

ACAD U19 Blood Biological Sample and Shipment Notification Form Guide

Zoë McManus, NCRAD Coordinator for ACAD

zdpotter@iu.edu

Site ID: _____ Participant ID: _____

Blood Sample and Shipment Notification Form

Please email this form prior to the date of shipment.

To: Zoë McManus Email: alzstudy@iu.edu and zdpotter@iu.edu Phone: 1-800-526-2839	
General Information: _____	UPS tracking #: _____
From: _____	Date: _____
Phone: _____	Email: _____
Study: <input checked="" type="checkbox"/> ACAD U19 <input type="checkbox"/> ADRC ADRC PT ID: _____ (if applicable) <input type="checkbox"/> Co-Enrolled in a study other than ADRC	
GUID: _____	
Sex: M F Year of Birth: _____	
visit (circle number): 1 2 3 4 5	Kit #: _____ KIT LABEL/BARCODE
Visit (circle letter): a b c d e	
Blood Collection:	
1. Date Drawn: _____ [MMDDYY]	2. Time of Draw: _____ [HHMM]
3. Last date subject ate: _____ [MMDDYY]	4. Last time subject ate: _____ [HHMM]
Blood Processing:	
Serum (Gold-Top) Tube (5 mL)	
Time spin started: _____ [HHMM]	
Duration of centrifuge: _____ Minutes	
Temp of Centrifuge: _____ °C	
Rate of centrifuge: _____ x g	
Time aliquoted: _____ [HHMM]	
Number of 1.5 mL serum aliquots created (red-cap): _____	
If applicable, volume of residual serum aliquot (less than 1.5 mL in blue cap): _____ mL	
If applicable, specimen number of residual serum aliquot (last four digits): _____	
Original blood volume drawn (1 x 5 mL SST collection tube): _____ mL	
Time aliquots placed in freezer: _____ [HHMM]	
Storage temperature in freezer: _____ °C	
Plasma & Buffy Coat (Purple-top) Tube (10 mL)	
Time spin started: _____ [HHMM]	
Duration of centrifuge: _____ Minutes	
Temp of Centrifuge: _____ °C	
Rate of centrifuge: _____ x g	
Time aliquoted: _____ [HHMM]	
Number of 1.5 mL plasma aliquots created (purple-cap): _____	
If applicable, volume of residual plasma aliquot (less than 1.5 mL in blue cap): _____ mL	
If applicable, specimen number of residual plasma aliquot (last four digits): _____	
Original blood volume drawn (2 x 10 mL EDTA collection tube): _____ mL	EDTA #1: _____ mL EDTA #2: _____ mL
Time aliquots placed in freezer: _____ [HHMM]	
Storage temperature in freezer: _____ °C	
Buffy coat aliquot specimen numbers (last four digits): _____	Buffy Coat #1: _____ Buffy Coat #2: _____
Buffy coat volumes (~1.0 mL in gray-cap): _____	Buffy Coat #1: _____ mL Buffy Coat #2: _____ mL
Notes:	
E.g., hemolysis, blood is coagulated, thick or cloudy plasma, issues with buffy coat collection - please specify, etc.	

Enter GUID here. (Section 4.0 of MOP)

Check box next to the Participant's Sex
(M = Male, F = Female)

Enter the participant's Year of Birth

Circle Visit Number

1 = Year 1 (newly enrolled)
2 = Year 2
3 = Year 3
etc.

Circle Visit Letter

a = First visit of the year
b = Second visit of the year
c = Third visit of the year
etc.

Enter temperature of centrifugation (i.e., 4°C)
and rate of centrifugation (i.e., 2000 x g)

Enter the last 4-digits of the residual serum
aliquot (if applicable)

Enter the original blood volume drawn in
each SST (Gold-Top) Collection Tube (5mL) in
mL.

Site ID = 3-digit Site Number

Participant ID = 5-digit Participant Number

Coordinator Contact Information and
Sample Tracking Information

If the participant is co-enrolled in the ADRC
study, please check the "ADRC" box and fill
in the ADRC Patient ID in the "ADRC PT ID"
field.

