

Questionnaire – Antibody Production from pre-existing Cell Lines

Please fill out this form as a prerequisite for planning and specifying the major steps of the respective project.

It will also be used as the basis for quotation and further discussion of project details.

All information provided including the client information at the end of this questionnaire will be treated strictly confidential. A nondisclosure agreement can be signed upon request.

1. Cell line information

Please provide information about the type and the name of the cell line:

Murine hybridoma

Mixed species hybridoma

Human hybridoma

Parent myeloma

Other, please specify: _____

Please enter the name of the cell line: _____

If the cell line is a genetically modified organism, please specify:

Has the provided cell line been tested for the following contaminants?

Mycoplasma spec.:

No

Yes

Result: _____

If yes, which assay system was used? _____

Virus (please specify which virus types): _____

No

Yes

Result: _____

If yes, which assay system was used? _____

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Further testing for biological activity and potential hazardous components:

2. Antibody/product specification (please specify)

Monoclonal antibody (Ig class, subclass): _____

pH of best product stability: _____

pl of product in solution: _____

3. Antibody Target Information

Is the antigen (commercially) available (prerequisite)?

No Yes If yes, please specify supplier: _____

Biosafety level: **1** **2**

If the antigen is a genetically modified organism, please specify:

For BSL2 (biosafety level 2 according to Biological Agents Ordinance https://www.gesetze-im-internet.de/englisch_biostoffv/englisch_biostoffv.pdf please provide risk analysis.

If samples submitted are GMO, please attach Formblatt Z or relevant documentation. The final risk assessment and security level for GMO organisms will be finalized by Biogenes in accordance with the German law since regional differences may occur. (Genetic Engineering Safety Ordinance – GenTSV) <https://www.bmlh.de/SharedDocs/Gesetzestexte/EN/GenTSV-E-en.html>

Are test systems (commercially) available?

No Yes If yes, please specify: _____

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4. Cell line cultivation specification (please provide information)

Shipment as cryo culture (prerequisite: 3 vials from one batch)

Average number of cells per vial: _____

Composition of the freezing medium used: _____

Cell culture medium to be preferably used: _____

Basal medium (please specify): _____

Serum added (please specify the type and final concentration): _____

Serum-free medium (please specify the type): _____

Other components included (please specify): _____

Cell culture system currently used: _____

Flask, fermenter or other (please specify the size): _____

Final cell density for harvest [cells per mL]: _____

5. Do you require further Mab-related services from BioGenes?

Sequencing of cell lines at BioGenes:

Yes

No

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6. Please provide additional information on:

Planned timelines: _____

Payment planned directly or via a purchasing platform (e.g. Scientist.com):

How did you find out about BioGenes? _____

Other information not previously covered: _____

Client Information:

Company/Institution name: _____

Contact person: _____

Address: _____

Phone: _____

Email: _____

Date: _____