



## COURSE REQUEST FORM

**Location (select one):**

- San Diego (5286 Eastgate Mall, San Diego, CA 92121)
- Burbank (2301 W. Alameda in Burbank, CA 91506)
- OFFSITE (Lab in a Box)

**Company:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Billing Address:**

\_\_\_\_\_  
\_\_\_\_\_

**Date(s) Requested:** \_\_\_\_\_ **Alternate Date(s):** \_\_\_\_\_

**Time:** \_\_\_\_\_ **to** \_\_\_\_\_ **Set-up date/time:** \_\_\_\_\_

**Course Title/ Procedure(s):**

\_\_\_\_\_

**Number of stations:** \_\_\_\_\_

**Number of attendees: Surgeons/ Faculty:** \_\_\_\_\_ **Staff:** \_\_\_\_\_

**Total Attendees:** \_\_\_\_\_

## TISSUE REQUIREMENTS:

Type of specimen: \_\_\_\_\_ Amount: \_\_\_\_\_

Specific Tissue Requirements: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Description of use / procedure(s) being performed: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you willing to work with a specimen with a history of COVID-19?

\_\_\_\_\_

## IMAGING, EQUIPMENT, and INSTRUMENTATION

**Imaging** (please indicate quantity):

Full-Size C-Arm \_\_\_\_\_ Mini C-Arm \_\_\_\_\_ Bi-Plane G-Arm \_\_\_\_\_ Ultrasound \_\_\_\_\_

Please describe any specific requirements:

\_\_\_\_\_

\_\_\_\_\_

Lead Aprons & Thyroid Shields: \_\_\_\_\_ Dosimeter Badges: \_\_\_\_\_ X-Ray Tech Times

(Start and End times):

\_\_\_\_\_

# Image Saving Capabilities

*Options may differ depending on C-Arm, please ask us for any specifications.*

## *DICOM*

Must have DICOM viewer to view the files

- Can be transferred via internet (with dedicated IP Address) directly to computer software from C-Arm or onto USB to view later.
- Each image is 1DICOM file, a group is a series and group of series makes up a complete file.
- CINE (DICOM "Video") can be played back in different Frames Per Second (FPS) depending on C-Arm and speed can be adjusted.
- CINE runs can be played back and recorded on Medicapture to save as an MPEG file but images can not be saved externally via the DICOM software.
- 3D Computer Navigations can use DICOM images so surgeons can use "key" images to do preoperative planning

## *MEDICAPTURE*

Tool to externally save images/videos onto USB

- Captures and converts images to JPEG.
- Captures and saves MPEG videos.
- A great tool to download and save files externally for use later.
- All GE C-Arms are compatible with our medicapture boxes.
- C-Arm must have a BNC port to utilize the medicapture saving option.

## *CD-R*

Tool to externally save DICOM images

- CD-R can be used if a Medicapture is not available, you can download the DICOM files directly to the "blank" CD-R inserted into the C-Arm.
- Another great tool to download and save DICOM files for later use in the DICOM software.

## *PRINTER*

External printer to print off images

- Great for immediate use of physical images.
- Printer plugs into the BNC port of the C-Arm.

**Other Equipment** (quantity):

Articulating Procedure Table \_\_\_\_\_ Static (Radiolucent) Table \_\_\_\_\_  
Back Table \_\_\_\_\_ Drainage Table \_\_\_\_\_

Light Source Unit \_\_\_\_\_ Surgical Light \_\_\_\_\_

Suction \_\_\_\_\_ Bovie \_\_\_\_\_ Drill \_\_\_\_\_ Saw \_\_\_\_\_ Endoscopy Tower \_\_\_\_\_

Other: \_\_\_\_\_

Please describe any specific requirements for the items checked (do you require siderails on your indicated specimen table?):

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**Surgical Instrumentation** Please indicate any specific instruments or sizes needed:

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Type of equipment being shipped in:

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Ship date: \_\_\_\_\_ Approx. # of cases: \_\_\_\_\_ Approx. weight: \_\_\_\_\_

**AUDIO/VISUAL:**

Screen: \_\_\_\_\_ Laptop: \_\_\_\_\_ Microphone: \_\_\_\_\_ Recording: \_\_\_\_\_

Special requests (do you need any special cords and/or adapters?):

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**CME:**

Are you interested in your surgeons obtaining CME for this course? (circle one) YES / NO

*If YES, please attach a sample agenda for pricing purposes*

**CATERING**

**Breakfast \$30/person**

Number of people: \_\_\_\_\_ Serving Time: \_\_\_\_\_

Special requests (may effect standard catering fees): \_\_\_\_\_  
\_\_\_\_\_

**Lunch \$38/person**

Number of people: \_\_\_\_\_ Serving Time: \_\_\_\_\_

Special requests (may effect standard catering fees): \_\_\_\_\_  
\_\_\_\_\_

**Dinner \$38/person**

Number of people: \_\_\_\_\_ Serving Time: \_\_\_\_\_

Special requests (may effect standard catering fees): \_\_\_\_\_  
\_\_\_\_\_

**TRANSPORTATION**

Please describe any transportation needs: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OTHER REQUESTS**

Please tell us anything else we can do to make your course a success: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Thank you for your interest in Pacific American's Life Science Learning Center. We look forward to working with you!  
Please feel free to contact us anytime at [info@slclab.com](mailto:info@slclab.com) or (858) 622-0792.*