

SeraCare eCatalog

Research Support Services Inquiry Form

My Services Request

I am interested in the following (check all that apply)

Biochemistry Support

- | | |
|---|--|
| <input type="checkbox"/> Cellular Hematology and Immunology | <input type="checkbox"/> ELISA Assays |
| <input type="checkbox"/> Cellular Purification and Characterization | <input type="checkbox"/> ELISpot Analysis |
| | <input type="checkbox"/> Platelet Function and Coagulation |

Molecular Biology Support

- | | |
|--|---|
| <input type="checkbox"/> DNA Cloning | <input type="checkbox"/> Genomic Library Construction |
| <input type="checkbox"/> DNA Extraction
<input type="checkbox"/> Automated Genra
<input type="checkbox"/> Manual Genra | <input type="checkbox"/> Genotyping |
| <input type="checkbox"/> DNA Fragment Purification | <input type="checkbox"/> NAT Testing for Viral Load
<input type="checkbox"/> HBV <input type="checkbox"/> HIV
<input type="checkbox"/> HCV <input type="checkbox"/> HPV |
| <input type="checkbox"/> DNA QC | <input type="checkbox"/> RNA Extraction |
| <input type="checkbox"/> DNA Sequencing | <input type="checkbox"/> Whole Genome Amplification |

Virology and Immunology Support

- | | |
|---|---|
| <input type="checkbox"/> Apoptosis Assays | <input type="checkbox"/> HIV Culture, Characterization, Detection, and Quantitation |
| <input type="checkbox"/> Drug Susceptibility Assays | <input type="checkbox"/> HIV Infectivity Assays |
| <input type="checkbox"/> EBV Transformation | <input type="checkbox"/> Viral Assays |
| <input type="checkbox"/> ELISA Assays | <input type="checkbox"/> Virus Agent and Nucleic Acid Preparation |
| <input type="checkbox"/> ELISpot Assay Kits | <input type="checkbox"/> Virus Inactivation using BPL or Heat |
| <input type="checkbox"/> ELISpot Assays | |

Detail of My Specific Need

Use the box below to communicate any information about your specific need

My Contact Information

Name _____

Title _____ Phone _____

Organization _____

Street Address _____

City _____ State/Province _____

Country _____ Zip/Postal Code _____

Email _____

All fields required

[Copy to my email](#)
(Available for those with email resident on desktop)

[Submit](#)

Contact SeraCare: By phone, 800.676.1881 (US only)
By email, info@seracarecatalog.com