

## Appendix B: Biological Sample and Shipment Notification Form

*Please email the form on or prior to the date of shipment.*

To: Diont'e Keys Email: [alzstudy@iu.edu](mailto:alzstudy@iu.edu) Phone: 1-800-526-2839

**General Information:**

**UPS tracking #:** \_\_\_\_\_

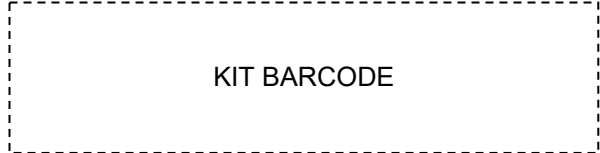
From: \_\_\_\_\_ Date: \_\_\_\_\_

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

**Study:** ACE

**Visit:** BL M12 M24

**Site ID:** \_\_\_\_\_ **ACE PTID #:** \_\_\_\_\_



**Sex:** M F **Year of Birth:** \_\_\_\_\_

**Stool Collected?** Yes No

**Stool Collection:**

Date of collection: _____ [MM/DD/YY]	Time of collection: _____ [HHMM]
Date subject last ate: _____ [MM/DD/YY]	Time subject last ate: _____ [HHMM]
Storage temperature in freezer: _____ °C	Time frozen: _____ [HHMM]

**Blood Collection:**

Date Drawn: _____ [MM/DD/YY]	Time of Draw: _____ [HHMM]
Date subject last ate: _____ [MM/DD/YY]	Time subject last ate: _____ [HHMM]

**Blood Processing:**

Serum (Red-top) Tube (10 mL)		Plasma & Buffy Coat (Lavender-top) Tube (10 mL)	
Time spin started: _____ [HHMM]	_____ [HHMM]	Time spin started: _____ [HHMM]	_____ [HHMM]
Duration of centrifuge: _____ Minutes	_____ Minutes	Duration of centrifuge: _____ Minutes	_____ Minutes
Temp of Centrifuge: _____ °C	_____ °C	Temp of Centrifuge: _____ °C	_____ °C
Rate of centrifuge: _____ x g	_____ x g	Rate of centrifuge: _____ x g	_____ x g
Original volume drawn (1 x 10 mL tube): _____ mL	_____ mL	Original volume drawn (2 x 10 mL tube): _____ mL	_____ mL
Time aliquoted: _____ [HHMM]	_____ [HHMM]	Time aliquoted: _____ [HHMM]	_____ [HHMM]
Number of 1.5 mL serum aliquots created (red cap): _____	_____	Number of 1.5 mL plasma aliquots created (lavender cap): _____	_____
If applicable, volume of residual serum aliquot (<1.5 mL in blue cap): _____ mL	_____ mL	If applicable, volume of residual plasma aliquot (<1.5 mL in blue cap): _____ mL	_____ mL
If applicable, last four digits of residual serum aliquot: _____	_____	If applicable, last four digits of residual plasma aliquot: _____	_____
Time aliquots placed in freezer: _____ [HHMM]	_____ [HHMM]	Time aliquots placed in freezer: _____ [HHMM]	_____ [HHMM]
Storage temperature in freezer: _____ °C	_____ °C	Storage temperature in freezer: _____ °C	_____ °C
		Buffy coat aliquot created (gray cap, one per 10 mL EDTA tube)	_____ mL
		Buffy coat aliquot created (gray cap, one per 10 mL EDTA tube)	_____ mL

**Notes:**