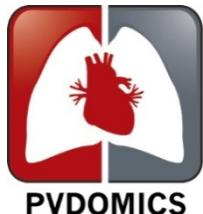


# Processing, Aliquoting, Recording and Storing of C1 Biospecimens



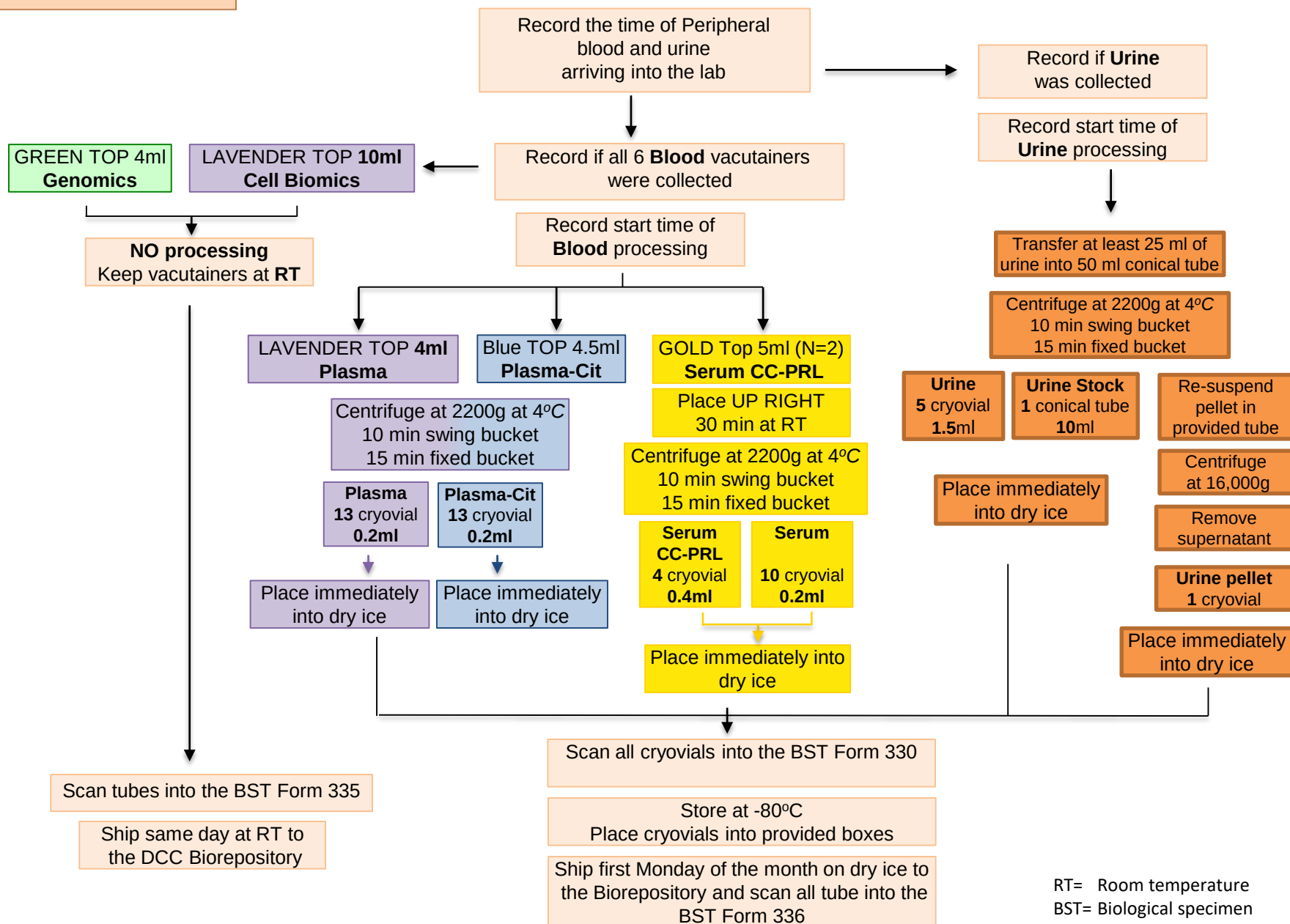
## **NHLBI Pulmonary Vascular Disease Phenomics Program**

*Funded by the National Heart, Lung, and Blood Institute of the  
National Institutes of Health with support from  
the Pulmonary Hypertension Association*

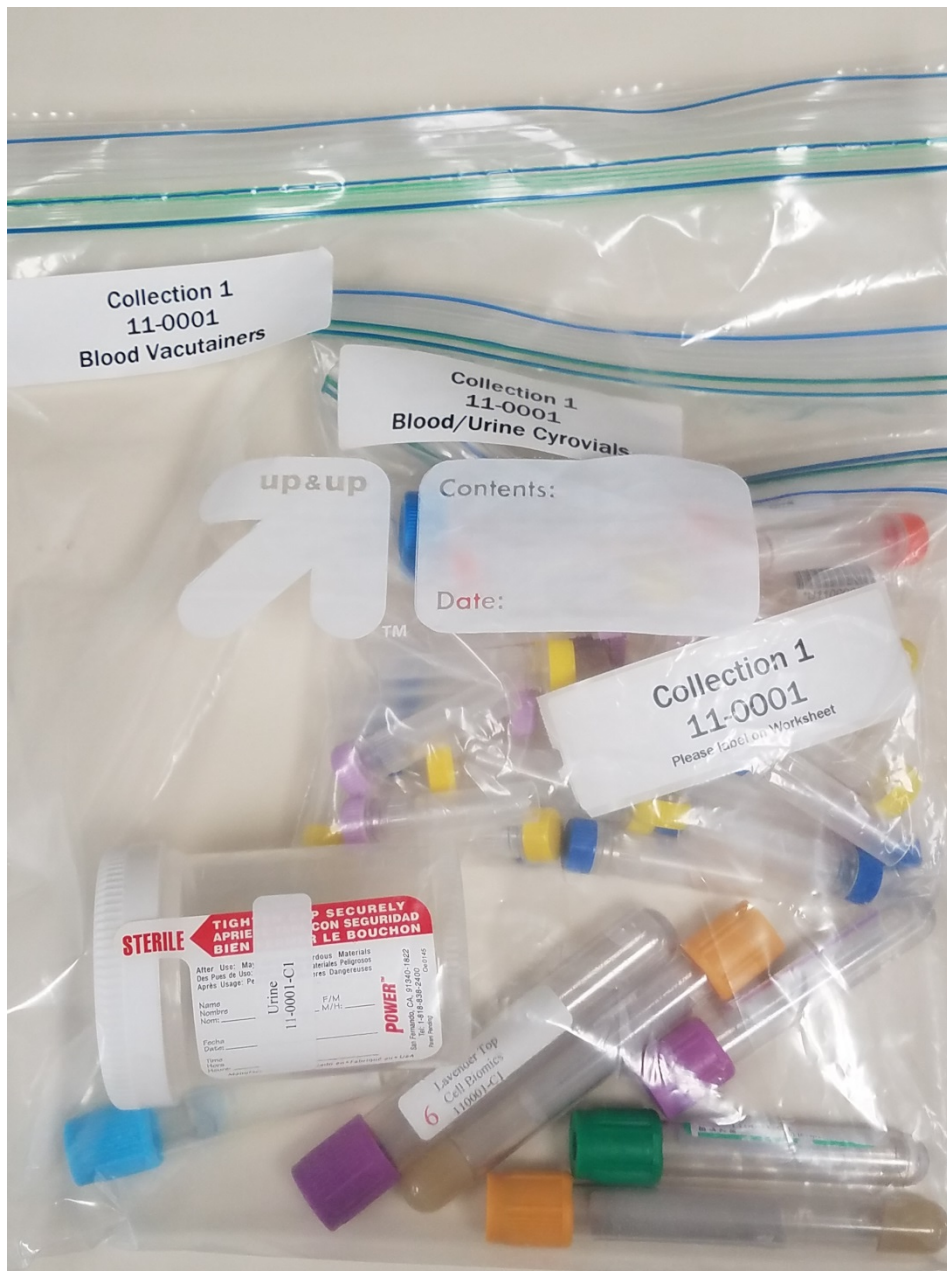
Collection 1 is the same  
for **HEALTHY SUBJECTS**

## Appendix 34.1: PVDOMICS OMICS Blood and Urine Collection 1: Processing, Aliquoting, Recording and Storing of Biospecimens

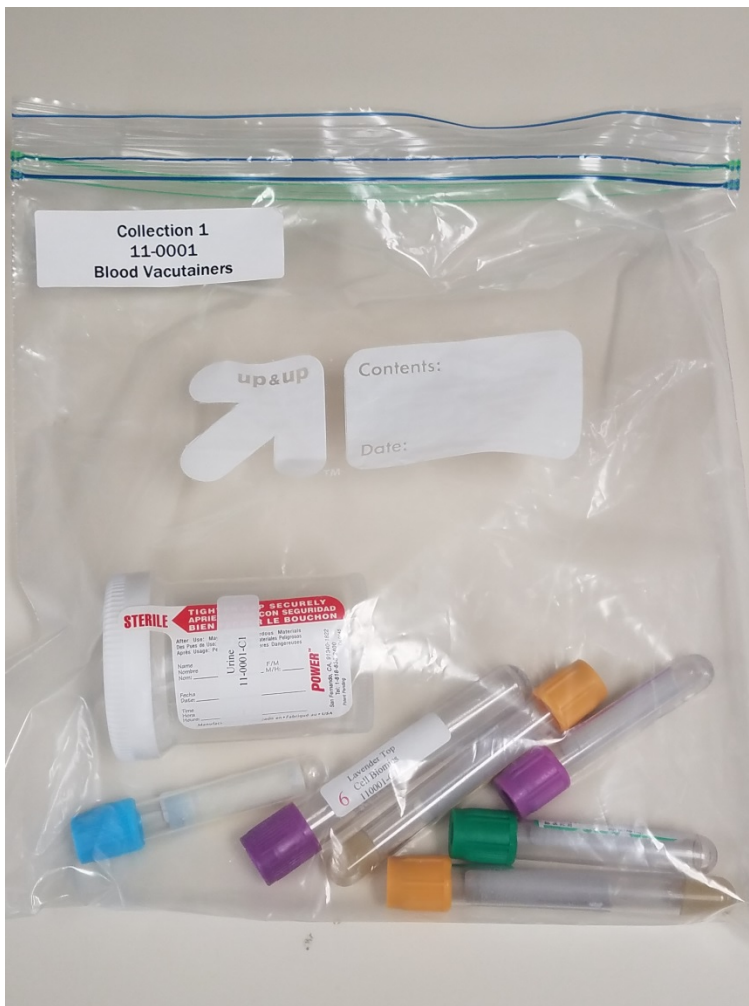
Processing needs to start  
within 1 hour of collection



RT= Room temperature  
BST= Biological specimen  
tracking system



**Collection 1 Kit:**  
Includes 1 bag of aliquot tubes and 1 bag of blood vacutainers with urine cup.



- Blood Vacutainers: **lavender** top 10ml cell biomics, **green** top 4ml genomics, **blue** top 4.5ml plasma-cit, **lavender** top 4ml plasma, and two **gold** top 5ml serum CC-PRL. Urine Cup



- Aliquot Tubes: 13 **lavender** tubes, 13 **blue** tubes, 4 **gold** serum CC-PRL tubes, and 10 **gold** serum tubes, 6 **orange** tubes, 15ml tube, 50 ml tube.



