Document 100_Form_30

Revision: 02 Effective Date: 01/01/2025

Rush Request Form

Please use only one lot per form.

N/A any section intentionally left blank.

Rush Request Form must be submitted 24-hours in advance.

Company Name & Address:
Sample Lot Number:
Active(s) & Concentration(s):
Test(s) Being Requested for Rush services [see CIAL Price List for Test Code(s)]:
Anticipated Arrival Date:
Rush Request Time Frame:
☐ 24-hour (+100% Test Cost) ☐ 2-3 Days (+50% Test Cost)
CUSTOMER APPROVAL
Requested by (must be completed prior to submission):
Personnel Name:
Personnel Title:
Personnel Signature:
Date:
CIAL USE ONLY
Rush Acceptance:
Accepted Denied
Reason for Denial:
Date request received by CIAL:
Date request confirmed by CIAL:
CIAL staff initials:

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Revision: 02 Effective Date: 01/01/2025

Sample Lot Number:	
CIAL USE ONLY	
Sample Receipt:	
Date sample received by CIAL:	
CIAL Tracking Number:	-
CIAL staff initials:	

Instructions:

- Please use only one lot per form.
- "N/A" any section intentionally left blank.
- Please provide completed CIAL Sample Submission Form with Rush Request Form.
 - Only testing needing to be rushed is to be placed on Rush Request Form.
- Rush Request Form must be sent to CIAL 24-hours before sample is to be received to be considered a valid request.
- *If form is incomplete, CIAL will request revision(s).*
 - The request will not be considered valid until the requested revision(s) are completed and accepted by CIAL.
- Please email Rush Request Form to rush@compounderslab.com
- Once "Rush Acceptance" has been acknowledged, please send the below items to CIAL.
 - o CIAL Sample Submission Form
 - Accepted Rush Request Form
 - o Formulation Sheet/Manufacturer's Certificate of Analysis
 - Physical Sample
- Rush samples must arrive at CIAL before 11:00 AM (MST).
 - o If the rush sample is received by CIAL after 11:00 AM (MST), the requested rush time frame will begin the following business day.