



Tissue Request Form

Date _____

Principal Investigator Name _____ Title _____

Institution _____ Department _____

Address _____

E-Mail _____ Phone _____ Fax _____

LLU Collaborators _____

Outside Collaborators _____

Project Name _____

Funding Source _____

IRB Approval No. _____ IRB Approval Exp. Date _____

Study Type Pilot Assay Development Validation Other _____

Is this study likely to lead to publication? Yes No

Is this study likely to lead to the manufacture of a procedure/product? Yes No

Request for Tissue (w/wo data) Data Only (no patient identifiers will be provided)

Anatomical site _____

Type of Tissue Required Tumor Normal
 Cells Plasma Nucleic Acids Other _____

Number of Cases requested (must be justified in methods)

Frozen: Quantity in mg/case _____ (depends on availability) or number of 5 um sections/case (NA for now)

Other thickness: No. sections _____ Cells: Quantity _____ Plasma: Quantity in ml/case _____

Other _____

Nucleic Acids DNA RNA Quantity in nanograms/case _____ Other _____

Patient Demographic Gender _____ Race _____ Age _____

Use as much space as necessary to explain all of the following:

Specific Requirements for tissue and data

Study Aims

Description of Study

Methods to be used

Justification for number of specimens requested as it is important for review of the request

I understand that all human tissues must be considered biohazardous and potentially dangerous. As Principal Investigator on this project, I acknowledge full responsibility to train any of my laboratory staff who might be exposed to this specimen in its proper handling, use and disposal, and will provide documentation of such training to Loma Linda University Cancer Center Biospecimen Laboratory (LLUCCBL) upon request. Further, I will not transfer/sell specimens provided to me through the LLUCCBL to other investigators without the express permission of the LLUCCBL after completion of a Tissue Request Form. I will provide a short written summary of the work performed on specimens supplied by the LLUCCBL every year and on completion of the project. LLUCCBL must be acknowledged in "Materials and Methods" and "Acknowledgements" sections of any publication arising from the use of these specimens.

If work performed on specimens supplied by the LLUCCBL generates ideas, rights or products of potential commercial value, I and the University/Institution/Center where I am based will enter into a separate agreement with the LLUCC on all relevant intellectual property issues.

Members of the LLUCCBL may request co-authorship when the provision of tissue has required particularly time consuming protocols.

Principal Investigator _____ Date _____

Please send documentation of the following for this project:

- Copy of IRB approval form.
- List of co-investigators (including students) involved in project.
- Copies of Human Studies Education Training Certificates for all investigators.
- Principal investigator biographic sketch.
- Copy of study protocol (include research methods).
- The recipient is required to sign a materials transfer agreement (MTA).
- Please sign and return a copy of this tissue request.
- When the specimen requested results in a publication, please forward a copy to:
Loma Linda University Cancer Center Biospecimen Laboratory.