

NMR Measurement Request Form – 600 MHz Spectrometer

Internal Use Only.	
NMR Measurement Number:	Measurement Date:

Name: _____ Research Group: _____ Date: _____

Email: _____ Phone Nr.: _____

Sample name	Deuterated Solvent	Conc. [mmol/mL]	Molecular weight of main analyte (for NOE/ROE/DOSY)	<i>optional:</i> Temperature [K]

Experiments:

¹ H	H ₂ H-COSY	HSQC (bandselective)
¹ H quantitative	TOCSY	HSQC non-decoupled
¹³ C { ¹ H}	NOESY	HSQC edited
¹³ C-APT { ¹ H}	ROESY	HSQC-TOCSY
¹³ C-DEPT135 { ¹ H}	DOSY	HMBC
¹³ C-UDEFT { ¹ H}		

Other experiments / nuclei / special measurement parameters:

Short description of the problem or special requirements, structural formula: