**Form - Distributor Troubleshooting for Cell Biology**

For problems with the propagation of ATCC cells, please send this form to Cientifica Senna SA de CV Technical Services via e-mail.

*Para problemas de propagación de células ATCC, favor de enviar este formato a nuestro correo de servicio a clientes*: [soportetecnico@cientificasenna.com](mailto:soportetecnico@cientificasenna.com)

**Order Information** *(información que deberá de llenar Cientifica Senna):*

Distributor: Cientifica Senna SA de CV

ATCC Account number: 164156

Distributor Representative: Manuel Renteria

ATCC Sales Order (SO#) or PO number: Click here to enter text.

Date item was shipped to end-user: Click here to enter a date.

Date problem reported: Click here to enter a date.

End-user Name:Click here to enter text.

End-user Organization:Click here to enter text.

End-user Address/Phone number/Email address: Click here to enter text.

Stock item: Yes ☐ No X

***Please provide the information requested below so that we may assist in problem solving.***

*Favor de llenar toda la información completa para poder ayudarle con su problema;*

*los formularios incompletos serán rechazados.*

***Please respond in full. Incomplete forms will be returned and will delay the process.***

1. **ATCC Item number and designation**:Click here to enter text.
2. Lot number of vial:Click here to enter text.
3. Date item received: Click here to enter a date.
4. Form of item received: Frozen vial ☐ Culture flask ☐
5. Was ATCC’s Material Transfer Agreement received: Yes ☐ No ☐
6. Was ATCC’s online Product Information Sheet reviewed:Yes ☐ No ☐
7. Describe problem briefly: Click here to enter text.
8. **Describe how the item was handled upon arrival:**
9. Was the item stored before use:Yes ☐ No ☐
10. Temperature: Choose a temperature.
11. Length of time stored (days/wks/months):Click here to enter text.
12. Procedure for thaw:Click here to enter text.
13. Was the cryoprotectant removed: Yes ☐ No ☐
14. If yes, please provide details. Include centrifuge speed (in x g or rpm) and length of time: Click here to enter text.
15. **Vessel used to initialize culture:**
16. Size, Type & Manufacturer of vessel:Click here to enter text.
17. Was vessel coated (if yes, list Name/Manufacturer/Catalog number of coating):Click here to enter text.
18. **Growth medium:**
19. Initial total volume of medium:Click here to enter text.
20. Was the serum heat-inactivated: Yes ☐ No ☐
21. Antibiotics or anti-fungal agents used: Yes ☐ No ☐

If yes, list Name/ Manufacturer/ Catalog numbers: Click here to enter text.

1. Base medium Name/ Manufacturer/ Catalog Numbers: Click here to enter text.
2. Serum concentration and Name/ Manufacturer/ Catalog Number: Click here to enter text.
3. Supplements final concentrations and Name/ Manufacturer/ Catalog Numbers: Click here to enter text.
4. Was complete growth medium filtered: Yes ☐ No ☐
5. Final pH or osmolality of medium if measured: Click here to enter text.
6. **Incubator settings:**

% CO2: Choose % CO2.

Temperature: Choose a temperature.

Humidity: Click here to enter text.

1. **Have the cells been subcultured:** Yes ☐ No ☐
2. **How long have the cells been in culture & do you still have the cells:** Click here to enter text.
3. **Medium renewal:**

a. Was the medium refreshed? Yes ☐ No ☐

If yes, how often (#days): Click here to enter text.

b. Please describe the medium renewal procedure used: Click here to enter text.

c. Adherent cells: Were there any floating cells present: Yes ☐ No ☐

Were the floating cells discarded: Yes ☐ No ☐

When were the floating cells discarded: Click here to enter text.

1. **Were any cell counts performed?** Yes ☐ No ☐

If yes, when and what were the results obtained? Click here to enter text.

1. **Are your ATCC cells currently viable?** Yes ☐ No ☐
2. **Was a viability test performed?** Yes ☐ No ☐

If yes, describe method used (eg. microscopic examination or trypan blue) and results: Click here to enter text.

1. **Subculture & Expansion (if applicable):**

**A. ForAll Adherent cells:**

1. How many days after initial seeding were the cells sub-cultured: Click here to enter text.
2. How many times were the cells sub-cultured: Click here to enter text.
3. % confluence when cells were sub-cultured: Click here to enter text.
4. Split ratio or seeding density used (#cell/ml, #cells/cm2 or dilution ratio): Click here to enter text.
5. Manufacturer & Concentration of dissociation buffer (Trypsin/EDTA): Click here to enter text.
6. Briefly describe procedure used to dissociate the cells: Click here to enter text.
7. **B. ForAll Suspension cells:**
8. How many times were the cells sub-cultured: Click here to enter text.
9. Total Cell density seeded (#cell/ml, #cells/cm2 or dilution ratio): Click here to enter text.
10. Procedure used to dissociate the cells (include centrifuge speed in x g and time): Click here to enter text.

**C. Also complete this section if using Primary or Stem cells:** *(Llenar en caso de ser células Primarias o células madre)*

Was the Population Doubling Level (PDL is different from passage number) calculated:Yes ☐No ☐

If yes, how many doublings were the cells grown for: Click here to enter text.

Was the Passage number calculated: Yes ☐ No ☐

If yes, how many passages were the cells grown for: Click here to enter text.

Describe feeder layer or matrix coating if used (include Name/ Manufacturer/ Catalog Number): Click here to enter text.

Describe matrix coating procedure in detail: Click here to enter text.

If a feeder layer was used, please answer the following questions:

1. Did you obtain feeder layer cells from ATCC: Yes ☐ No ☐

If yes, did you review the ATCC product information sheet for the item: Yes ☐ No ☐

1. Select temperature the cells were stored at: Choose an item.
2. How long was the item stored for: Click here to enter text.
3. Describe how the feeder cells were thawed and processed prior to incubation: Click here to enter text.
4. What volume of medium was used for diluting the ampoule: Click here to enter text.
5. Was a mitotically-arrested cell line used as a feeder layer:Yes ☐ No ☐

If yes, skip the next question.

1. Did you order proliferating cells for use as a feeder layer: Yes ☐ No ☐

If yes, how many times did you passage the cells prior to mitotically arresting them: Click here to enter text.

If no, what treatment (chemical/irradiation) was used to mitotically arrest the cells: Click here to enter text.

1. List medium recipe serum and/or additives (antibiotics/antimycotics) used (include Name/ Manufacturer/ Catalog Number): Click here to enter text.
2. List size/type of culture vessel used: Click here to enter text.
3. Incubator settings:

% CO2: Choose % CO2.

Temperature: Choose a temperature.

Humidity: Click here to enter text.

1. How old (No. of days from initial seeding/ passage no.) was the feeder layer prior to adding stem cells: Click here to enter text.
2. What was the cell density/confluence of feeder layer prior to adding stem cells: Click here to enter text.
3. Did the pH of the medium change (i.e. color change to yellow, pink, purple): Click here to enter text.
4. Describe feeder cell morphology as observed microscopically: Click here to enter text.
5. **Briefly list any other relevant details or comments**: Click here to enter text.
6. **Insert an image of cells if desired**: 