## Appendix B: Blood Sample and Shipment Notification Form

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

<table>
<thead>
<tr>
<th>From: __________________________</th>
<th>UPS tracking #: __________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone: __________________________</td>
<td>Email: __________________________</td>
</tr>
</tbody>
</table>

### Study: APOE  Sex: □ M □ F  Year of Birth: ____________  

APOE ID: ____________  
GUID: __________________________  
PT ID: __________________________ □ N/A  

### Blood Collection:

<table>
<thead>
<tr>
<th></th>
<th>Specimen Number (Last four digits):</th>
<th>Original volume drawn: _____ ml</th>
<th></th>
<th>Specimen Number (Last four digits):</th>
<th>Original volume drawn: _____ ml</th>
</tr>
</thead>
<tbody>
<tr>
<td>PBMC (NaHep Tubes) □ N/A</td>
<td>#1</td>
<td></td>
<td>RNA (PAXgene™ Tube) □ N/A</td>
<td>#2</td>
<td></td>
</tr>
</tbody>
</table>

### Blood Processing:

#### EDTA #1 specimen number (Last four digits): _____

- Original blood volume of EDTA #1: _____ ml  
- Time spin started: _____ [HHMM]  
- Temp of centrifuge: _____ °C  
- Time aliquoted: _____ [HHMM]  
- If applicable, volume of residual plasma aliquot (less than 1.5 ml in blue cap): _____ ml  
- Buffy coat #1 specimen number (Last four digits): _____  
- Buffy coat #1 volume: _____ ml  

#### EDTA #2 specimen number (Last four digits): _____

- Original blood volume of EDTA #2: _____ ml  
- Duration of centrifuge: _____ mins  
- Rate of centrifuge: _____ x g  
- Number of 1.5 ml plasma aliquots created (purple cap, up to 6): _____  
- If applicable, specimen number of residual plasma aliquot (Last four digits): _____  
- Buffy coat #2 specimen number (Last four digits): _____  
- Buffy coat #2 volume: _____ ml  

#### Serum (Serum Tube) □ N/A

- Time spin started: _____ [HHMM]  
- Temp of centrifuge: _____ °C  
- Time aliquoted: _____ [HHMM]  
- Number of 1.5 ml serum aliquots created (red cap, up to 3): _____  
- If applicable, volume of residual serum aliquot (less than 1.5 ml in blue cap): _____ ml  

### Notes:_____________________________________________________________________________________________