**PVDOMICS STUDY**  
**Center Blood Collection 1 –**  
**Drawing Samples Form #300**

**Instructions:** Person collecting blood should be familiar with MOP Chapter 33. The study coordinator will provide the study participant identification number and alphacode. If Collection 1 will never be done, explain why in Q4.

1. Identification Number      2. Alphacode      3. Date of collection (mm/dd/yyyy)

4. a. Status of Blood Collection 1  
(1=Done, 2=Not done, attempted, but unsuccessful, 3=Not done, site logistical issues).....  
b. If not done, briefly explain why, and then skip to Q 200.  
.....  
.....
5. Username of person drawing blood.....
6. a. Did participant fast before this blood draw? (0=No, 1=Yes) .....  
Note: *Only water is OK*  
b. If yes, number of hour(s) participant fasted? (round to the nearest half hour).....
7. How long did participant rest prior to blood draw (minutes).....
8. Which arm was used for blood collection? (1=Right, 2=Left, 3=Other access).....
9. If Q.8=1 or 2, how many attempts did it take?.....
10. Were all Vacutainer™ blood tubes collected in the order as it states in MOP Chapter 33? (0=No, 1=Yes).....

| Type of Tube(s)                   | 11. Was this blood tube collected (0=No, 1=Yes) | 12. Collection Time (24-hr clock) (h:mm) |
|-----------------------------------|-------------------------------------------------|------------------------------------------|
| a. Gold Top SST 5 ml              | ___                                             | ___:___                                  |
| b. Gold Top SST 5 ml              | ___                                             | ___:___                                  |
| c. Green Top NA-Heparin 4 ml      | ___                                             | ___:___                                  |
| d. Lavender Top EDTA Plasma 4 ml  | ___                                             | ___:___                                  |
| e. Blue Top NA-Citrate 4.5 ml     | ___                                             | ___:___                                  |
| f. Lavender Top EDTA Plasma 10 ml | ___                                             | ___:___                                  |

13. Time tubes were delivered to lab (24-hr clock) (hh:mm).....:.....
14. Were any issues experienced during the blood draw? (0 No, 1 Yes).....

Comments:

[illegible]

200. Date form completed (mm/dd/yyyy) .....
201. Username of person completing/reviewing completeness of this form .....

Clinical Center Use Only

Date form entered (mm/dd/yyyy)    1    /    1    /    1   

Username of person entering this form    \_\_\_\_\_

After the blood draw, gently invert vacutainers 10 times to mix clot activator or anticoagulant with blood



Place the following tubes  
on wet ice:

LAVENDER TOP  
4ml Plasma

BLUE TOP 4.5ml  
Plasma-Cit

GOLD TOP 5ml (N=2)  
Serum CC-PRL



Keep the following tubes at room  
temperature and set aside for  
separate shipment:

GREEN TOP  
4ml  
Genomics

LAVENDER TOP  
10ml  
Cell Biomics

No processing required



Place the two **Gold Top Serum CC-PRL** tubes upright at room temperature for 30 minutes.

This is needed to activate clotting



**PVDOMICS STUDY**  
**Center Blood Collection 1 –**  
**Processing Sample Form #301**

**Instructions:** Person processing blood should be familiar with the PVDOMICS blood processing MOP Chapter 34. The study coordinator will provide the study participant identification number and alphacode.

|  |  |  |  |  |  |
|--|--|--|--|--|--|
|  |  |  |  |  |  |
|--|--|--|--|--|--|

1. Identification Number

|  |  |
|--|--|
|  |  |
|--|--|

2. Alphacode

|  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|

3. Processing Date (mm/dd/yyyy)

Place bag label here

4. Username of the person processing the sample.....

5. Time received at lab (24-hr clock) (hh:mm).....

6. Time of start of processing sample (24-hr clock) (hh:mm).....

| Type of tube(s)                 | 7. Was the required volume of blood collected?<br>0=No, 1=Yes, 8=Not collected | 8. Was the specimen placed on ice before processing?<br>0=No, 1=Yes | 9. Start time of processing sample<br>(24-hr clock) (hh:mm) | 10. Specimen condition<br>0=Normal, 1=Hemolysis, 2=Milky | 11. Time specimen frozen in dry ice<br>(24-hr clock) (hh:mm) | 12. Time specimen placed in -70°C/-80°C freezer<br>(24-hr clock) (hh:mm) |
|---------------------------------|--------------------------------------------------------------------------------|---------------------------------------------------------------------|-------------------------------------------------------------|----------------------------------------------------------|--------------------------------------------------------------|--------------------------------------------------------------------------|
| a. Gold Top SST 5ml             | —                                                                              | —                                                                   | —:—                                                         | —                                                        | —:—                                                          | —:—                                                                      |
| b. Gold Top SST 5ml             | —                                                                              | —                                                                   | —:—                                                         | —                                                        | —:—                                                          | —:—                                                                      |
| c. Lavender Top EDTA Plasma 4ml | —                                                                              | —                                                                   | —:—                                                         | —                                                        | —:—                                                          | —:—                                                                      |
| d. Blue Top Na-Citrate 4.5ml    | —                                                                              | —                                                                   | —:—                                                         | —                                                        | —:—                                                          | —:—                                                                      |

13. Date sample frozen (mm/dd/yyyy)..... / /

14. Number of cryovials of 400ul Serum-CC-PRL.....

15. Number of cryovials of 200ul Serum.....

16. Number of cryovials of 200ul Plasma.....

17. Number of cryovials of 200ul Plasma-Cit.....

*Note: Place a black dot with permanent marker on the screw cap if the volume is less than 200  $\mu$ l*

- Next, print and begin to fill out form 301 (#1-7)

Revision of 09/01/2016



Form #301  
Page 1 of 2

## PVDOMICS STUDY Center Blood Collection 1 – Processing Sample Form #301

**Instructions:** Person processing blood should be familiar with the PVDOMICS blood processing MOP Chapter 34.

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 1 | 1 | 0 | 0 | 0 | 1 |
|---|---|---|---|---|---|

1. Identification Number

|  |  |
|--|--|
|  |  |
|--|--|

2. Alphacode

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| 0 | 9 | 0 | 7 | 2 | 0 | 1 | 6 |
|---|---|---|---|---|---|---|---|

3. Processing Date (mm/dd/yyyy)

**Collection 1**  
**11-0001**



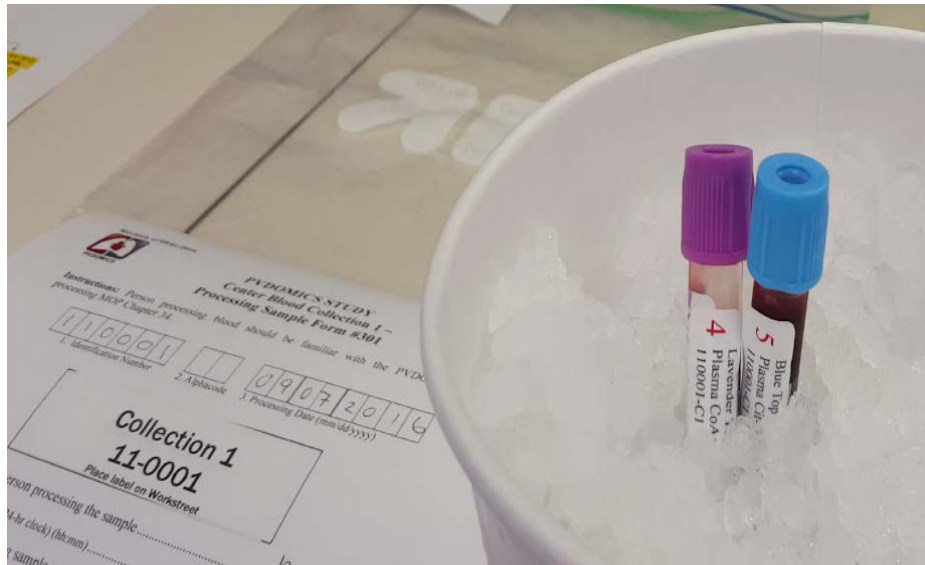
Place bag label here,  
and the ID number  
should match the  
number on the sticker

4. Username of the person processing the sample ..... baickes
5. Time received at lab (24-hr clock) (hh:mm) ..... 13:58
6. Time of start of processing sample (24-hr clock) (hh:mm) ..... 14:02
7. Date sample frozen (mm/dd/yyyy) ..... 09/07/2016

- Then fill out #8 and #9

| Type of tube(s)                 | 8. Was the required volume of blood collected?<br>0=No, 1=Yes, 8=Not collected | 9. Was the specimen placed on ice before processing?<br>0=No, 1=Yes, 8=Not collected | 10. Start time of processing sample<br>(24-hr clock)<br>(hh:mm) | 11. Specimen condition<br>0=Normal,<br>1=Hemolysis,<br>2=Milky | 12. Time specimen frozen in dry ice<br>(24-hr clock)<br>(hh:mm) | 13. Time specimen placed in -70°C/-80°C freezer<br>(24-hr clock)<br>(hh:mm) |
|---------------------------------|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------------------------------------------------|----------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------------------|
| a. Gold Top SST 5ml             | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:33</u>                                                    | <u>0</u>                                                       | <u>14:45</u>                                                    | <u>14:50</u>                                                                |
| b. Gold Top SST 5ml             | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:33</u>                                                    | <u>0</u>                                                       | <u>14:45</u>                                                    | <u>14:50</u>                                                                |
| c. Lavender Top EDTA Plasma 4ml | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:05</u>                                                    | <u>0</u>                                                       | <u>14:26</u>                                                    | <u>14:50</u>                                                                |
| d. Blue Top Na-Citrate 4.5ml    | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:05</u>                                                    | <u>0</u>                                                       | <u>14:26</u>                                                    | <u>14:50</u>                                                                |

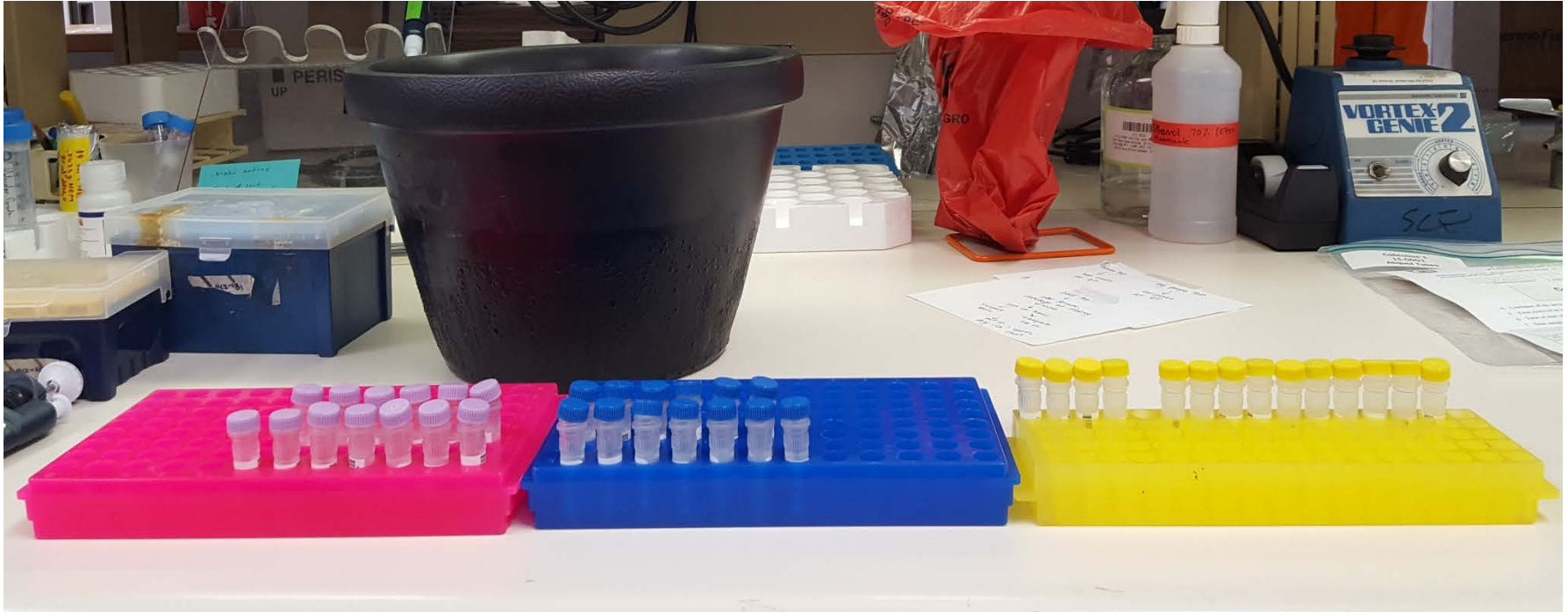
- Write the processing start time on the form for the **blue** top (4.5ml) and **lavender** top (4ml) samples.



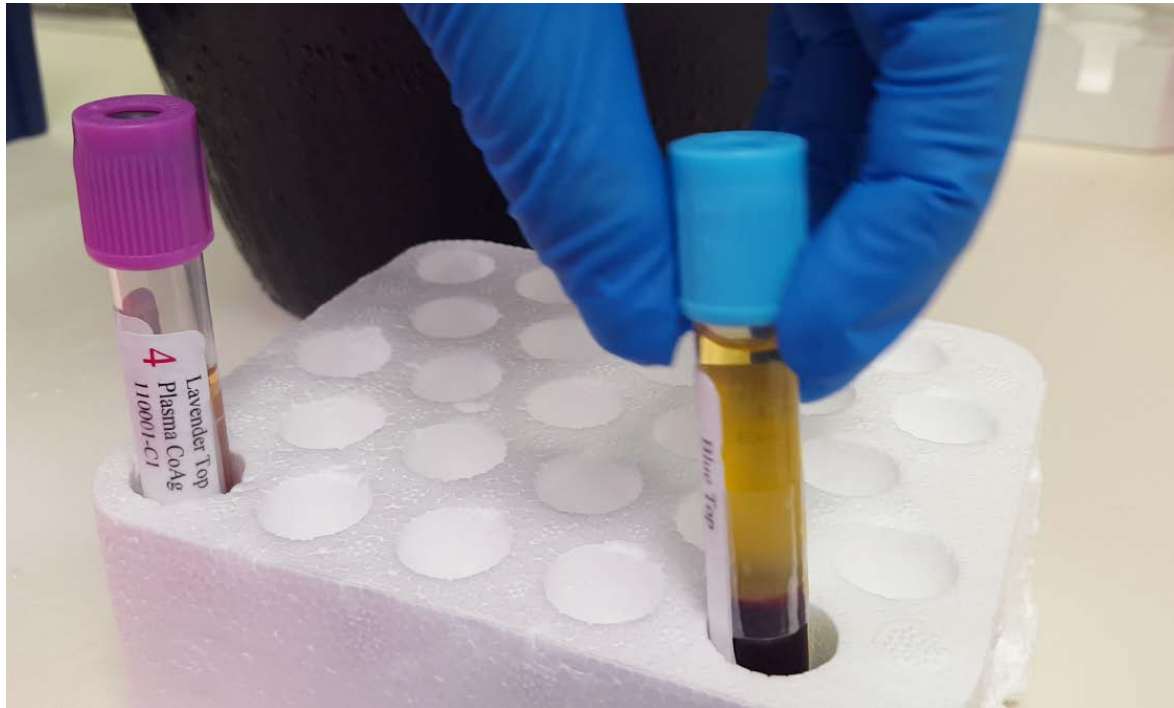
| Type of tube(s)                 | 8. Was the required volume of blood collected?<br>0=No, 1=Yes, 8=Not collected | 9. Was the specimen placed on ice before processing?<br>0=No, 1=Yes, 8=Not collected | 10. Start time of processing sample (24-hr clock) (hh:mm) |
|---------------------------------|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------------------------------------------|
| a. Gold Top SST 5ml             | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:33</u>                                              |
| b. Gold Top SST 5ml             | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:33</u>                                              |
| c. Lavender Top EDTA Plasma 4ml | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:05</u>                                              |
| d. Blue Top Na-Citrate 4.5ml    | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:05</u>                                              |



- Centrifuge the **blue** top and **lavender** top tubes at 2200g at 4° for 10 minutes (swing bucket) or 15 minutes (fixed bucket).



- While waiting for the centrifuge step, set up aliquot tubes and get dry ice ready.

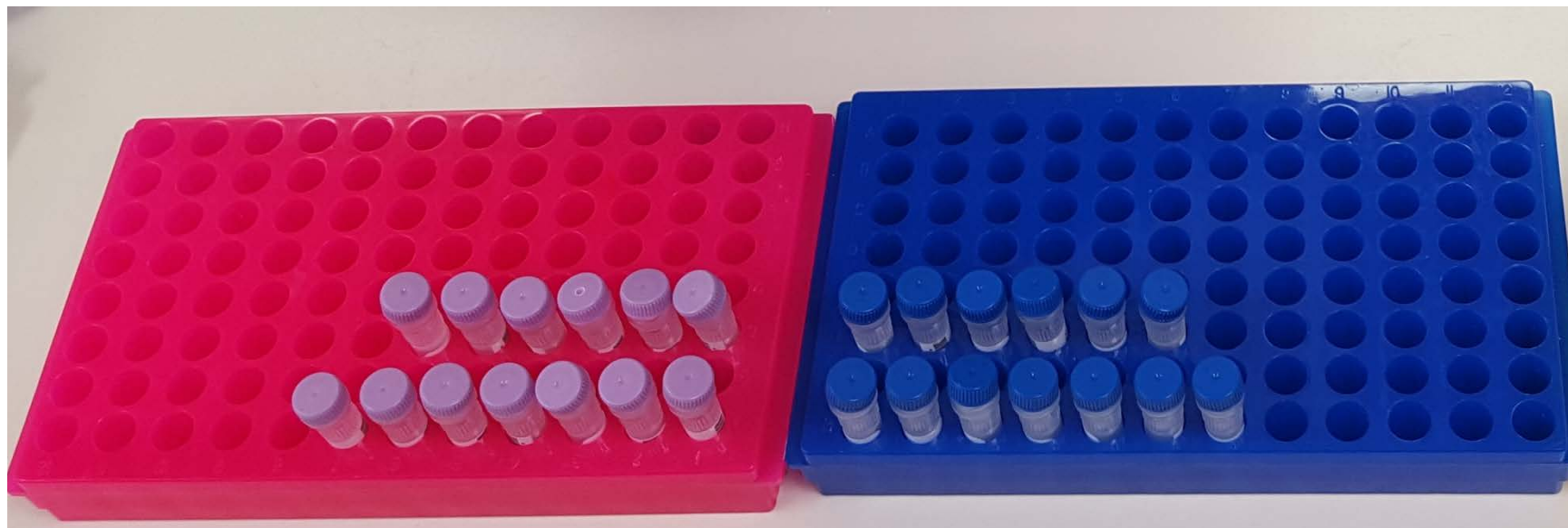


- After the centrifugation step, note the quality of the specimen on the form for both the **blue** and **lavender** top tubes.

| Type of tube(s)                 | 8. Was the required volume of blood collected?<br>0=No, 1=Yes, 8=Not collected | 9. Was the specimen placed on ice before processing?<br>0=No, 1=Yes, 8=Not collected | 10. Start time of processing sample (24-hr clock) (hh:mm) | 11. Specimen condition<br>0=Normal, 1=Hemolysis, 2=Milky | 12. Time specimen frozen in dry ice (24-hr clock) (hh:mm) | 13. Time specimen placed in -70°C/-80°C freezer (24-hr clock) (hh:mm) |
|---------------------------------|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------------------------------------------|----------------------------------------------------------|-----------------------------------------------------------|-----------------------------------------------------------------------|
| a. Gold Top SST 5ml             | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:33</u>                                              | <u>0</u>                                                 | <u>14:45</u>                                              | <u>14:50</u>                                                          |
| b. Gold Top SST 5ml             | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:33</u>                                              | <u>0</u>                                                 | <u>14:45</u>                                              | <u>14:50</u>                                                          |
| c. Lavender Top EDTA Plasma 4ml | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:05</u>                                              | <u>0</u>                                                 | <u>14:26</u>                                              | <u>14:50</u>                                                          |
| d. Blue Top Na-Citrate 4.5ml    | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:05</u>                                              | <u>0</u>                                                 | <u>14:26</u>                                              | <u>14:50</u>                                                          |

## Lavender Top Tube

## Blue Top Tube



**Plasma**  
13 aliquot  
0.2ml into each tube



Place immediately  
into dry ice

**Plasma-Cit**  
13 aliquot  
0.2ml into each tube



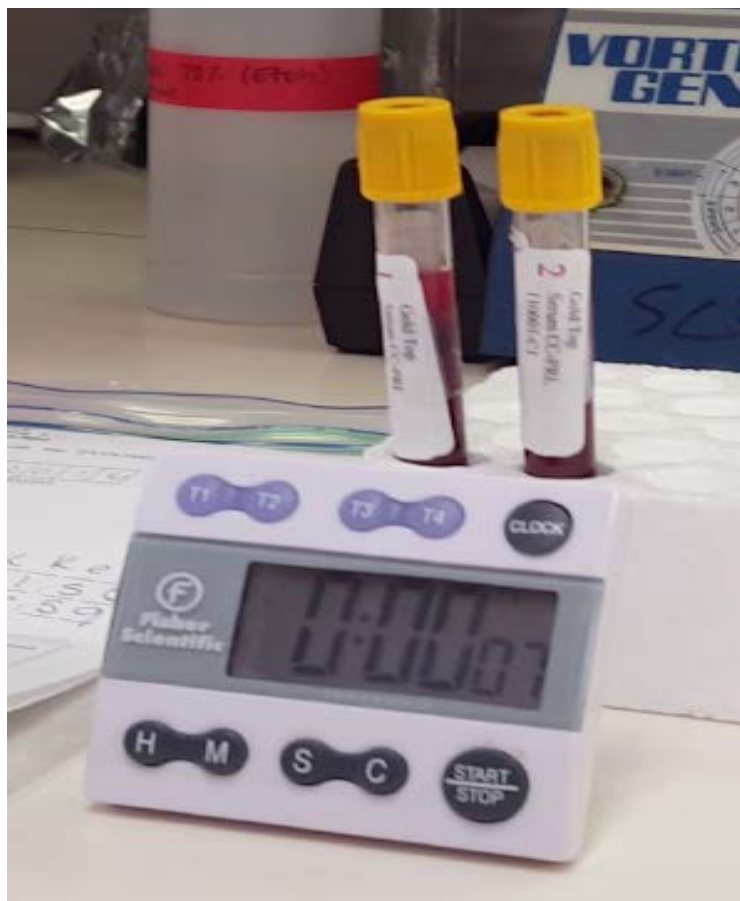
Place immediately  
into dry ice

- On the form, make note of the time when the **blue top** and **lavender top** specimens were placed into dry ice.

| Type of tube(s)                 | 8. Was the required volume of blood collected?<br>0=No, 1=Yes, 8=Not collected | 9. Was the specimen placed on ice before processing?<br>0=No, 1=Yes, 8=Not collected | 10. Start time of processing sample (24-hr clock) (hh:mm) | 11. Specimen condition<br>0=Normal, 1=Hemolysis, 2=Milky | 12. Time specimen frozen in dry ice (24-hr clock) (hh:mm) | 13. Time specimen placed in -70°C/-80°C freezer (24-hr clock) (hh:mm) |
|---------------------------------|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------------------------------------------|----------------------------------------------------------|-----------------------------------------------------------|-----------------------------------------------------------------------|
| a. Gold Top SST 5ml             | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:33</u>                                              | <u>0</u>                                                 | <u>14:45</u>                                              | <u>14:50</u>                                                          |
| b. Gold Top SST 5ml             | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:33</u>                                              | <u>0</u>                                                 | <u>14:45</u>                                              | <u>14:50</u>                                                          |
| c. Lavender Top EDTA Plasma 4ml | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:05</u>                                              | <u>0</u>                                                 | <u>14:26</u>                                              | <u>14:50</u>                                                          |
| d. Blue Top Na-Citrate 4.5ml    | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:05</u>                                              | <u>0</u>                                                 | <u>14:26</u>                                              | <u>14:50</u>                                                          |



- Note:** If the last tube has less than 0.2ml, put a dot on the top of the tube.
- This will be done for the last **lavender**, **blue**, and **gold** 0.2ml aliquots.
- Only one tube per blood type should have a dot



| Type of tube(s)                 | 8. Was the required volume of blood collected?<br>0=No, 1=Yes, 8=Not collected | 9. Was the specimen placed on ice before processing?<br>0=No, 1=Yes, 8=Not collected | 10. Start time of processing sample (24-hr clock) (hh:mm) |
|---------------------------------|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------------------------------------------|
| a. Gold Top SST 5ml             | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:33</u>                                              |
| b. Gold Top SST 5ml             | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:33</u>                                              |
| c. Lavender Top EDTA Plasma 4ml | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:05</u>                                              |
| d. Blue Top Na-Citrate 4.5ml    | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:05</u>                                              |

After the **gold top** tubes have been at room temperature for 30 minutes, write the processing start time on the form and centrifuge the samples.



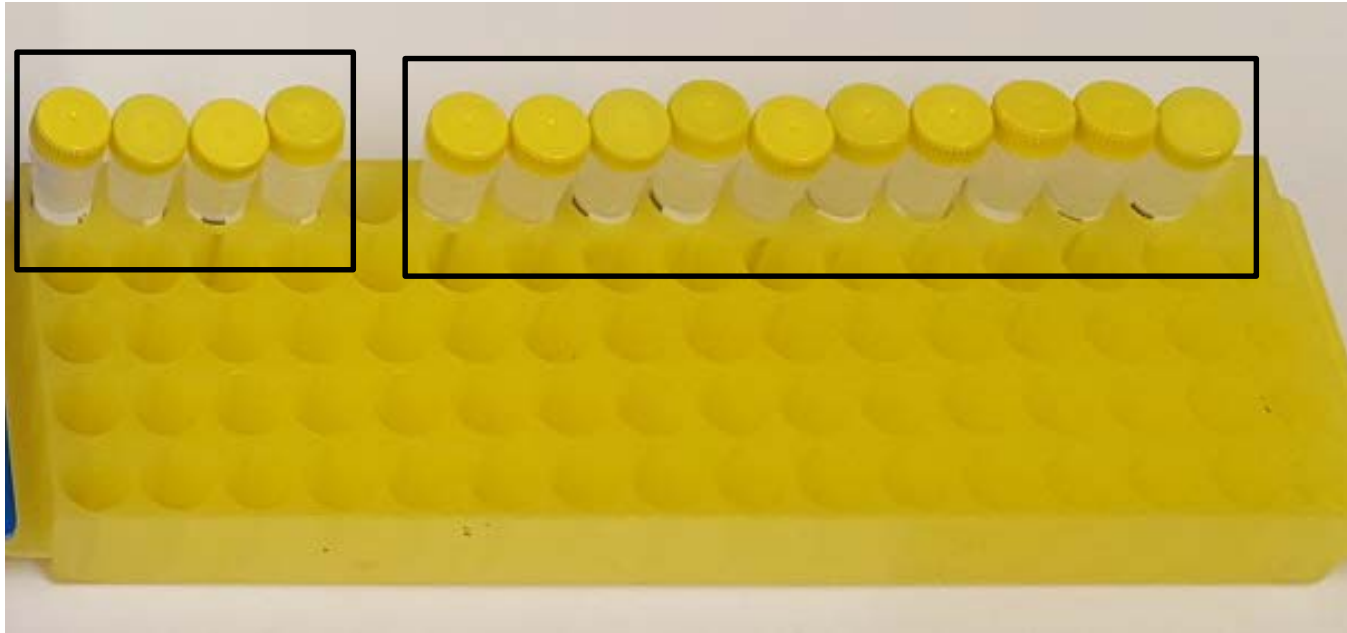
- Centrifuge the same as before at 2200g at 4° for 10 minutes (swing bucket) or 15 minutes (fixed bucket).



- As before, after centrifugation, note the quality of the specimen on the form for the **gold top** tubes.

| Type of tube(s)                 | 8. Was the required volume of blood collected?<br>0=No, 1=Yes, 8=Not collected | 9. Was the specimen placed on ice before processing?<br>0=No, 1=Yes, 8=Not collected | 10. Start time of processing sample (24-hr clock) (hh:mm) | 11. Specimen condition<br>0=Normal, 1=Hemolysis, 2=Milky |
|---------------------------------|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------------------------------------------|----------------------------------------------------------|
| a. Gold Top SST 5ml             | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:33</u>                                              | <u>0</u>                                                 |
| b. Gold Top SST 5ml             | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:33</u>                                              | <u>0</u>                                                 |
| c. Lavender Top EDTA Plasma 4ml | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:05</u>                                              | <u>0</u>                                                 |
| d. Blue Top Na-Citrate 4.5ml    | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:05</u>                                              | <u>0</u>                                                 |

## Gold Top Tubes



**Serum CC-PRL**  
4 aliquot  
0.4ml into each tube

**Serum**  
10 aliquot  
0.2ml into each tube

Place immediately  
into dry ice

- On the form, make note of the time when the **gold top** tube specimens were placed into dry ice.

| Type of tube(s)                 | 8. Was the required volume of blood collected?<br>0=No, 1=Yes, 8=Not collected | 9. Was the specimen placed on ice before processing?<br>0=No, 1=Yes, 8=Not collected | 10. Start time of processing sample (24-hr clock) (hh:mm) | 11. Specimen condition<br>0=Normal, 1=Hemolysis, 2=Milky | 12. Time specimen frozen in dry ice (24-hr clock) (hh:mm) | 13. Time specimen placed in -70°C/-80°C freezer (24-hr clock) (hh:mm) |
|---------------------------------|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------------------------------------------|----------------------------------------------------------|-----------------------------------------------------------|-----------------------------------------------------------------------|
| a. Gold Top SST 5ml             | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:33</u>                                              | <u>0</u>                                                 | <u>14:45</u>                                              | <u>14:50</u>                                                          |
| b. Gold Top SST 5ml             | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:33</u>                                              | <u>0</u>                                                 | <u>14:45</u>                                              | <u>14:50</u>                                                          |
| c. Lavender Top EDTA Plasma 4ml | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:05</u>                                              | <u>0</u>                                                 | <u>14:26</u>                                              | <u>14:50</u>                                                          |
| d. Blue Top Na-Citrate 4.5ml    | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:05</u>                                              | <u>0</u>                                                 | <u>14:26</u>                                              | <u>14:50</u>                                                          |

- Then fill in #14-17 regarding the number of cryovials

|                                                     |            |
|-----------------------------------------------------|------------|
| 14. Number of cryovials of 400ul Serum-CC-PRL ..... | <u>004</u> |
| 15. Number of cryovials of 200ul Serum .....        | <u>010</u> |
| 16. Number of cryovials of 200ul Plasma .....       | <u>013</u> |
| 17. Number of cryovials of 200ul Plasma-Cit .....   | <u>013</u> |

*Note: Place a black dot with permanent marker on the screw cap if the volume is less than 200 ul*

| Type of tube(s)                 | 8. Was the required volume of blood collected?<br>0=No, 1=Yes, 8=Not collected | 9. Was the specimen placed on ice before processing?<br>0=No, 1=Yes, 8=Not collected | 10. Start time of processing sample (24-hr clock) (hh:mm) | 11. Specimen condition<br>0=Normal, 1=Hemolysis, 2=Milky | 12. Time specimen frozen in dry ice (24-hr clock) (hh:mm) | 13. Time specimen placed in -70°C/-80°C freezer (24-hr clock) (hh:mm) |
|---------------------------------|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------------------------------------------|----------------------------------------------------------|-----------------------------------------------------------|-----------------------------------------------------------------------|
| a. Gold Top SST 5ml             | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:33</u>                                              | <u>0</u>                                                 | <u>14:45</u>                                              | <u>14:50</u>                                                          |
| b. Gold Top SST 5ml             | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:33</u>                                              | <u>0</u>                                                 | <u>14:45</u>                                              | <u>14:50</u>                                                          |
| c. Lavender Top EDTA Plasma 4ml | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:05</u>                                              | <u>0</u>                                                 | <u>14:26</u>                                              | <u>14:50</u>                                                          |
| d. Blue Top Na-Citrate 4.5ml    | <u>1</u>                                                                       | <u>1</u>                                                                             | <u>14:05</u>                                              | <u>0</u>                                                 | <u>14:26</u>                                              | <u>14:50</u>                                                          |

- On the form, make note of the time when the all of the specimens were places in the freezer

Revision of 09/01/2016 ID \_\_\_\_\_ AC \_\_\_\_ Date of processing \_\_\_\_/\_\_\_\_/\_\_\_\_

Form #301  
Page 2 of 2

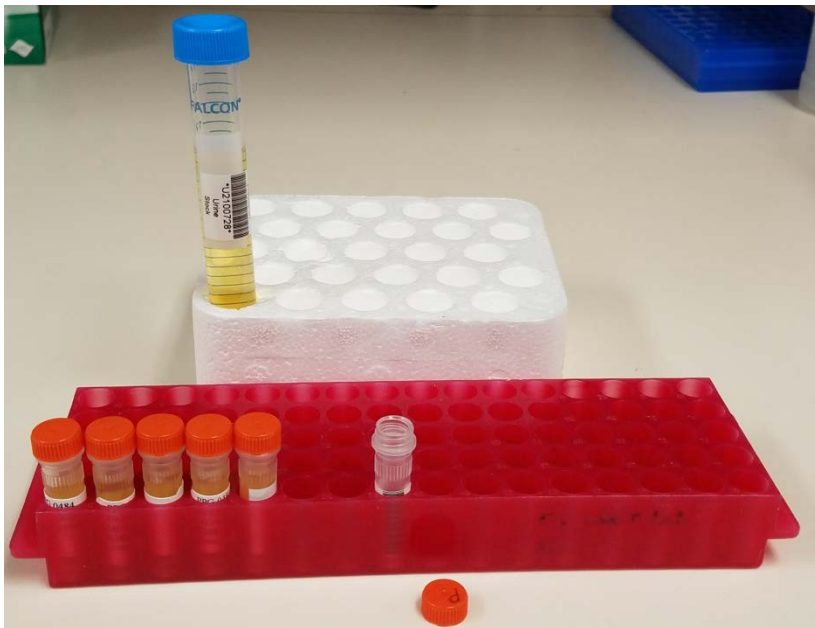
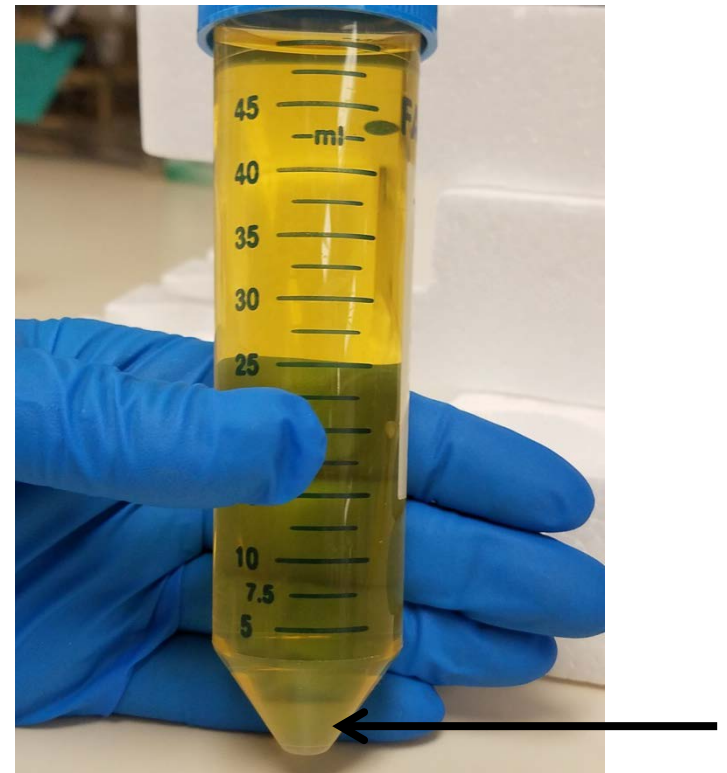
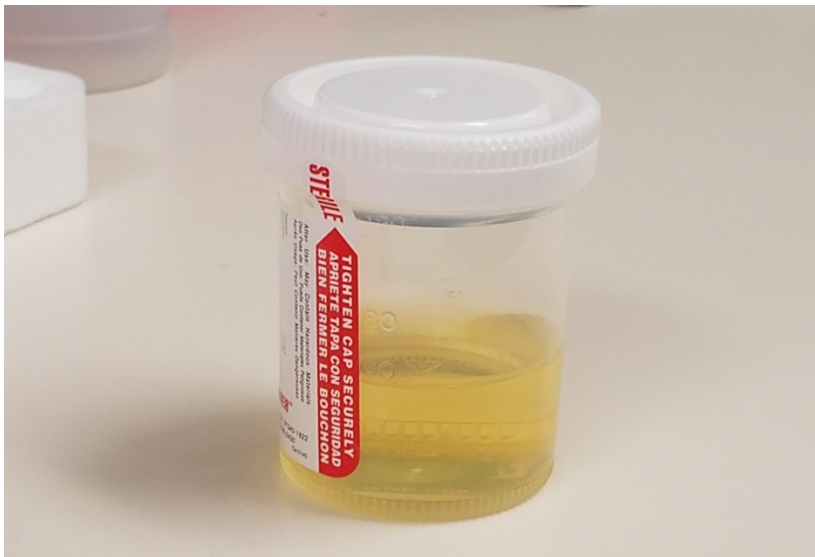
18. Were any issues experienced during processing (0=No, 1=Yes) ..... 0

Comments (will not be recorded in the database):

|  |
|--|
|  |
|  |
|  |
|  |
|  |
|  |

- Lastly, fill out the remainder of the form, make note of any issues, and write in the date the form was completed

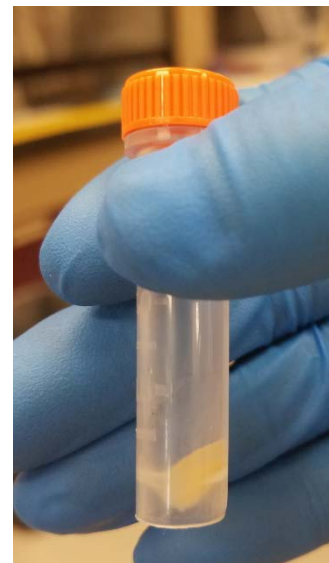
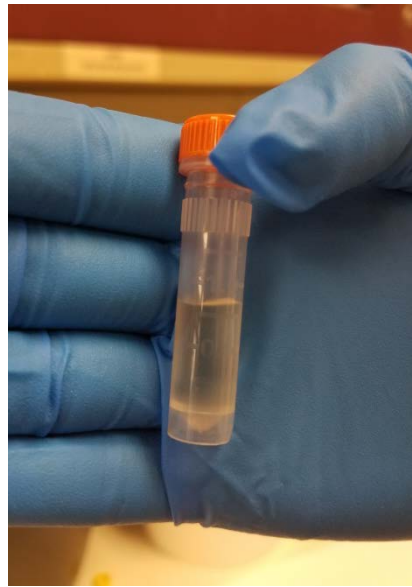
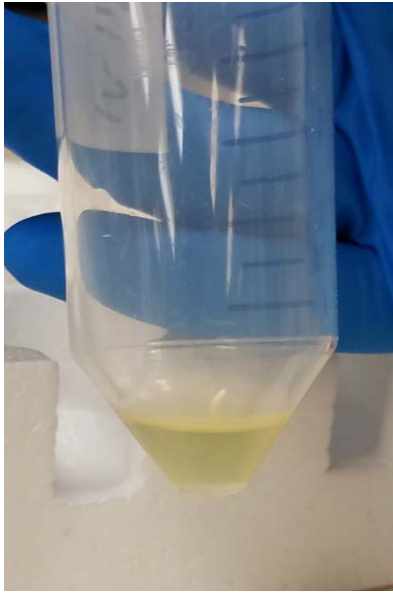
200. Date form completed (mm/dd/yyyy) ..... 09, 07, 2016



Transfer Urine to 50ml to spin

You should see a small pellet at the bottom

Aliquot 1.5ml of supernatant  
into 5 cryovials and 10 mL to conical tube



Pipet off remaining supernatant

Pipet pellet from bottom of 50ml into Urine Pellet tube

Spin in centrifuge

Remove supernatant and freeze in dry ice



## PVDOMICS STUDY

### Center Urine Collection 1 - Form #320

**Instructions:** Person receiving urine sample should be familiar with MOP Chapter 35. The study coordinator will provide the study participant identification number and alphacode. If Urine Collection 1 will never be done, explain why in Q4.

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1. Identification Number

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2. Alphacode

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3. Date of collection (mm/dd/yyyy)

4. a. Status of Urine Collection 1

(1=Done, 2=Not done – attempted, but unsuccessful, 3=Not done, site logistical issues).....

b. If not done, briefly explain why, and then skip to Q 200.

5. Username of person receiving urine sample.....

6. Collection time (24-hr clock) (hh:mm).....

7. Time urine container was delivered to lab (24-hr clock) (hh:mm).....

8. Were any issues experienced during the urine collection? (0=No, 1=Yes).....

Comments:

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200. Date form completed (mm/dd/yyyy)...../...../.....

201. Username of person completing/reviewing completeness of this form.....

Clinical Center Use Only

Date form entered (mm/dd/yyyy)...../...../.....

Username of person entering this form.....



PVDOMICS

## PVDOMICS STUDY

### Center Urine Collection 1 Processing Sample - Form #321

**Instructions:** Person processing urine should be familiar with the PVDOMICS urine collection and processing MOP Chapter 35. The study coordinator will provide the study participant identification number and alphacode.

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1. Identification Number

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2. Alphacode

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3. Processing Date (mm/dd/yyyy)

4. Username of the person processing the sample.....
5. Time received at lab (24-hr clock) (hh:mm).....
6. Time of start of processing sample (24-hr clock) (hh:mm).....
7. Was the required volume of urine collected?.....  
(0=No, 1=Yes, enough for cryovials and 15 ml tube, 2=Yes, but enough for cryovials only)
8. Time specimen frozen upright in dry ice (24-hr clock) (hh:mm).....
9. Time specimen placed in -70°C/-80°C freezer (24-hr clock) (hh:mm).....
10. Number of cryovials of 1.5ml urine.....  
*Note: Place a black dot with permanent marker on the screw cap if the volume is less than 1.5ml*
11. Number of 15ml tubes.....  
*Note: Do not fill tube past the 10ml mark*
12. Number of pellet cryovials.....
13. Were any issues experienced during processing (0=No, 1=Yes).....

Comments:

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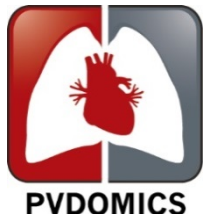
200. Date form completed (mm/dd/yyyy)...../...../.....
201. Username of person completing/reviewing completeness of this form.....

Clinical Center Use Only

Date form entered (mm/dd/yyyy)...../...../.....

Username of person entering this form.....

# Processing, Aliquoting, Recording and Storing of C2 Biospecimens



## **NHLBI Pulmonary Vascular Disease Phenomics Program**

*Funded by the National Heart, Lung, and Blood Institute of the  
National Institutes of Health with support from  
the Pulmonary Hypertension Association*

## Appendix 34.2: PVDOMICS OMICS Blood Collection 2: Processing, Aliquoting, Recording and Storing of Biospecimens

Venous Blood  
Systemic Artery "Syst Art" Blood \*  
Pulmonary Capillary "Wedge" Blood  
Pulmonary Artery "Mix" Blood

**REST**

Record the time of blood  
arriving into the lab

Record start time of blood  
processing

Record if all 10 vacutainers  
were collected

Process the 4 RED Tops (2.5ml)  
**Rest-Venous Genomics**  
**Rest-Mix Genomics**  
**Rest-Wedge Genomics**  
**Rest-Syst Art Genomics\***

Place UP RIGHT  
2 HOURS at RT

Scan Tube into BST

Place UP RIGHT  
24 HOURS  
at -20°C

Place UP RIGHT  
at -80°C

Process LAVENDER TOPS (N=5)  
**Plasma Rest Venous-Omics (N=2) 10ml**  
**Plasma Rest Mix-Omics (N=1) 4ml**  
**Plasma Rest-Wedge-Omics (N=1) 4ml**  
**Plasma Rest-Syst Art-Omics\* (N=1) 4ml**

Centrifuge at 2200g at 4°C  
10 min swing bucket  
15 min fixed bucket

**Plasma  
Rest  
Venous**

**Plasma  
Rest-Venous  
40 cryovial 0.2ml**

**Buffy coat  
Venous  
1 cryovial**

**Plasma  
Rest  
Wedge-Omics**

**Plasma  
Rest-Wedge  
11 cryovial 0.2ml**

**Plasma  
Rest  
Mix-Omics**

**Plasma  
Rest-Mix  
11 cryovial 0.2ml**

**Plasma\*  
Rest  
Syst-Art-Omics**

**Plasma  
Rest-Syst Art  
11 cryovial 0.2ml**

Place immediately into dry ice

Process GOLD Top 5ml  
**Serum**

Place UP RIGHT  
30 min at RT

Centrifuge at 2200g at 4°C  
10 min swing bucket  
15 min fixed bucket

**Serum  
Rest-Venous  
10 cryovial 0.2ml**

Place immediately  
into dry ice

Order of processing:

1. Place the Gold top and Red tops up right
2. Centrifuge the 5 Purple tops
3. Cryovial Purple tops
4. Centrifuge Gold top
5. Cryovial Gold top

Scan all cryovials into the BST

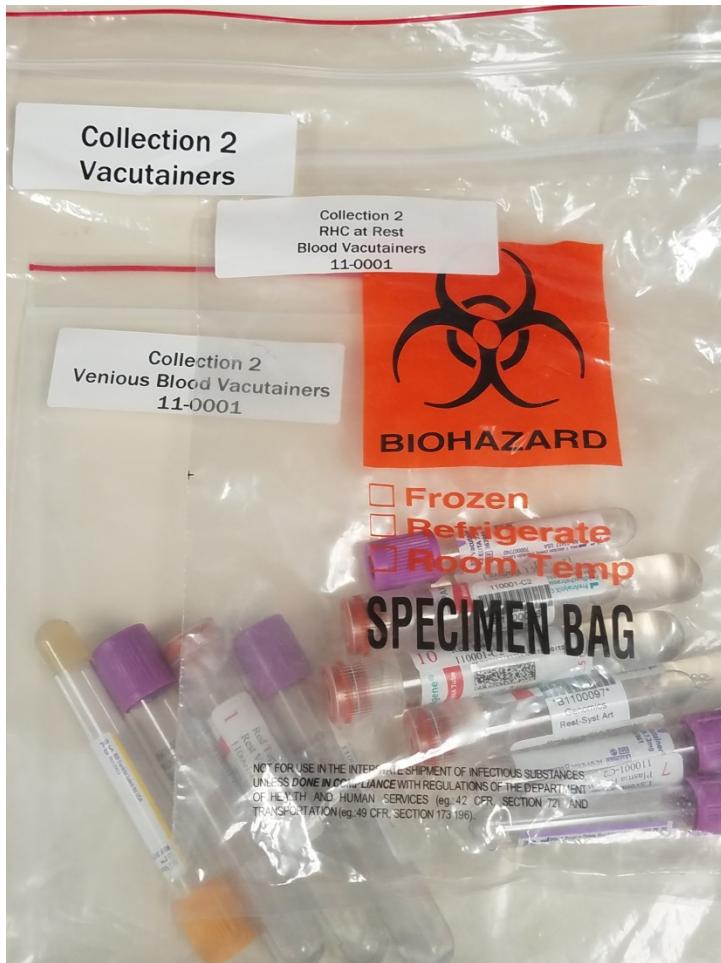
Store at -80°C  
Place cryovials into provided boxes

Ship first Monday of the month on dry ice to  
the Biorepository

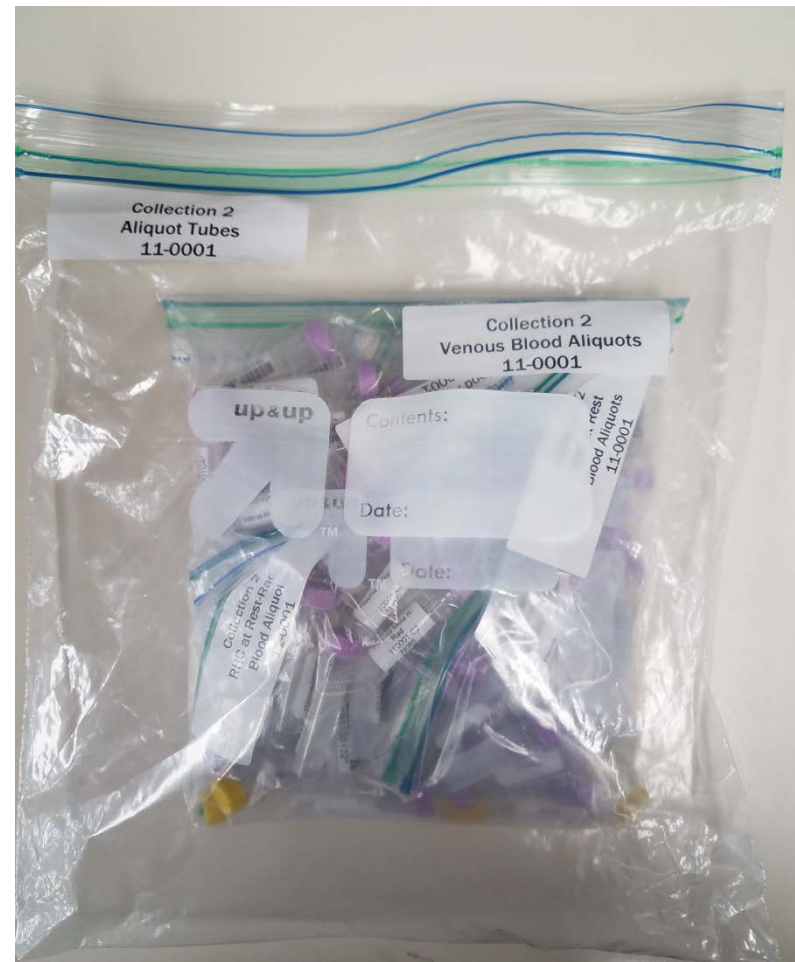
\* Optional

RT= Room temperature

BST= Biological specimen tracking system

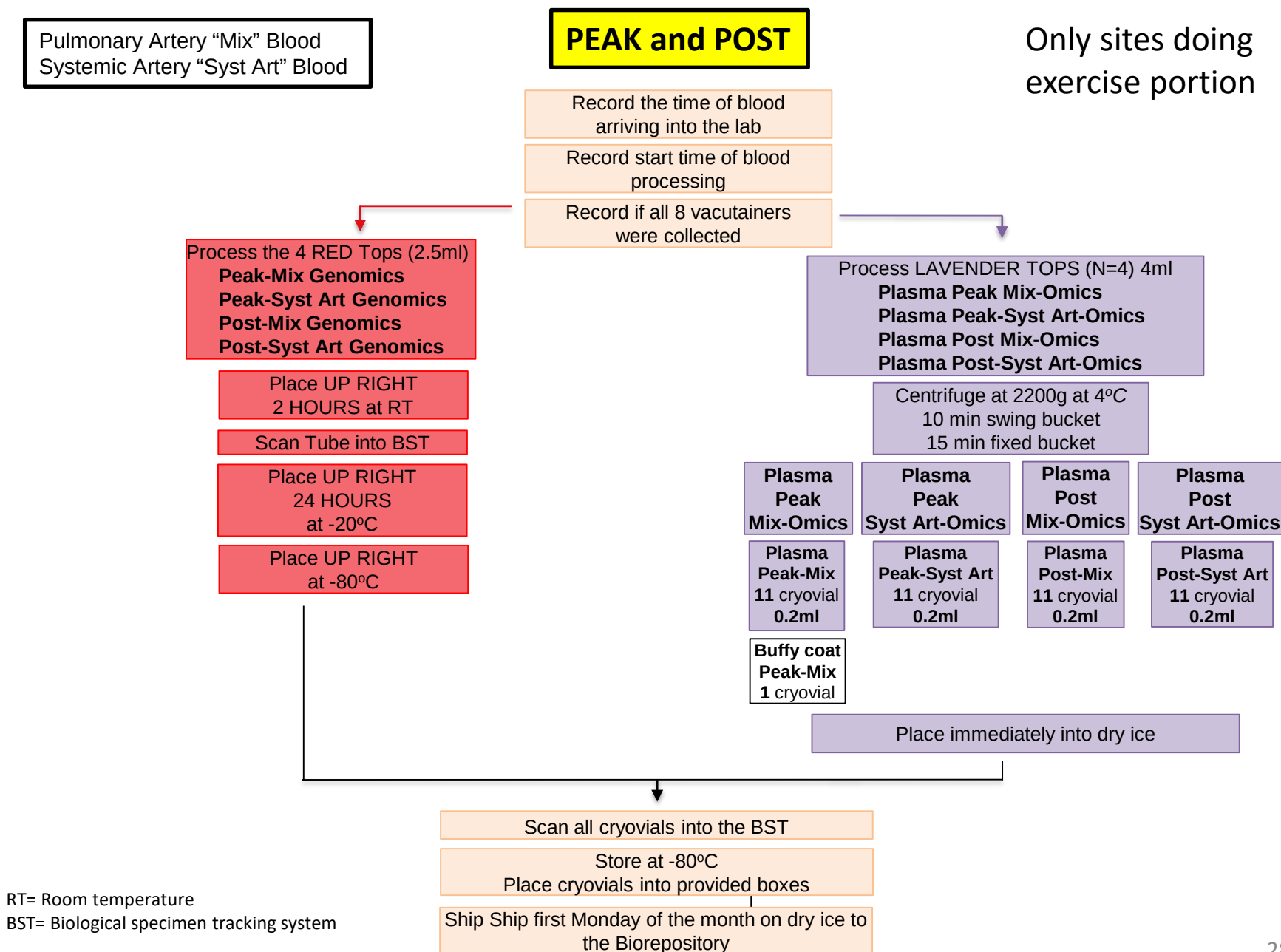


- Blood Vacutainers: two **lavender** top 10ml, three **lavender** top 4ml plasma, and one **gold** top 5ml serum, four **red** top tubes



- Aliquot Tubes: 73 **lavender** tubes, 10 **gold** serum tubes, and 1 clear buffy coat tube

## Appendix 34.2: PVDOMICS OMICS Blood Collection 2: Processing, Aliquoting, Recording and Storing of Biospecimens





- Blood Vacutainers: two **lavender** top 10ml, seven **lavender** top 4ml plasma, and one **gold** top 5ml serum, eight **red** top tubes



- Aliquot Tubes: 117 **lavender** tubes, 10 **gold** serum tubes, and 1 clear buffy coat tube



# **PVDOMICS STUDY** **Center Blood Collection 2 –** **Drawing “Rest” Samples Form #304**

**Instructions:** This form should be used when Collection 2 OMICS blood is obtained during the RHC procedure only at Rest. The study coordinator will provide the study participant identification number and alphacode.

|  |  |  |  |  |  |
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1. Identification Number

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2. Alphacode

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|--|--|--|--|--|--|--|--|

3. Date of collection (mm/dd/yyyy)

4. Username of person drawing blood.....
5. a. Did participant fast before this blood draw? (0=No, 1=Yes) .....  
*Note: Only water is OK*  
 b. If yes, number of hour(s) participant fasted? (round to the nearest half hour).....
6. How long did participant rest prior to blood draw (minutes) .....
7. From where was venous blood drawn? (1=Right arm, 2=Left arm, 3=Side port of introducer) .....
8. If Q7 = 1 or 2, how many attempts did it take? .....
9. Were all Vacutainer™ blood tubes collected in the order as it states in MOP Chapter 33? (0=No, 1=Yes) .....

| Type of Blood                    | Type of Tube(s)                                             | 10. Was this blood tube collected<br>0=No, 1=Yes | 11. Collection Time<br>(24-hr clock) (hh:mm) |
|----------------------------------|-------------------------------------------------------------|--------------------------------------------------|----------------------------------------------|
| Rest Venous                      | a. Red Top <i>PAXgene</i> ® RNA Preservative solution 2.5ml | —                                                | —:—                                          |
| Rest Venous                      | b. Lavender Top EDTA 10ml                                   | —                                                | —:—                                          |
| Rest Venous                      | c. Lavender Top EDTA 10ml                                   | —                                                | —:—                                          |
| Rest Venous                      | d. Gold Top SST 5ml                                         | —                                                | —:—                                          |
| Rest Systemic Artery             | e. Lavender Top EDTA 4 ml                                   | —                                                | —:—                                          |
| Rest Systemic Artery             | f. Red Top <i>PAXgene</i> ® RNA Preservative solution 2.5ml | —                                                | —:—                                          |
| Pulmonary Capillary “Rest Wedge” | g. Lavender Top EDTA 4ml                                    | —                                                | —:—                                          |
| Pulmonary Capillary “Rest Wedge” | h. Red Top <i>PAXgene</i> ® RNA Preservative solution 2.5ml | —                                                | —:—                                          |
| Pulmonary Artery “Rest Mix”      | i. Lavender Top EDTA 4ml                                    | —                                                | —:—                                          |
| Pulmonary Artery “Rest Mix”      | j. Red Top <i>PAXgene</i> ® RNA Preservative solution 2.5ml | —                                                | —:—                                          |

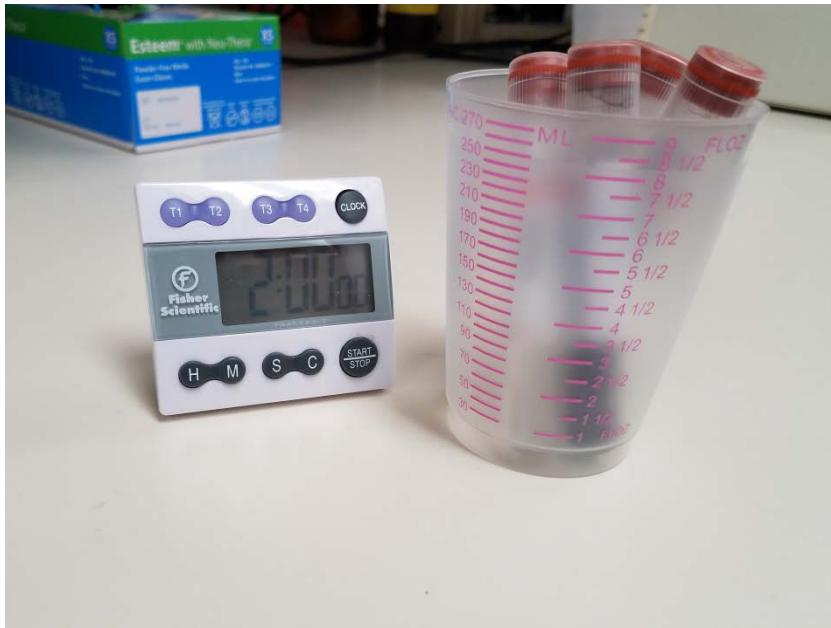
Revision of 09/30/2016 ID \_\_\_\_\_ AC \_\_\_\_\_ Date of blood draw \_\_\_\_/\_\_\_\_/\_\_\_\_

Form #304  
Page 2 of 2

12. Time tubes were delivered to lab (24-hr clock) (hh:mm).....:\_\_\_\_\_

200. Date form completed (mm/dd/yyyy) ...../\_\_\_\_/\_\_\_\_

201. Username of person completing/reviewing completeness of this form.....



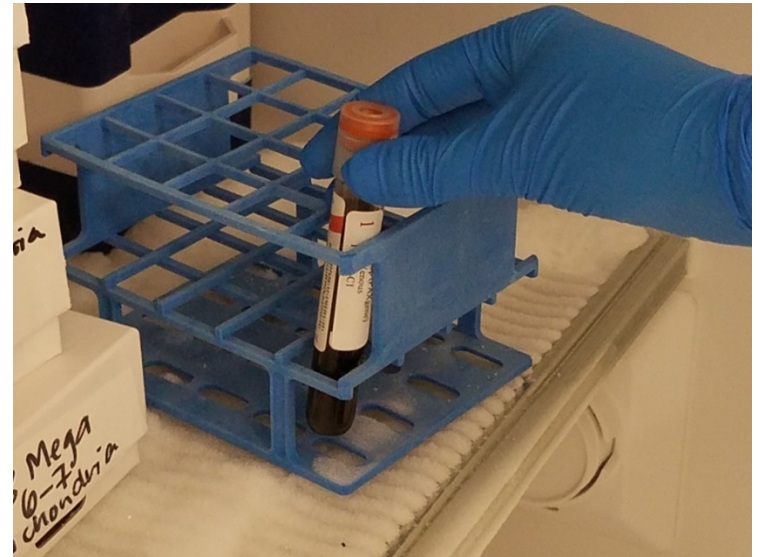
Keep the PAXgene tubes at room temperature

**RED TOP (N=4)  
2.5ml PAXgene**

**Upright at Room Temp  
2hrs**

**-20 Freezer  
24hrs**

**-80 Freezer  
Longterm**



Transfer to wire rack -20 freezer  
after 2 hours



After 24 hours move to -80 for long  
term storage



## PVDOMICS STUDY

### Center Blood Collection 2 – Processing *PAXgene*® “Rest” Sample Form #305

**Instructions:** Person processing blood should be familiar with the PVDOMICS blood processing MOP Chapter 34. The study coordinator will provide the study participant identification number and alphacode.

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1. Identification Number

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2. Alphacode

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|  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|

3. Processing Date (mm/dd/yyyy)

4. Username of the person processing the sample.....

5. Time received at lab (24-hr clock) (hh:mm) .....

| Type of Blood<br>Type of Tube                                            | 6. Was the<br>required volume<br>of blood<br>collected?<br>0=No, 1=Yes,<br>8=Not collected | 7. Was the<br>specimen<br>delivered at <u>room<br/>temperature</u> ?<br>0=No, 1=Yes,<br>8=Not collected | 8. Time specimen<br>placed upright at<br><u>room temperature</u><br>(24-hr clock)<br>(hh:mm) | 9. Time specimen<br>placed in <u>-20°C<br/>freezer</u><br>(24-hr clock)<br>(hh:mm) | 10. Time<br>specimen placed<br>in <u>-70°C/-80°C<br/>freezer</u><br>(24-hr clock)<br>(hh:mm) | 11. Date specimen placed in<br><u>-70°C/-80°C freezer</u><br>(mm/dd/yyyy) |
|--------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| a. Rest Venous<br>Red Top <i>PAXgene</i> ®<br>2.5ml                      | —                                                                                          | —                                                                                                       | — : —                                                                                        | — : —                                                                              | — : —                                                                                        | — / — / —                                                                 |
| b. Rest Systemic Artery<br>Red Top <i>PAXgene</i> ®<br>2.5ml             | —                                                                                          | —                                                                                                       | — : —                                                                                        | — : —                                                                              | — : —                                                                                        | — / — / —                                                                 |
| c. Pulmonary Capillary<br>“Rest Wedge” Red<br>Top <i>PAXgene</i> ® 2.5ml | —                                                                                          | —                                                                                                       | — : —                                                                                        | — : —                                                                              | — : —                                                                                        | — / — / —                                                                 |
| d. Pulmonary Artery<br>“Rest Mix” Red Top<br><i>PAXgene</i> ® 2.5ml      | —                                                                                          | —                                                                                                       | — : —                                                                                        | — : —                                                                              | — : —                                                                                        | — / — / —                                                                 |

12. Were any issues experienced during processing (0=No, 1=Yes) .....

Revision of 10/03/2016

ID .....

AC .....

Date of blood processing — / — / —

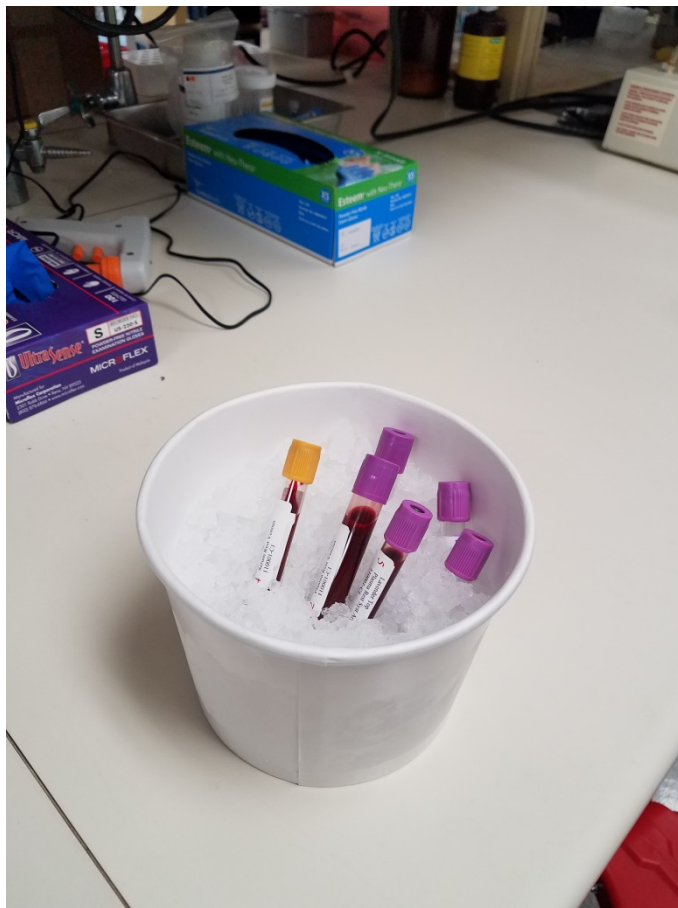
Form #305  
Page 2 of 2

Comments:

