

## Biological Sample and Shipment Notification Form - PBMC and Buffy Coat

Please email or fax the form on or prior to the date of shipment

Sample Type	Number of Tubes	Tube Type	Shipment
Whole blood for PBMC isolation	2	Sodium Heparin (Green-Top) Blood Collection Tube (10ml)	Room Temperature Must be shipped and received within 24 hours of collection
Whole blood for DNA extraction	2	EDTA (Lavender-Top) Blood Collection Tube (10ml)	Room Temperature Must be shipped and received within 24 hours of collection

To: Kelley Faber

Email: alzstudy@iu.edu

Phone: 1-800-526-2839

### General Information:

UPS Tracking #: \_\_\_\_\_

Site Coordinator: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Kit Barcode

### Study: AD Family-Based Study

Site ID: \_\_\_\_\_ Family ID: \_\_\_\_\_ Individual ID: \_\_\_\_\_

Sex: M F

Year of Birth: \_\_\_\_\_

Visit (please circle one): 1 2 3 4 5 6 7 8 9 10

### Blood Collection:

Date Drawn: \_\_\_\_\_ [MM/DD/YYYY] Time of Draw: \_\_\_\_\_ [HH:MM]

Original Volume Drawn (2 x NaHep Green-Top): \_\_\_\_\_ (mL)

Original Volume Drawn (2 x Lavender-Top): \_\_\_\_\_ (mL)

### Notes:

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**\*\*If collected by contracted mobile phlebotomist: complete at time of blood collection**

Blood collection completed by: \_\_\_\_\_ (name)

Company: \_\_\_\_\_

Contact phone: \_\_\_\_\_