**Form - Distributor Troubleshooting for Microbial Cultures**

For problems with the propagation of ATCC microorganisms, please send this form to Cientifica Senna S.A. Technical Services via email.

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

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

Distributor: Cientifica Senna S.A. de C.V.

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

***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 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  Freeze-dried  Test tube
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. Storage temperature: Choose a temperature.
11. Length of time stored before use: Click here to enter text.
12. **If item was received frozen**, describe how it was thawed: Click here to enter text.
13. **If item was received freeze-dried**:
14. Was the rehydration done within the ATCC vial: Click here to enter text.
15. What liquid was used for rehydration: Click here to enter text.
16. What volume was used for rehydration: Click here to enter text.
17. **Were the entire contents of the ATCC vial used**: Yes  No

If not, please provide details: Click here to enter text.

1. **Describe vessel** used to initialize culture:
2. Type of vessel (check all that apply): Agar plate  Agar slant

Biphasic slant  Test tube

Flask  Other

If Other: Click here to enter text.

1. Number of vessels inoculated: Click here to enter text.
2. Initial volume of medium in each vessel: Click here to enter text.
3. **Describe medium**:
4. Formulation of medium: Click here to enter text.
5. How was the medium prepared: Click here to enter text.
6. For anaerobic microbes, was the medium pre-reduced: No  Yes

If yes, describe how: Click here to enter text.

1. **Growth conditions:**
2. Gas levels (if not aerobic, how were gas levels maintained, i.e. gas packs etc.): Click here to enter text.
3. Temperature: Choose a temperature.
4. pH of medium: Click here to enter text.
5. Light intensity (if applicable): Click here to enter text.
6. **Length of time in culture:** Click here to enter text.
7. **Was the item subcultured**: Yes  No

If yes, please provide details: Click here to enter text.

1. **Describe your observations of the culture**: Click here to enter text.
2. **How were these observations made** (i.e., visual inspection, microscopic examination, other tests performed): Click here to enter text.
3. **List any other relevant comments or details**: Click here to enter text.
4. **Insert an image of culture if desired**: 