If the ACAD participant is co-enrolled in a study
other than ADRC, please check this box.

Place Kit Number label here (Section 7.1 of
MOP)

Enter time and date of blood collection in
HHMM format.

Enter last date and time participant ate in
HHMM format.

Enter time centrifugation started in HHMM
format.

Enter duration of centrifugation in minutes
(i.e., 10 minutes)

Enter the time the samples were aliquoted
in HHMM format.

Enter the number of 1.5 mL serum aliquots
that were created.

Enter the volume in mL of the residual
serum aliquot (if applicable)

Site ID: _____ Participant ID: _____

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General Information: _____	UPS tracking #: _____
From: _____	Date: _____
Phone: _____	Email: _____
Study: <input checked="" type="checkbox"/> ACAD U19 <input type="checkbox"/> ADRC ADRC PT ID: _____ <input type="checkbox"/> Co-Enrolled in a study other than ADRC GUID: _____ (if applicable)	
Sex: M F Year of Birth: _____	Kit #: <div style="border: 1px dashed black; padding: 10px; text-align: center;">KIT LABEL/BARCODE</div>
Visit (circle number): 1 2 3 4 5	
Visit (circle letter): a b c d e	
Blood Collection:	
1. Date Drawn: _____ [MMDDYY]	2. Time of Draw: _____ [HHMM]
3. Last date subject ate: _____ [MMDDYY]	4. Last time subject ate: _____ [HHMM]

Blood Processing:	
Serum (Gold-Top) Tube (5 mL)	
Time spin started: _____	_____ [HHMM]
Duration of centrifuge: _____	_____ Minutes
Temp of Centrifuge: _____ °C	
Rate of centrifuge: _____ x g	
Time aliquoted: _____	_____ [HHMM]
Number of 1.5 mL serum aliquots created (red-cap): _____	
If applicable, volume of residual serum aliquot (less than 1.5 mL in blue cap): _____	_____ mL
If applicable, specimen number of residual serum aliquot (last four digits): _____	
Original blood volume drawn (1 x 5 mL SST collection tube): _____	_____ mL
Time aliquots placed in freezer: _____	_____ [HHMM]
Storage temperature in freezer: _____	_____ °C
Plasma & Buffy Coat (Purple-top) Tube (10 mL)	
Time spin started: _____	_____ [HHMM]
Duration of centrifuge: _____	_____ Minutes
Temp of Centrifuge: _____ °C	
Rate of centrifuge: _____ x g	
Time aliquoted: _____	_____ [HHMM]
Number of 1.5 mL plasma aliquots created (purple-cap): _____	
If applicable, volume of residual plasma aliquot (less than 1.5 mL in blue cap): _____	_____ mL
If applicable, specimen number of residual plasma aliquot (last four digits): _____	
Original blood volume drawn (2 x 10 mL EDTA collection tube): _____	EDTA #1: _____ mL EDTA #2: _____ mL
Time aliquots placed in freezer: _____	_____ [HHMM]
Storage temperature in freezer: _____	_____ °C
Buffy coat aliquot specimen numbers (last four digits): _____	Buffy Coat #1: _____ Buffy Coat #2: _____
Buffy coat volumes (~1.0 mL in gray-cap): _____	Buffy Coat #1: _____ mL Buffy Coat #2: _____ mL
Notes: _____	
<i>E.g., hemolysis, blood is coagulated, thick or cloudy plasma, issues with buffy coat collection - please specify, etc.</i>	

Enter the time the aliquots were placed in the freezer in HHMM format.

Enter the temperature of the freezer the samples are stored in (i.e., -80°C).

Enter the last 4-digits of the buffy coat aliquots (the barcode is etched on the cryovial).



Enter the volume for Buffy Coat #1 and #2, corresponding with the barcodes in the field above.

Buffy Coat #1 was created from EDTA #1 and Buffy Coat #2 was created from EDTA #2.

Enter the original blood volume drawn in each EDTA (Purple-Top) Collection Tube (10mL) in mL.

Enter any non-conformance details here that NCRAD should make note of.