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| **SAMPLE REQUEST** |

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| **SECTION 1 - APPLICANT** |
| **PRINCIPAL INVESTIGATOR: (\*Mandatory field)** |
| \* Name & Surname: |  |
| \*ID Card: |  |
| \*Departament / Unit: |  |
| \*Institution: |  |
| \*Address: |  |
| \*Phone: |  | **\***E-mail: |  |

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| **SECTION 2- PROJECT** |
| **PROJECT SUMMARY** |
| **PROJECT (\* Mandatory field)** |
| \*Project Tittle |  |
| \*Financing Agency/Entity: |  |
| \*Project Reference: |  |
| Starting/ Ending Project Date: |  |
| \*Approved by an authorized IRC: | YES**[ ]**  / NO**[ ]**  | IRC Project Ref.: |  |
|  |
| **SUMMARY OF THE PROJECT (250 words) :** |
| **MAIN OBJECTIVES:** |
| **METODOLOGY** (brief description of the use to be given to the samples): |
| **METODOLOGY** (brief description of the use to be given to the samples):**1.****2.****3.****4.****5.** |

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| **SECTION 3 - SAMPLES** |
| The selection of samples is made by defining the three levels described below:* Donor: Specify the general characteristics of the donor with respect to age, gender, and other characteristics (ethnic group, …)
* Donation: definition of the associated pathology/ies, grade, stage, valid organs (metastasis)
* Samples: details of the requested samples, solid, liquid, other, amounts, concentration, volumes…
 |
| **REQUESTED SAMPLES AND CHARACTERISTICS** |
| **I-DONOR (Specify restrictions on age, sex, others, if any):**  |
| Age: Min.: Max.: Indifferent **[ ]** .  |
| Sex: Man**[ ]**  Woman **[ ]**  Indifferent **[ ]**  |
| Other donor specifications: |
| **II-DONATION (patology associated to the samples):** |
| \*Associated disease (descriptor): |  |
| Anatomic localication |  |
| Grade: |  |
| Stage:  |  |
| Other donation specifications: |  |
| **III-SAMPLES** |
| **Format** | **Nº Cases** | **Amount/case** | **Other specifications:** |
| **Solids** | Frozen | **[ ]** Sections in slide**[ ]**  Sections in tube **[ ]** Full block (*to return if it does* *run out)***[ ]** Other:\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| Paraffined | **[ ]**  Sections in slide**[ ]**  Sections in tube**[ ]**  Other::\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| Fresh | **[ ]**  Sections in slide**[ ]**  Sections in tube**[ ]** Other::\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
|  | **Tipe** | **Format** | **Nº Cases** | **Amount/case** | **Other specifications:** |
| **Liquids** | Blood derivatives | Total blood | ñ |  |  |  |
| Serum |  |  |  |  |
| Plasma |  |  |  |  |
| Erytrocytes |  |  |  |  |
| Platelets |  |  |  |  |
| Buffy coat |  |  |  |  |
| PBMCs |  |  |  |  |
|  | **Tipo** | **Format** | **Nº Cases** | **Amount/case** | **Other specifications:** |
| Other liquids |  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Nucleic acids** | DNA | Origen:\_\_\_\_\_\_ |  |  |  |  |
| RNA | Origen:\_\_\_\_\_\_\_ |  |  |  |  |
| **ANOTHERS DETAILS**Paired samples (tumor and normal of the same pacient): **[ ]**  Yes **[ ]**  NoValidity of samples previously treated by radio- or chemotherapy: **[ ]**  Yes **[ ]**  NoValidity of tissue from postmortem study: **[ ]**  Yes **[ ]**  No |
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| **DOCUMENTS TO ATTACH:** Indicate the documents attached to this application  |
|  | **[ ]**  | Project or Project summary including a detailed justification of the need for samples (in terms of type, number and quantity of each sample) |
|  | **[ ]**  | CV or summary CV of the Principal Investigator. |
|  | **[ ]**  | Approved document of an authorized IRC |

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| **SECTION 4 - GENERAL CONDITIONS :** |
| All sample and data transfers of the RNBB shall follow what is established by the Spanish Laws (Law of Biomedical Research, LIBM 14/2007 and Royal Decree of Biobanks 1716/2011), as well as the relevant regional regulations in each case.Samples stored by RNBB Biobanks are provided on a non-profit basis to researchers who require them for biomedical research purposes. Only costs of procurement, maintenance and handling will be passed on. The applicant undertakes to pay these expenses. The amount will be determined by each of the Biobanks that collaborate.The biological material provided by IdiPAZ Biobank should be used under the biosecurity conditions laid down by the legislation in force, in particular as regards its transport, the destruction of surpluses and waste that have been in direct contact with the samples.*Se debe utilizar el material biológico proporcionado por el Biobanco en las condiciones de bioseguridad establecidas por la legislación vigente, especialmente en lo que se refiere a su transporte, a la destrucción de excedentes y de residuos que hayan estado en contacto directo con las muestras.*The researcher assumes full responsibility for the proper and safe handling of the material under appropriate biosafety conditions and by trained personnel in the researche's laboratory in order to ensure appropriate risk containment.1. IdiPAZ Biobank will not be liable for damage caused during transport of the material.

The material is provided for the sole purpose of research use, which must be subject to the usual ethical criteria, and never for profit. It is expressly prohibited to supply them to third parties without the relevant authorization of this Biobank.The researcher undertakes to preserve the samples in an appropriate manner, as well as to maintain the traceability of the samples. In addition to ensuring at all times the confidentiality of the samples and their associated data.Any incident that due to its relevance may affect the preservation, traceability or confidentiality of the samples must be communicated to IdiPAZ Biobank.According to LIBM 14/2007, RNBB biobanks may only assign for each project the minimum amount of tissue that will allow the objectives proposed by the researcher to be achieved in the report of the study for which the samples are requested.The investigator undertakes to destroy or return to the Biobank, the surplus material once the project is completed.The researcher undertakes to send a copy of the scientific articles (failing the DOI thereof) and communications resulting from the research carried out using the requested material within 2 years from the completion of the project. |
| In \_\_\_\_\_\_\_\_\_\_\_\_\_on\_\_\_ de \_\_\_\_\_\_\_\_\_ del 20\_\_\_\_Name and Signature of the Applicant: | En \_\_\_\_\_\_\_\_\_\_\_\_\_a \_\_\_ de \_\_\_\_\_\_\_\_\_ del 20\_\_\_\_Name and Signature of the RMO: |