



UAB Udall Training Webinar

BIOSPECIMEN COLLECTION & PROCESSING

A solid blue horizontal bar spanning the width of the slide at the bottom.

Overview

1. Specimen uniformity and quality
2. Site Equipment
3. Procedures
 - Kit Ordering
 - Sample Labels
 - Sample Collection and Processing
 - Shipping Closures
4. Contact Information

Specimen Uniformity and Quality

GENERAL REMINDERS

Specimen Uniformity and Quality

Most biomarkers are sensitive to *time* and *temperature*

- Standardization of processing across sites is key
- Reference the *BioSEND Specimen Collection, Processing, and Shipment Manual* as needed
- Do not replace or supplement any kit components without first receiving approval from BioSEND/NINDS

Site Equipment

Sites will need to supply the following items:

- Gloves
- Alcohol wipes
- Butterfly needles
- Tourniquet
- Gauze pads
- Bandages
- Microcentrifuge tube rack
- Sharps bin and lid
- Crushed ice
- Pipettes and pipette tips
- Centrifuge capable of maintaining 4°C
- -80°C Freezer
- Dry ice

Biospecimen Collection Protocol

	BL	12M	24M	36M	48M	60M	72M	84M
Buffy coat (2 aliquots)	X	X	X	X	X	X	X	X
Plasma (6 x 1ml)	X	X	X	X	X	X	X	X
CSF (10 x 1ml)	X							

Kit Ordering – Biosend.org


NINDS BioSEND


[Accessing Biospecimens](#)[Banking Samples](#)[Active Studies](#)[About BioSEND](#)

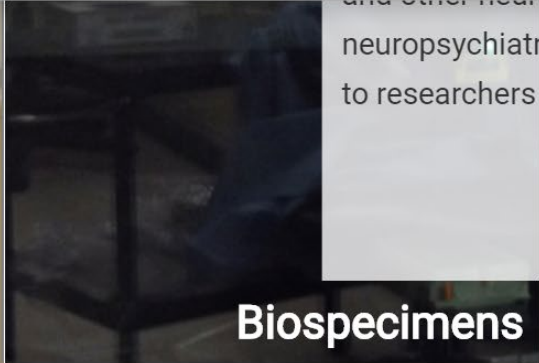
[AJPDP Study Resources](#)[CHANGE-HD Study Resources](#)[DLB Study Resources](#)[DVRP Study Resources](#)[EpiBioS4Rx Study Resources](#)[LBD Study Resources](#)[LETBI Study Resources](#)

[MBPS Study Resources](#)[PBS Study Resources](#)[PHD3 Study Resources](#)[PSP Study Resources](#)[SBPD Study Resources](#)[CRC-SCA Study Resources](#)[READISCA Study Resources](#)

[SPARX3 Study Resources](#)[Udall Study Resources](#)[Holiday Closures](#)[Shipping Information](#)[Sample Shipment Form](#)

**About BioSEND**

**Banking Samples**

**Biospecimens**


Kit Ordering

Direct link to kit ordering system:

<http://kits.iu.edu/biosend/udall/>



Morris K. Udall Centers of Excellence for Parkinson's Disease Research Active Study Page



Welcome Udall Study staff, coordinators, and PIs. This section encompasses study specific tools and resources for your reference. If you have any questions, comments, or new ideas please contact biosend@iu.edu or by phone directly at (317)278-0594.

Study Resources

- Kit Request Module
- Study Specific Sample Notification Forms
- Manual of Procedures
- Training Slides
- Site Listing

Downloads

- Sample Shipment Form (pdf)
- Iowa Manual
- Iowa Training Slides
- Michigan Manual
- Michigan Training Slides
- Minnesota Manual
- Minnesota Training Slides
- Rochester Manual
- Rochester Training Slides
- UAB Manual
- UAB Training Slides

Additional Resources

- Online Sample Form

Confirm Shipping Info

Confirm site information:

- Study site
- Shipping address
- Contact name
- Email
- Phone Number

Indiana University

Carolyn Dunifon
Indiana University School of Medicine
351 West 10th Street
TK-217
Indianapolis, IN 46202
(317) 274-5751
biosend@iu.edu

Is the contact name above correct?

* must provide value

☐ Yes

☐ No

reset

Is the shipping address above correct?

* must provide value

☐ Yes

☐ No

reset

Is the e-mail address above correct?

* must provide value

☐ Yes

☐ No

reset

Kit Contents and Ordering

Kit Request Module

Study Site <small>* must provide value</small>	Indiana University	<div>Select your site from the drop-down list</div>
Indiana University School of Medicine Carolyn Dunifon Dept. of Medical & Molecular Genetics 351 West 10th Street, TK-318 Indianapolis, IN 46202-3002 (317) 274-5751 cdunifon@iu.edu		
Is the contact name above correct? <small>* must provide value</small>	<input type="radio"/> Yes <input checked="" type="radio"/> No	<div>Verify contact information and update if needed</div>
		reset
New Contact Name <small>* must provide value</small>	Claire Wegel	
Is the shipping address above correct? <small>* must provide value</small>	<input type="radio"/> Yes <input type="radio"/> No	reset
Is the e-mail address above correct? <small>* must provide value</small>	<input type="radio"/> Yes <input type="radio"/> No	reset
Is the phone number above correct? <small>* must provide value</small>	<input type="radio"/> Yes <input type="radio"/> No	reset

Kit Type

Kit Type

****Please allow two weeks for shipment****

* must provide value

- ☐ Baseline Visit Kit
- ☐ Annual Visit Kit
- ☐ CSF Visit Kit
- ☐ Supplemental Kit
- ☐ Extra Supplies

Please specify in comments if you need kits before the standard two week shipment time.

Multiple kit types available

Baseline Kits

- BioSEND creates ST numbers for baseline kits
- ST#s serve as the biorepository subject identifier
- Enter kit quantity

Kit Type **Please allow two weeks for shipment** <small>* must provide value</small>	<input checked="" type="checkbox"/> Baseline Visit Kit <input type="checkbox"/> Annual Visit Kit <input type="checkbox"/> CSF Visit Kit <input type="checkbox"/> Supplemental Kit <input type="checkbox"/> Extra Supplies
<small>Please specify in comments if you need kits before the standard two week shipment time.</small>	
Baseline Visit Kit Quantity <small>* must provide value</small>	<input type="text" value="2"/>

Important Note: ST-Numbers

Please note: the ST-Number provided in a BL kit can be used for any subject's BL visit. **This ST number is a subject identifier** and will need to stay linked to the patient through the entirety of the study.

Annual Visits

Kit Type **Please allow two weeks for shipment** <small>* must provide value</small>	<input type="checkbox"/> Baseline Visit Kit <input checked="" type="checkbox"/> Annual Visit Kit <input type="checkbox"/> CSF Visit Kit <input type="checkbox"/> Supplemental Kit <input type="checkbox"/> Extra Supplies <small>Please specify in comments if you need kits before the standard two week shipment time.</small>
Annual Visit Kit Quantity <small>* must provide value</small>	<input type="text" value="2"/>
1st Kit Visit ID	<input type="text" value="ST-00012345"/> <small>e.g. ST-00012345</small>
1st Kit Visit Month	<input type="text" value="12 Month"/>
2nd Kit Visit ID	<input type="text" value="ST-00012346"/> <small>e.g. ST-00012345</small>
2nd Kit Visit Month	<input type="text" value="36 Month"/>

Please provide ST-Number and time point. We are unable to complete your request without this information

CSF Kits

- CSF collection kits are ordered independently of BL and annual kits
- CSF labels will be included with all BL and annual kits, so that CSF kits may be paired with any visit/ID

Kit Type **Please allow two weeks for shipment** * must provide value	<input type="checkbox"/> Baseline or Annual Visit Kit <input type="checkbox"/> 6-Month Visit Kit <input checked="" type="checkbox"/> CSF Kit <input type="checkbox"/> Supplemental Kit <input type="checkbox"/> Extra Supplies <small>Please specify in comments if you need kits before the standard two week shipment time.</small>
CSF Sprotte® Needle Gauge * must provide value	<input checked="" type="radio"/> 22 <input type="radio"/> 24 reset
CSF Visit Kit Quantity * must provide value	<input type="text" value="2"/>

Supplemental Kit

Contains a variety of
extra kit components

Kit Type

****Please allow two weeks for shipment****

* must provide value

- ☐ Baseline or Annual Visit Kit
- ☐ 6-Month Visit Kit
- ☒ Supplemental Kit
- ☐ Extra Supplies

Please specify in comments if you need kits before the standard two week shipment time.

Supplemental Kit Quantity

* must provide value

If you need more than 10 kits or labels, please use the file upload option or submit multiple requests.

Comments

Expand

Each Supplemental Kit Contains:

- 2 100 ml absorbent sheets
- 2 6-tube bubble pouches
- 2 Cryoboxes
- 20 Siliconized sterile cryogenic vials (2 ml)
- 2 Screw-top centrifuge tubes (15 ml)
- 2 Screw-top centrifuge tubes (50 ml)
- 2 Biohazard bags
- 2 Vacutainer® - PAXGene® tubes (2.5 ml)
- 2 Monoject- Lavender-top EDTA tubes (10 ml)
- 2 Vacutainer® - Purple-top EDTA tubes (6 ml)
- 2 Vacutainer® - Red-top serum tubes (10 ml)
- 2 Disposable transfer pipettes (1ml)
- 2 Warning label packets

Extra Supplies

Allows you to choose specific supplies and particular quantities

Kit Type **Please allow two weeks for shipment** <small>* must provide value</small>		<input type="checkbox"/> Baseline or Annual Visit Kit <input type="checkbox"/> 6-Month Visit Kit <input type="checkbox"/> Supplemental Kit <input checked="" type="checkbox"/> Extra Supplies
		<small>Please specify in comments if you need kits before the standard two week shipment time.</small>
6-Tube Bubble Pouch	<input type="radio"/> 2 <input type="radio"/> 4	reset
Cryobox	<input type="radio"/> 2 <input type="radio"/> 4	reset
Siliconized Sterile Cryogenic Vial (2 ml)	<input type="radio"/> 10 <input type="radio"/> 20	reset
FedEx® return Airbill	<input type="radio"/> 2 <input type="radio"/> 4	reset
Lumbar Puncture Trays with Lidocaine	<input type="radio"/> 2 <input type="radio"/> 4	reset
Needles - Introducer	<input type="radio"/> 5	reset

Multiple Orders

Kit Type **Please allow two weeks for shipment** <small>* must provide value</small>	<input checked="" type="checkbox"/> Baseline or Annual Visit Kit <input type="checkbox"/> 6-Month Visit Kit <input checked="" type="checkbox"/> CSF Kit <input type="checkbox"/> Supplemental Kit <input checked="" type="checkbox"/> Extra Supplies <small>Please specify in comments if you need kits before shipment time.</small>
CSF Sprotte® Needle Gauge <small>* must provide value</small>	<input checked="" type="radio"/> 22 <input type="radio"/> 24
Baseline or Annual Visit Kit Quantity <small>* must provide value</small>	<input type="text" value="2"/> <small>If annual kit is selected, please provide the ST number of the subject for which you need a kit. Omitting this information will delay shipment, as we cannot complete your request without it.</small>
CSF Visit Kit Quantity <small>* must provide value</small>	<input type="text" value="2"/>

You can order more than one type of kit in a single kit request

Submit Request

- Click “Submit” to send order to BioSEND; staff will confirm receipt of your order
- Please allow two week turn-around time for kit shipments
- If urgent request needed, please note date needed by in comments and email BioSEND

NINDS BioSEND
Ninds Biosend LDB Kit Request System

Study Site: Scherzer, Clemens
* must provide value

Harvard Medical School - Scherzer, Clemens
Kara Page
65 Landsdowne St
Rm #327
Cambridge, MA 02139
(617) 768-8677
kjpage@partners.org
ksburke@partners.org

Is the contact name above correct?
* must provide value
☒ Yes
☐ No
[reset](#)

Is the shipping address above correct?
* must provide value
☒ Yes
☐ No
[reset](#)

Is the e-mail address above correct?
* must provide value
☒ Yes
☐ No
[reset](#)

Kit Type
****Please allow two weeks for shipment****
* must provide value

☐ Baseline or Annual Visit Kit
☐ 6-Month Visit Kit
☐ Supplemental Kit
☐ Extra Supplies

Please specify in comments if you need kits before the standard two week shipment time.

Comments

[Expand](#)

Submit

Sample Labeling

Labels are provided by Indiana University

- Please check that all samples are properly labeled with correct specimen type and visit

ST-10000123:

UDALL-PI:BL



BioSend

Case Labels

0001234567



BioSEND

ST-10001234

BL

PLASMA

Specimen Labels

Case Label

ST-10000123:

UDALL-PI:BL



BioSend



Subject Number



Study – Site & Visit

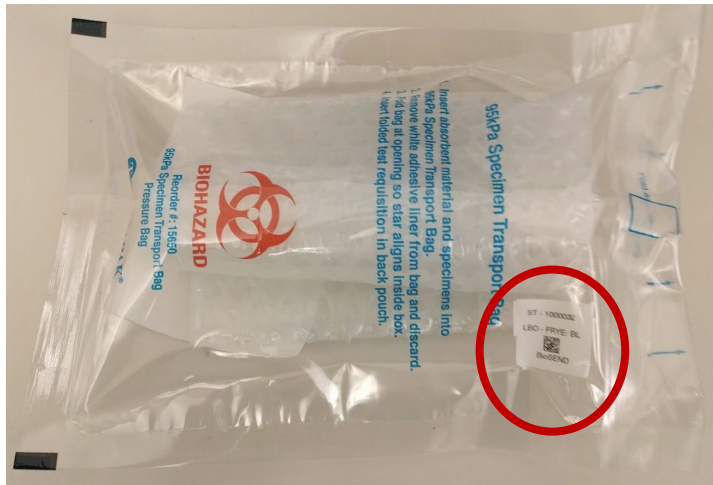


Biorepository Name

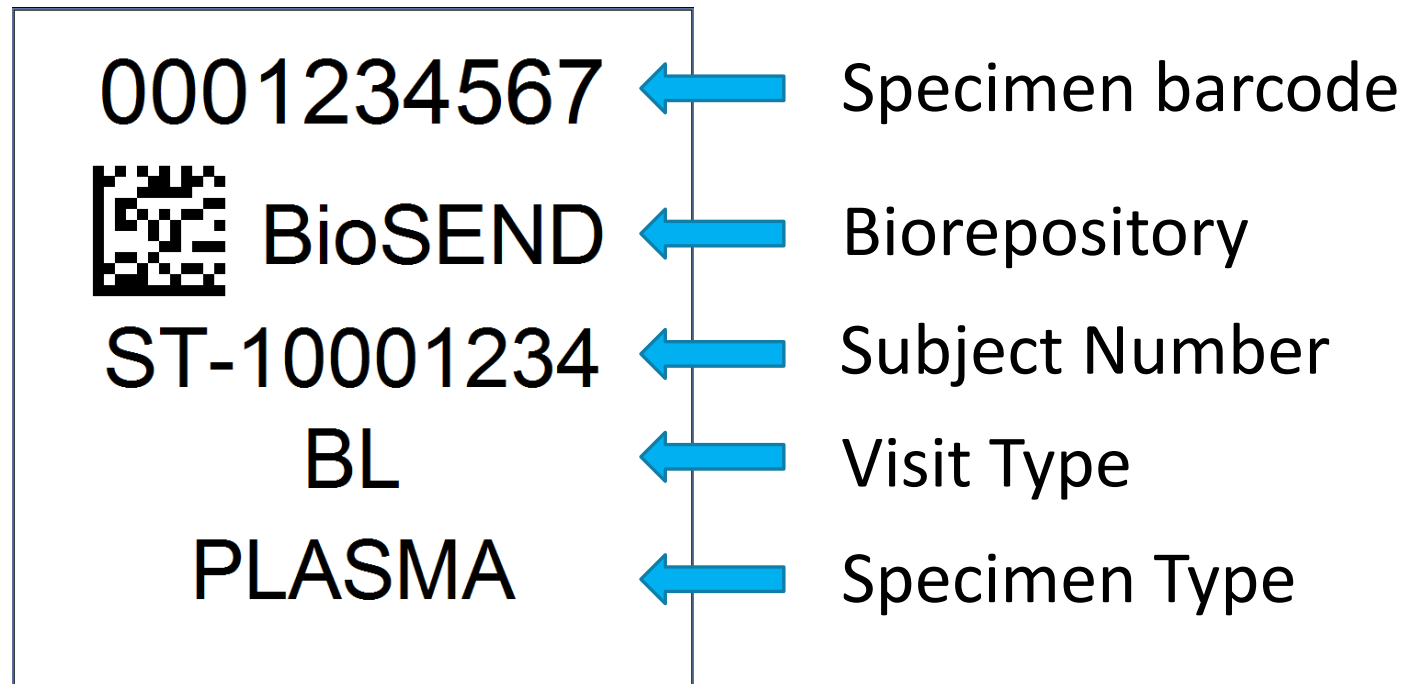
Case Labels

Case labels are placed:

- On the plastic biohazard bags
- On the lid of frozen shippers



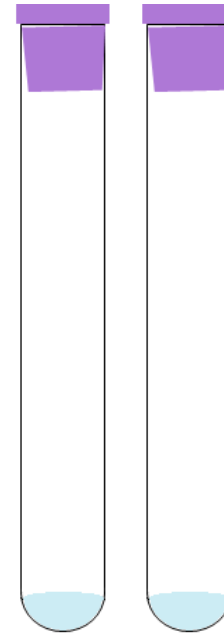
Specimen Label



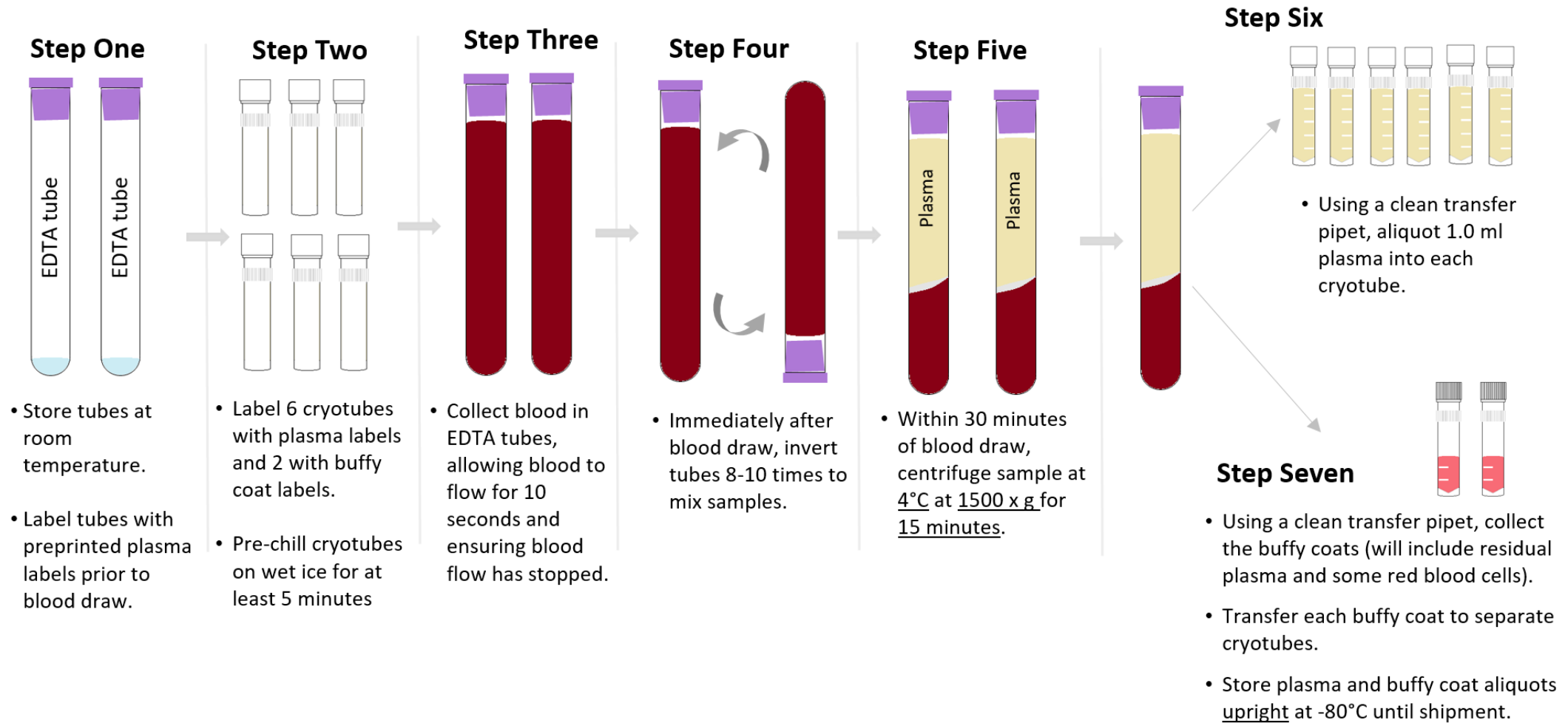
Sample Collection and Processing

EDTA for plasma and buffy coat

10ml EDTA



Sample Collection and Processing: Plasma & Buffy Coat

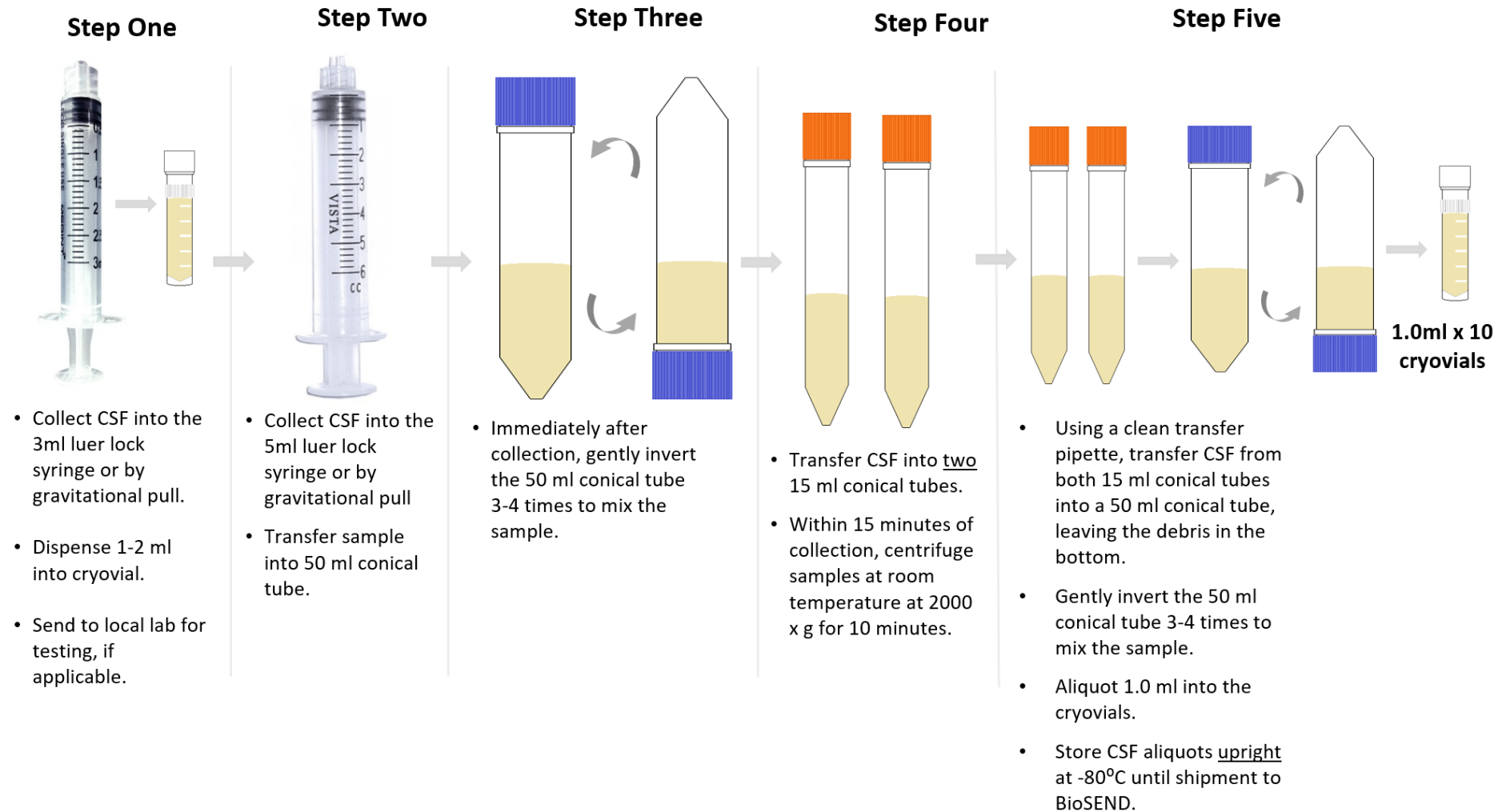


Blood Collection Troubleshooting

Most common issues with draw:

- Store collection tubes at room temperature
- Check expiration dates and keep extra tubes on hand
- Avoid vigorous mixing of collected sample
- Do not leave tubes uncentrifuged for longer than indicated time

Sample Collection and Processing: CSF



Shipping Samples: Frozen

Packing and Shipping Frozen Samples

- All other samples ship frozen
- Ship frozen samples on dry ice
- Frozen samples should be shipped **only** Monday through Wednesday
- Always fill carton to **top** with dry ice
- Do not pack shipment until the day of pickup



Shipping Samples: Frozen

Packing and Shipping Frozen Samples

- Shippers use approx. 10lbs of dry ice
- Place layer of dry ice in between cryoboxes



Shipping Frozen Samples

Hold packaged samples in a -80°C freezer until pickup.

Samples should be received at BioSEND within 2 weeks of collection.



Shipping Samples

Packing and Shipping Frozen Samples


Class 9 Dry Ice Label should not be covered with other stickers and must be completed, or courier will reject/return your package!

The image shows a Class 9 Dry Ice Label template. It features a large diamond shape with a black and white striped pattern. The label includes the following text and fields:

- Shipper's Declaration not Required.
- Dry Ice amount must be in kilograms.
- Note: 2 lbs. = 1 kg.
- Airwaybills / airbills must have the following:
 - 1. Dry Ice; 9; UN 1845
 - 2. $\frac{\text{Number p kgs}}{\text{X}} \frac{\text{wt}}{\text{Kg}}$
- Net weight of dry ice in kg (indicated by a red arrow pointing to the "kg." field)
- Dry Ice kg.
- Your name & address (indicated by a red arrow pointing to the "Shipper's Name and Address" field)
- Shipper's Name and Address
- UN 1845
- Consignee Name and Address (indicated by a red arrow pointing to the "Consignee Name and Address" field)
- IU information and address (indicated by a red arrow pointing to the "Consignee Name and Address" field)
- 9
- 06426 1/01 RRD

Shipping Samples

UPS resources available on BioSEND website



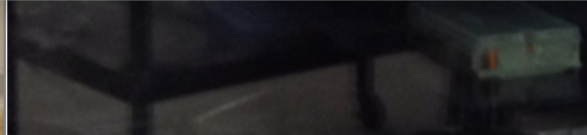


Accessing Biospecimens

Banking Samples

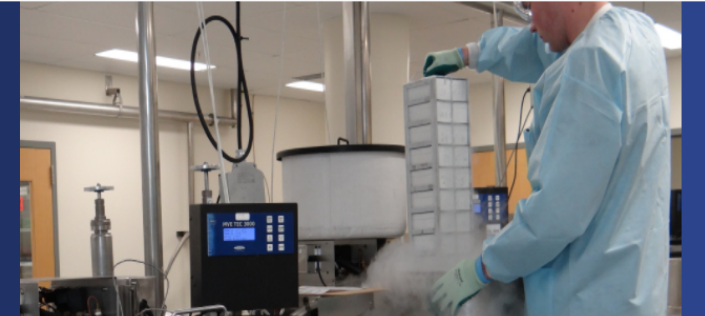
→ Active Studies

About BioSEND

AJPD Study Resources	MBPS Study Resources	SPARX3 Study Resources
CHANGE-HD Study Resources	PBS Study Resources	Udall Study Resources
DLB Study Resources	PHD3 Study Resources	Holiday Closures
DVRP Study Resources	PSP Study Resources	Shipping Information
EpiBioS4Rx Study Resources	SBPD Study Resources	Sample Shipment Form
LBD Study Resources	CRC-SCA Study Resources	Withdrawn Subject Notification
LETBI Study Resources	READISCA Study Resources	



Shipping Information



Shipping Samples

Links on this page to generate airwaybills, schedule pickups, request account, and view a guide for using the UPS ShipExec Thin Client system.

Shipping Address

BioSEND
Indiana University School of Medicine
351 West 10th Street
TK-217
Indianapolis, IN 46202

UPS Shipping Resources

To generate air waybills and schedule UPS pickups for shipments to BioSEND, please visit the UPS ShipExec™ Thin Client [website](#).

For instructions on how to use the UPS ShipExec™ Thin Client website, please refer to the [BioSEND UPS ShipExec™ Thin Client Guide](#)

To request a new user account for UPS ShipExec™ Thin Client or to request an update to your site's address in the system, please [use this form](#) to submit your request.

Additional Resources

[Sample Submission Form](#)
[UPS ShipExec™ Guide](#)

Contact Us

biosend@iu.edu
317-278-0594


Shipping Samples: Frozen

Please notify BioSEND ahead of shipment

- Email biosend@iu.edu with copy of Sample Form and tracking number
- OR use Online Sample form on biosend.org

Shipping Samples: Sample Form

Sample Record and Shipment Notification



Please fill out and submit this form when shipping samples to BioSEND. After submission, please print a copy of the form to include with your submission. If you prefer to not use the online system, you may download a pdf version of this form from the sidebar to the right.

Contact Information

Site Name/Number

Coordinator

Telephone

Email

Subject Information

Study

Clinical ID

GUID

Subject ID (ST# from labels)

Gender

Visit Type

Sample Information

Date Sample(s) Shipped

FedEx Tracking Number

Draw Date	Specimen Type	# of Tubes Sent	Notation of Problems
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Shipping Samples: Closures

Date	Holiday
January 1	New Year's Day
3 rd Monday in January	Martin Luther King, Jr Day
4 th Monday in May	Memorial Day
June 19	Juneteenth (observed)
July 4	Independence Day (observed)
1 st Monday in September	Labor Day
4 th Thursday in November	Thanksgiving
4 th Friday in November	Friday after Thanksgiving
December 25	Christmas

*Please also consider weather when shipping. UPS will post service updates on their webpage. Please reach out to BioSEND if you are unsure if it is safe to ship.

Contacts

Indiana University

General Questions/Shipment Notifications:

biosend@iu.edu

Biorepository Project Manager:

Claire Wegel

cwegel@iu.edu

Tel: 317.278.6158

Biorepository Clinical Research Coordinator:

Carolyn Dunifon

cdunifon@iu.edu

Tel: 317.274.5751