checkbox"/> Alcian Blue/PAS – acidic, neutral mucins | <input type="checkbox"/> Okajima – hemoglobin |
| <input type="checkbox"/> Alizarin Red S – calcium | <input type="checkbox"/> Periodic Acid Methenamine Silver – basement
membranes |
| <input type="checkbox"/> Congo Red – amyloid | <input type="checkbox"/> Periodic Acid Schiff – neutral mucins, glycogen, fungus |
| <input type="checkbox"/> Duffy's – mast cells and eosinophils | <input type="checkbox"/> Periodic Acid Schiff's/Diastase – glycogen |
| <input type="checkbox"/> Fites – <i>Mycobacterium</i> spp. and <i>Nocardia</i> spp. | <input type="checkbox"/> Perl's Prussian Blue – hemosiderin |
| <input type="checkbox"/> Fontana Masson – melanin, late lipofuscins
argentaaffin cells | <input type="checkbox"/> Phosphotungstic Acid Hematoxylin – fibrin, muscle
striations |
| <input type="checkbox"/> Formalin Pigment Removal | <input type="checkbox"/> Rhodanine – copper |
| <input type="checkbox"/> Giemsa – mast cell granules, bacteria | <input type="checkbox"/> Safranin O/Fast Green – cartilage |
| <input type="checkbox"/> Gordon and Sweets – reticulin fibers | <input type="checkbox"/> Schmorl's – lipofuscins, melanin |
| <input type="checkbox"/> Gram – bacteria | <input type="checkbox"/> Sirius Red (Picosirius) – osteoid |
| <input type="checkbox"/> Grimelius – neuroendocrine cells | <input type="checkbox"/> Toluidine Blue – mast cells |
| <input type="checkbox"/> Grocotts Methenamine Silver – fungus | <input type="checkbox"/> Von Kossa – calcium salts |
| <input type="checkbox"/> Grocotts Methenamine Silver/H&E – fungus | <input type="checkbox"/> Warthin Faulkner – spirochetes, bacteria |
| <input type="checkbox"/> Hall's – bile | <input type="checkbox"/> Weigert Van Gieson – muscle, collagen, elastic fibers |
| <input type="checkbox"/> H&E – routine stain | <input type="checkbox"/> Ziehl Neelsen – <i>Mycobacterium</i> spp. |
| <input type="checkbox"/> Hematoxylin Orcein Phloxine Saffron – muscle,
collagen, elastic fibers | <input type="checkbox"/> Ziehl Neelsen – Long – lead inclusion bodies |
| <input type="checkbox"/> Holmes – nerve fibers | <input type="checkbox"/> Other (<i>please list</i>) |
| <input type="checkbox"/> Luxol Fast Blue/Cresyl Violet – myelin, nissl
substance | _____ |
| <input type="checkbox"/> Luxol Fast Blue/H&E – myelin | _____ |
| <input type="checkbox"/> Macchiavello's – <i>Rickettsia</i> spp. | _____ |
| <input type="checkbox"/> Masson's Trichrome – muscle, collagen fibers | _____ |
| <input type="checkbox"/> Melanin Bleach/H&E – melanin pigment removal | _____ |

For PDS use only

PDS#: _____ Date received: _____ Date completed: _____

Work relinquished to whom: _____

(Name and Date)

Billing codes applied:Cost:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Billing done by (*Date & Initials*): _____Charges checked by (*Date & Initials*): _____(Check all that apply) ☐ Blocks ☐ Slides ☐ Tissue forwarded to DSO (*Date & Initials*): _____**End of Form**

Supersedes: August 22, 2022