

QUESTIONNAIRE – IMMUNOASSAY (ELISA) DEVELOPMENT

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. INFORMATION ABOUT ASSAY PURPOSE

What is your specific request? / The development should result in determination of which analyte using ELISA? Please specify:

The ELISA development should include usage for the following matrix:

Buffer matrix and final assay matrix

If development for final assay matrix is selected, please describe the assay matrix:

What would be the expected determination range of the ELISA? Please estimate:

What would be the estimated amount of antibody and/or number of ELISA 96-well plates? Please estimate:

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2. ASSAY DETAILS

2.1 ASSAY TYPE

Sandwich assay

Competitive assay

Different assay type. Please specify:

2.2 DEVELOPMENT OF ANTIBODIES

Monoclonal antibody

Polyclonal antibodies

2.3 KNOWN CROSS-REACTIVITIES

No

Yes

If yes, specify what kind of cross-reactivities?

Should testing for potential cross-reactivities be included during ELISA development?

No

Yes

If yes, specify against which component?

2.4 ANTIGEN AVAILABILITY

Yes

No

3. DO YOU REQUIRE FURTHER ELISA SERVICES FROM BIOGENES

3.1 PRE-VALIDATION OF THE ELISA

Yes

No

I am not sure yet

3.2 PRODUCTION OF READY-TO-USE KITS

Yes

No

I am not sure yet

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4. 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:
