You need to submit the checklist at the end of your imaging session
-filling out template based on SP8 system + fixed sample

SP8 microscope and sample checklist form

Required *

Personal Data

Full name * — first name, last name — Insert your name

Date * — 27.08.2026

Begin * — e.g. 10.00 — Start time

End * — e.g. 13.00 — End time

Sample details

Is your sample fixed? * — yes / no — Tick yes if your sample is fixed

Sample number and format * — e.g. 1x slide, 3x dishes etc. — Number and type (slide, mw-plate, etc.) of samples you've imaged

Turning off procedure:

Did you turn off the following devices? yes (+) // not used (-) // left on for next user (V)

1. PC and Microscope body *	+ / - / V	Did you switch off nr 1 (PC and microscope body)?
2. Scanner *	+ / - / V	Did you switch off nr 2 (scanner)?
3.Lasers *	+ / - / V	Did you switch off and turned the key of nr 3 (lasers)?
4. Fluorescence light source *	+ / - / V	Did you switch off the fluorescence lamp?
5. Main power supply for incubation unit *	+ / - / V	Not used for fixed sample
CO2 *	+ / - / V	Not used for fixed sample
Microscope arm closed? *	+	Is the microscope arm closed?

Operation details

Objectives used * — 10x / 20x immersion / 25x water / 40x water / 63x oil — Which objectives did you use? Multi-choice possible.

Did you clean and disinfect?

Objective *	+	Objectives must be clean (use lens cleaner and lens tissue)
Stage *	+	Stage must be clean
Microscope body *	+	Microscope body must be clean

By signing I verify that I have filled up this form personally and to the best of my knowledge.

Sign your name with the mouse

Reset

Reset the form — reset — submit — Submit the form

You need to submit the checklist at the end of your imaging session
-filling out template based on SP8 system + live sample

SP8 microscope and sample checklist form

Required *

Personal Data

Full name * first name, last name — Insert your name

Date * 27.08.2026

Begin * e.g. 10.00 — Start time

End * e.g. 13.00 — End time

Sample details

Is your sample fixed? * yes / no — Tick no if your sample is live

Is your sample GMO? * yes / no — Yes or no depending on GMO status of your sample

GMO project leader * --- list of names --- — Choose the assigned project

GMO level * Risk group 1 / Risk group 2 — Which risk group is your sample?

Sample number and format * e.g. 1x slide, 3x dishes etc. — Number and type (slide, mw-plate, etc.) of samples you've imaged

Turning off procedure:

Did you turn off the following devices? yes (+) // not used (-) // left on for next user (V)

1. PC and Microscope body * + / - / V — Did you switch off nr 1 (PC and microscope body)?
2. Scanner * + / - / V — Did you switch off nr 2 (scanner)?
3. Lasers * + / - / V — Did you switch off and turned the key of nr 3 (lasers)?
4. Fluorescence light source * + / - / V — Did you switch off the fluorescence lamp?
5. Main power supply for incubation unit * + / - / V — Did you switch off the incubation unit?

CO2 * + / - / V — Did you turn off the CO2 supply?

Microscope arm closed? * + — Is the microscope arm closed?

Operation details

Objectives used * 10x / 20x immersion / 25x water / 40x water / 63x oil — Which objectives did you use? Multi-choice possible.

Did you clean and disinfect?

Objective * + — Objectives must be clean (use lens cleaner and lens tissue)

Stage * + — Stage must be clean

Microscope body * + — Microscope body must be clean

By signing I verify that I have filled up this form personally and to the best of my knowledge.

Sign your name with the mouse

Reset

Reset the form — reset — submit — Submit the form