



## Peptide Purity Testing Intake Form

### TEST DESCRIPTIONS & PRICING

#### Purity & Identification

**\$200.00**

*The foundation of every analysis.*

Uses HPLC and/or mass spectrometry to confirm the identity of your peptide and measure its chemical purity, verifying correct synthesis and screening for major impurities.

#### Net Peptide Content

**\$25.00 (bundled with Purity & ID)**

*Recommended with all purity testing.*

Quantifies the actual amount of peptide present—excluding water, salts, and counterions—for a more accurate basis when planning experimental dosing.

#### Endotoxins

**\$175.00 (additional vial required)\***

*Important for biological research applications.*

Detects bacterial endotoxins that can interfere with cell culture or in vivo research.

#### Sterility Screening (PCR-based)

**\$150.00 (additional vial required)\***

*Rapid microbial contamination screening.*

Uses PCR to detect microbial DNA, providing fast, sensitive detection of potential contamination under validated laboratory conditions.

#### Conformity Testing

**\$50.00 per additional vial**

*Batch consistency check.*

Evaluates batch uniformity by comparing additional vials from the same lot against the primary sample analyzed for Purity & Identification.

#### Fentanyl Screen

**\$40.00**

*Targeted research-use-only screen.*

Screens the submitted sample for fentanyl-related compounds. Not intended for diagnostic, therapeutic, or medical purposes.

*\*If both Endotoxins and Sterility are requested, only one additional vial is needed.*

### SAMPLE SUBMISSION INFORMATION

Company / Organization Name: \_\_\_\_\_

*Important: the Certificate of Analysis (COA) will list ONLY the Company / Organization Name entered above.*

Contact Person: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Opt in to email updates — get early access to new tests and lab announcements.



Combine test results to display on one CoA per sample.

Sample Name / ID	Expected mg	Lot Number	Purity & ID (\$200)	Net Content (+\$25)	Endotoxins (\$175)†	Sterility (\$150)†	Conformity (\$50/vial)	Vial Photo (no fee)
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

† Endotoxins and Sterility each require an additional vial (one extra vial covers both if requested together).

### Additional Screening Options

Fentanyl Screen — \$40.00 per sample

### Comments

---

---

**Acknowledgment.** By signing below, you confirm that the information provided is accurate to the best of your knowledge and that the sample(s) comply with all applicable regulations for transportation and handling. All sample testing services are for research use only; results are not intended for diagnostic, therapeutic, or medical purposes.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## Credit Card Authorization Form

Please complete all fields. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until cancelled.

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

Company Name: \_\_\_\_\_

### CREDIT CARD INFORMATION

Card Type:  MasterCard     VISA     Discover     AMEX  
 Other: \_\_\_\_\_

Cardholder Name (as shown on card): \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date (mm/yy): \_\_\_\_\_    CVV: \_\_\_\_\_

Cardholder ZIP (billing address): \_\_\_\_\_

I, \_\_\_\_\_, authorize Global Diagnostic Testing to charge my credit card for the testing services selected on this intake form. I understand my information will be securely saved on file for future transactions on my account.

\_\_\_\_\_  
Customer Signature

\_\_\_\_\_  
Date