# Washington University Diabetes Research Center Metabolic Tissue Function Core

## REQUEST FOR SERVICES

Principal Investigator:

Date of Request:

Email:

MSC Address:

Phone:

Requesting person name, email, & phone, if different:

Results requested by (date):

Title of Project:

Project Summary:

Relevance to diabetes:

Funding source: Agency:

Grant # & Date of approval:

IACUC (animal) Protocol Number:

Cost Center #:

Services Requested:

Metabolic Tissue Acquisition

- ☐ Consultation on design of studies using islets or β-cells
- ☐ Rodent islet isolation: species ; number of mice for isolation ; training:
- ☐ Procurement of human primary islets
- ☐ Supply of β-cell lines: Ins1E ☐ Ins1832/13 ☐ MIN6 ☐ βTC ☐ βTC6 ☐ RINm5F ☐
- ☐ Generation of iPSCs (project charge per GESC)
  - Number of iPSC lines requested
- ☐ Generation of genetically engineered cell lines (project charge per GESC)
  - Number of genetically modified cell lines requested

Metabolic Tissue Analyses

☐ Islet secretory responses (static incubation)

Number of samples to be tested

Training

☐ Dynamic islet secretory responses (Perifusion system)

per experiment

☐ IF staining and analysis

Slides: number:

Staining number and stain

☐ Islet morphometry:

Number of mice:

(please also indicate slides and antibodies to be stained for above)

☐ Quantification of metabolic rates in diabetes-related tissues and cells (Seahorse)

Please email completed form to:
Cris Brown, Core Manager
Washington University Department of Medicine
Division of Endocrinology, Metabolism & Lipid Research
660 S. Euclid Ave., MSC 8127-021-09
St Louis, MO 63110
Phone: 314-362-8684
Email: crisbrown@wustl.edu

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For Core use only:

Date received

Project number