



## Element Concord Mammalian Cell Growth Information

Please complete this form and include any additional information critical to the successful growth of your cell line. It is important for our scientific staff to understand the growth and general characteristics of your cell line for the creation of batch production records and supplies estimation.

Client's Name:

Cell Line Identification:

Cell Line Origin / Strain:

Cells are from (check one):    RCB    MCB    Other (identify)

### Seed Lot Information:

Pre-bank Testing performed prior to submitting to Element Concord:

Sterility:    Yes

Mycoplasma:    Yes    No

CofA will be provided with seed lot:    Yes    No

Expected total concentration per vial: CFU/ml

Expected cell viability: %

Approximate volume per vial: ml

Passage number:

### Growth Medium:

Ready to Use (Off the Shelf)    Custom Formulation    Client Supplied?    Yes    No\*

Has the culture been grown in antibiotic free medium prior to submission to Element Concord?    Yes    No

Component Information and Growth Medium Preparation:

Component Name	Manufacturer	Catalog Number	Concentration (Per Liter)

### Raw Materials

Non-animal source materials and/or reagents required?    Yes    No

\*Materials ordered by Element Concord will be accepted and used after verification of the CoA.

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### Freeze Media Component

Medium	Manufacturer	Catalog Number

Supplements (i.e. Glycerol)	Manufacturer	Catalog Number	Concentration (Per Liter)

### Thaw and Culture Information

Describe thawing procedure for your vials below. If unknown or no preference, Element Concord will use standard thawing procedure:

### Culture Type

#### Suspension Culture

Seed density (e.g. seed culture at $2-4 \times 10^5$ cells/ml)		Cells/ml
Suggested cell density for subpass (e.g. split cells when they reach $1.0 \times 10^6$ cells/ml)		Cells/ml
Suggested number of days between subpasses (e.g. 2-3 days)		Days

#### Adherent Culture

Seed density (e.g. seed culture at $1.0 \times 10^6$ cells/flask)		Cells/ml
Optimal % confluency for subpass (e.g. 90-100%)		%
Suggested number of days between subpasses (include range: e.g. 2-3 days)		Days
Expected yield per 225cm <sup>2</sup> flask (e.g. 90% confluency with $1.0 \times 10^7$ cells/flask)		%
		Cells/flask

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### Temperature and CO<sub>2</sub> Requirements

Temperature:                    ±                    °C                    RPM range:                    N/A  
CO<sub>2</sub> Concentration:                    ±                    %

### Additional Cell Growth Instructions

SOPs, batch records, other instructions:    Yes    No: please attach documents or add info below

Number of Vials Requested for Cell Bank:

### Cell Density for Banking

Desired cell bank density:                    cells/ml                    Vial Size:                    ml  
Approximate Aliquot volume:                    ml

### Storage Requested?

Yes    No    Length of Storage Requesting:

### Timeline for Cell Bank Generation and Release

### Characterization Requirements

(The requirements for post-bank testing are dependent on the intended use of the cell bank. If unknown, Element Concord can provide standard tests performed for specific type of bank):

### Comments / Additional Requests