

Order form - gills for NaK-ATPase analysis

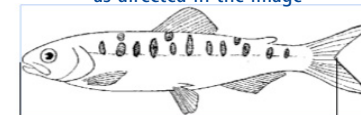
Information about applicant (*obligatory field)						
*Company name (department):		*Email for invoice:		*Smoltification method:		
Email analytical report to (name):		Invoice reference:		*Sample taken:	Date:	Time:
Email analytical report to (email):		* Temperature (°C):				
Send copy of analytical report to:		* pH:		Light:	12/12h	24h
						Natural light
*Contact person:		* CO2 (mg/l):		Sample 1	Sample 2	
*Telephone:		* O2 (%):		Sample 3	Sample 4	
*E-mail:		* Salinity (‰):				
*Signature		* Fish group:				

[illegible]

Silver colour	Parr marks	Fin edges
1 - None	1- Strong	1 - None
2 - Faint	2 - Visible	2 - Faint
3 - Visible	3 - Faint	3 - Visible
4 - Strong	4 - None	4 - Black

Bowel	Fin condition
1 - Full bowel	1- Perfect
2 - Some content	
3 - Small content	
4 - No content	4 - Gone

Measure the length of the fish
as directed in the image



Lenght (mm)

Lab use only:

Klokkeslett:

Dato:

Sign:

F F

Enzym: Frossen ☐
PCR: Kjølt ☐

Evt. temperaturavvik ved mottak: