

Principal Investigator Information

PI Name:

Email:

Department:

PLRC Member: Yes No

Address:

Phone:

Fax:

Have you completed the following required CITI training courses for biomedical researchers?

Human Subjects Protection: Yes No

Privacy & Information Security: Yes No

Responsible Conduct of Research: Yes No

Study Details

Study Title:

IRB/IACUC Approval:

Attach supporting documentation

Funding Support: Yes No **Grant Account Number:**

Funding Source:

Research Synopsis

Describe the objectives and significance of the project; methods; analysis and plan:

FFPE Tissue

Disease(s):

Number of Subjects:

Unstained Slides: /subject

Special and Immunohistochemical Stains Requested:

Are prospective collections required? No Yes

Justification of number of subjects and quantity of slides:

Associated Data: Age Sex Microscopic Description Other:

Tissue Microarray Access/Creation: Please contact Kate Smith at smithkm13@upmc.edu for more info.

Serum & Frozen Tissue

Disease(s):

Number of Subjects:

Serum Volume:

Frozen Tissue Volume:

Are prospective collections required? No Yes

Justification of number of subjects and sample volume:

Other

Digital Slide Scanning:

Number of Slides:

Other Ancillary Studies:

Hepatocytes

Human Murine Rat

Non-Parenchymal Cells

Murine Rat

Tumor Cell Line

Human Murine Rat

Cancer Type:

Number of Cells:

Mouse Blood Analysis:

ALT AST BR direct BR total GGT ALP ALB

Volume for all tests is approximately 400-500ul.

Volume for a single test is approximately 100-200ul.

Please contact Kate Smith (smithkm13@upmc.edu) for questions regarding CBRPC services, pricing and billing.