



TCRB Specimen Collection Form

Attachment #2: RE-SOP-100

Version: 1.00

Issue Date: 03/29/2012

Part I. Patient Demographics and Specimen Collection

Patient Number: _____

Bio-Bank Site Name: _____

Assigning Hospital or Clinic: _____

Collection Personnel: _____

Vital Status: _____

Consent Taken: Yes No

Race: American Indian or Alaska Native Asian

Prior Treatment/ Neoadjuvant Therapy: Yes No

Black or African American Native Hawaiian or

Gender: Male Female Unknown

Pacific Islander White Not Reported

Ethnicity: Hispanic Non-Hispanic Unknown

Unknown

| Tumor Specimen | | Barcode: | Label: |
|---|--------------------------|---|--------|
| Tumor Type: <input type="checkbox"/> Solid Primary <input type="checkbox"/> Metastatic <input type="checkbox"/> Hematopoietic <input type="checkbox"/> Other: _____ | | | |
| Clinical Diagnosis: | | Collection Date: | |
| Preservation Protocol: | | Specimen Amount (circle) mg / ml: | |
| Freeze Type: <input type="checkbox"/> LN2 <input type="checkbox"/> Isopentane / Dry Ice Bath | Storage Temperature (C): | Warm Ischemia Time (min): (Time from devascularization to freezing) | |
| Comments: | | | |
| Pathology Diagnosis (if available) | | | |
| Disease Diagnosis (ICDO Morphology Axis): | | | |
| Anatomic Site (ICDO Topography Axis): | | | |

| Normal Specimen | | Barcode: | Label: |
|---|--|------------------|---|
| Tube Type/ Preservative: | | | |
| Clinical Diagnosis: | | | |
| Amount in Tube: | | (circle) mg / ml | Collection Date: |
| Anatomic Collection Site: <input type="checkbox"/> Skin <input type="checkbox"/> Adjacent Normal <input type="checkbox"/> Blood <input type="checkbox"/> Other: | | | Normal is from a satisfactory source: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Comments: | | | |

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Part II. Tumor Aliquot Processing

| Tumor Aliquots | | | |
|--|------------------|-----------------|--------------------------|
| SOP Section 8. Order of Specimen Processing | | | |
| | | Parent Barcode: | Parent Label: |
| 1. Intended Aliquot Use: <input type="checkbox"/> DNA <input type="checkbox"/> RNA <input type="checkbox"/> Xenograft and/or Cell Culture <input type="checkbox"/> Banked As Is <input type="checkbox"/> Other: | Aliquot Barcode: | | Preservation Method: |
| | Aliquot Label: | | Storage Temperature (C): |
| 2. Intended Aliquot Use: <input type="checkbox"/> DNA <input type="checkbox"/> RNA <input type="checkbox"/> Xenograft and/or Cell Culture <input type="checkbox"/> Banked As Is <input type="checkbox"/> Other: | Aliquot Barcode: | | Preservation Method: |
| | Aliquot Label: | | Storage Temperature (C): |
| 3. Intended Aliquot Use: <input type="checkbox"/> DNA <input type="checkbox"/> RNA <input type="checkbox"/> Xenograft and/or Cell Culture <input type="checkbox"/> Banked As Is <input type="checkbox"/> Other: | Aliquot Barcode: | | Preservation Method: |
| | Aliquot Label: | | Storage Temperature (C): |
| 4. Intended Aliquot Use: <input type="checkbox"/> DNA <input type="checkbox"/> RNA <input type="checkbox"/> Xenograft and/or Cell Culture <input type="checkbox"/> Banked As Is <input type="checkbox"/> Other: | Aliquot Barcode: | | Preservation Method: |
| | Aliquot Label: | | Storage Temperature (C): |
| 5. Intended Aliquot Use: <input type="checkbox"/> DNA <input type="checkbox"/> RNA <input type="checkbox"/> Xenograft and/or Cell Culture <input type="checkbox"/> Banked As Is <input type="checkbox"/> Other: | Aliquot Barcode: | | Preservation Method: |
| | Aliquot Label: | | Storage Temperature (C): |

Collection Forms Instructions

Each Part of the *TCRB Specimen Collection Form* represents a time point in the collection protocols. Part I. is to be filled out at time of tissue procurement. Part II. is to be filled out during laboratory processing of the tumor specimen. This data or additional data may also be directly entered into TCRB Acquire, <https://tcrbacquire.research.bcm.edu/>

Specimen Collection Form Part I Instructions

Tumor or Normal Specimen Barcode and Label Fields:

Sticking a printed copy of the respective specimen label or barcode on the form is an accurate method to complete these fields. The label may also be hand written, but a copy of the printed label is preferred to eliminate transfer errors.

Specimen Collection Form Part II Instructions

Intended Aliquot Use Field:

For this field, select the Aliquot Type that represents the intended designation for each Aliquot. Some Aliquots are sent to HGSC or other labs for derivative creation and the actual aliquot may be completely used during this process, such as DNA extraction. The link from the tumor aliquot and the child derivative is important to record for TCRB banking records and because it is no longer available for future tissue distribution. The descriptions below, explain which value should be toggled in the Intended Aliquot Use field.

Value Descriptions:

- Toggle DNA for aliquots that are to be shipped to HGSC for DNA isolation.
- Toggle RNA for aliquots that are to be shipped to HGSC for RNA isolation.
- Toggle Xenograft and/or Cell Culture, for aliquots that are to be shipped for either cell culture or Xenograft creation.
- Toggle Banked As Is, for any aliquot being reserved at the collection site for TCRB future use. For sites not currently sending specimen for derivative creation, this value can be used and then changed after the aliquots are distributed.
- Toggle Other and indicate the derivative type, for aliquots to be used for the creation of other derivative types not listed.

Preservation Method Field:

For this field, please indicate the method used in preserving the aliquot. Often the aliquot will be preserved with the same method the parent tumor is preserved; others will be specific to the derivative to be created. Please indicate the method, such as FFPE, RNA later, TXCCR transport media, etc. as appropriate in this field.