**Name & Address of Institution :**

**Name of Authorised person :**

**Cintact number :**

**E-mail :**

**Maximum total budget- if already set :**

**(Optional)**

**Proposed year & month of launch :**

**Nature of plastination :** Whole organ/Sheet/Luminal cast (delete which is not applicable)

**Quantum of project:**

|  |  |  |
| --- | --- | --- |
| **Specification** | **Size of specimen** | **Select most appropriate(Yes)** |
| Very small | Kidney, heart, hand / CS Forearm, limbs etc. |  |
| Small | Forearm, liver, leg, whole brain /CS leg, thigh, brain etc. |  |
| Medium | Full limb, Head & Neck, CS head, trunk etc. |  |
| Large | Half body, many limbs at a time / LS of body etc. |  |
| Very large | Full body at least 2 at a time |  |

**Requirement**

|  |  |  |  |
| --- | --- | --- | --- |
| **SL No:** | **Item** | **Yes/No**  | **Specify Unit** |
|  | Plastination Chamber |  |  |
|  | Dehydration chamber-with deep freezing facility(for medium to very large projects) |  |  |
|  | Deep freezer (Blue star) |  |  |
|  | Plastic/Stainless steel containers |  |  |
|  | Curing chamber |  |  |
|  | Silicone (Plastodur-S18+Curing agent) |  |  |
|  | Silicone(Plastodur-S18-RED+ Curing agent) for enhanced tissue colour |  |  |
|  | Acetone(Red- for colour enhancement) |  |  |
|  | Silicone for Luminal cast(Red/Blue/Green/White/Yellow/) |  |  |
|  | Epoxy resin for luminal cast(Red/Blue/Clear) |  |  |
|  | Installation of equipments and demonstration |  |  |
|  | One day training on whole organ(whole organ OR Luminal cast) |  |  |
|  | 2 day training (Whole organ +Luminal cast) |  |  |
|  | Any other:  |  |  |