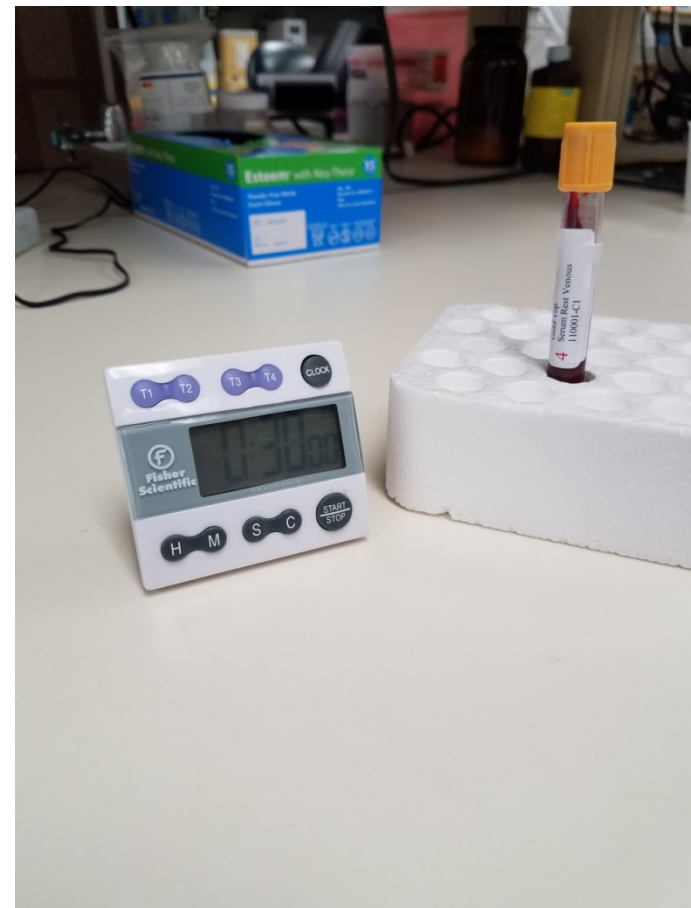
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200. Date form completed (mm/dd/yyyy)..... / /

201. Username of person completing/reviewing completeness of this form.....



The Serum and Plasma tubes should arrive in the lab on ice

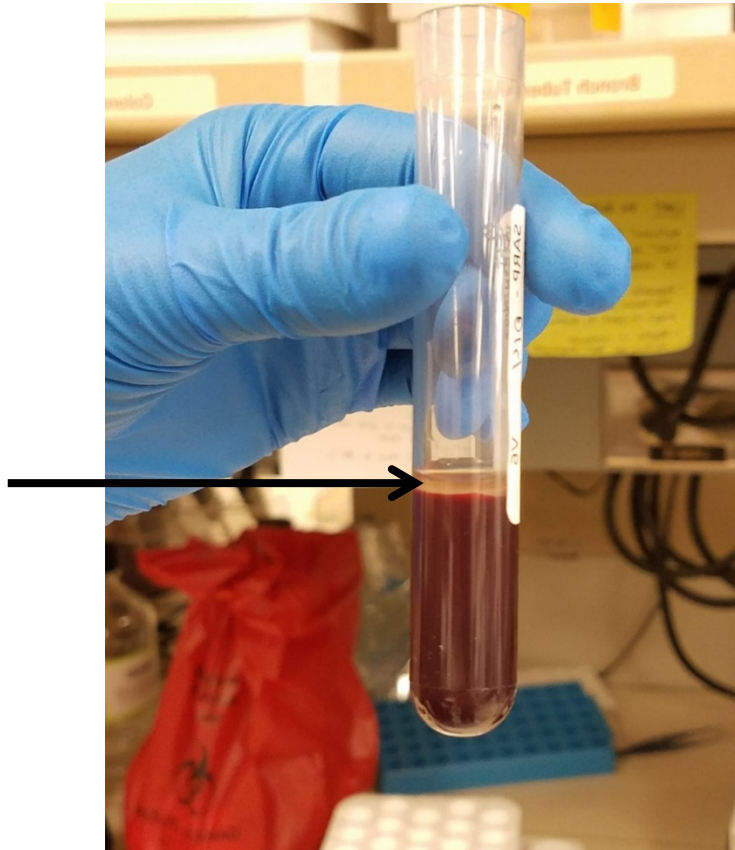


Place the **Gold Top Serum** tube upright at room temperature for 30 minutes.

LAVENDER TOP (N=2)  
10ml Plasma

LAVENDER TOP (N=3)  
4ml Plasma

**GOLD TOP 5ml  
Serum CC-PRL**



**Buffy Coat**  
1 aliquot

White Buffy Coat layer is sandwiched between Plasma and RBC

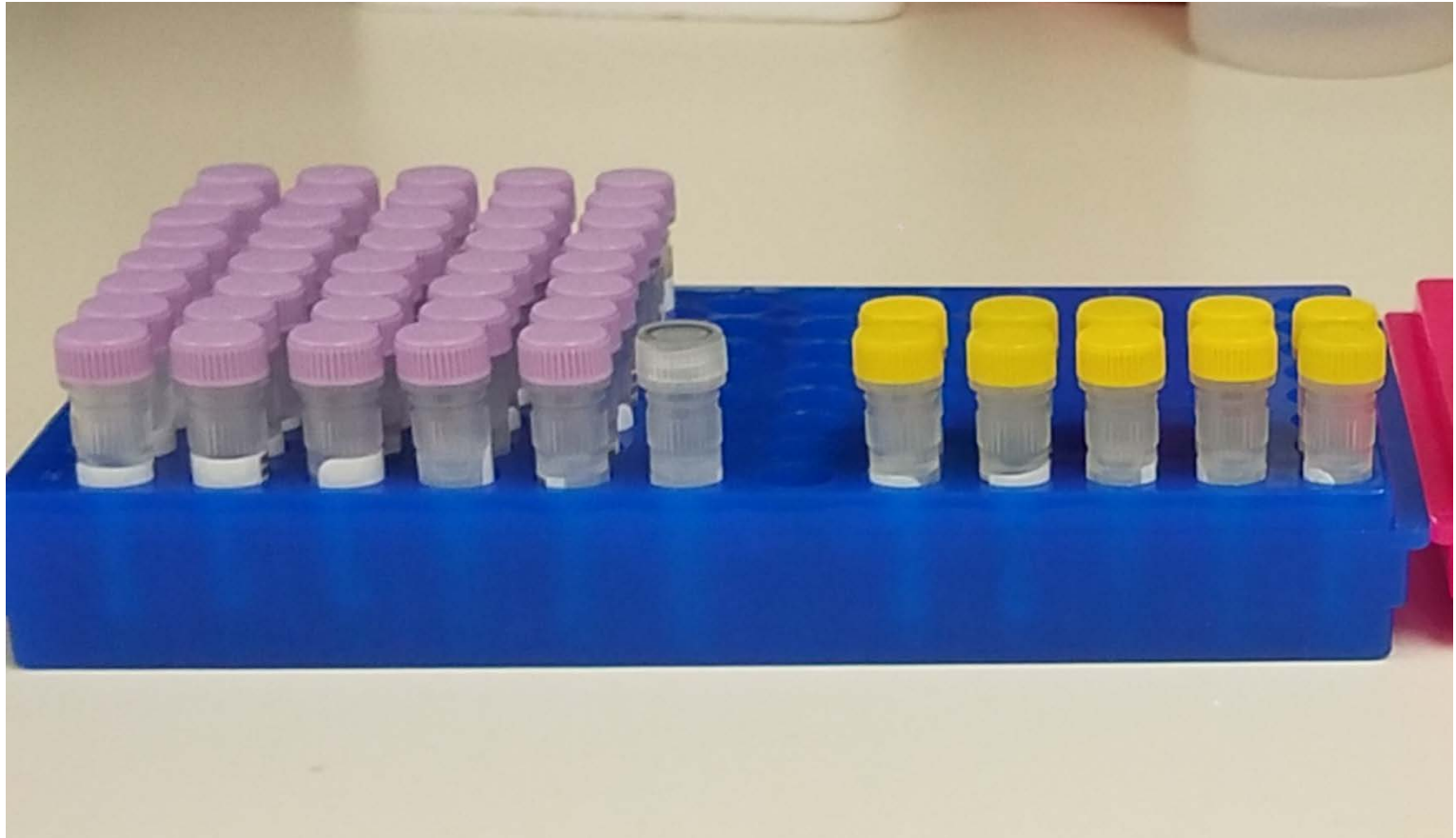
Slow decel on centrifuge and use of wide tips aids in pipetting this layer



It is important to get the entire Buffy Coat for DNA analysis

It is okay to get Plasma and RBC in the sample

# Venous Blood



**Plasma**  
40 aliquot  
0.2ml into each tube

**Buffy Coat**  
1 aliquot

**Serum**  
10 aliquot  
0.2ml into each tube

Place immediately  
into dry ice

## Mix, Wedge, and Syst Art Blood cyrovials



**Plasma Mix**  
11 aliquot  
0.2ml into each tube

**Plasma Wedge**  
11 aliquot  
0.2ml into each tube

**Plasma Syst Art\***  
11 aliquot  
0.2ml into each tube

↓  
Place immediately  
into dry ice

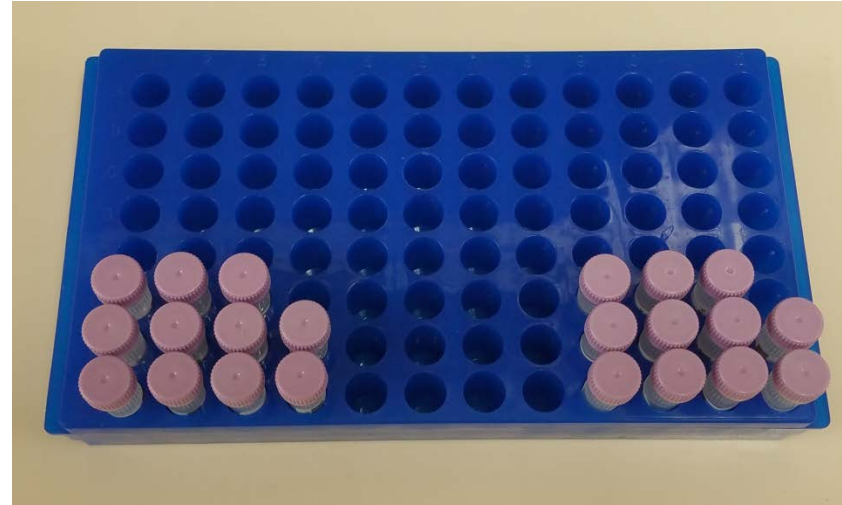
\*Optional

## Peak and Post Exercise cyrovials



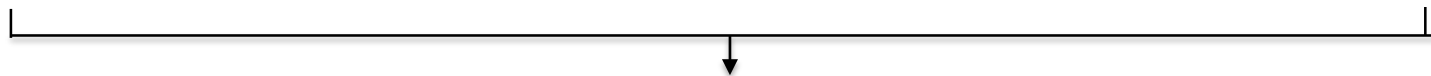
**Peak Plasma Wedge**  
11 aliquot  
0.2ml into each tube

**Peak Plasma Syst Art**  
11 aliquot  
0.2ml into each tube



**Post Plasma Wedge**  
11 aliquot  
0.2ml into each tube

**Post Plasma Syst Art**  
11 aliquot  
0.2ml into each tube



Place immediately  
into dry ice



## PVDOMICS STUDY

### Center Blood Collection 2 – Processing “Rest” Samples into Cryovials Form #306

**Instructions:** Person processing blood should be familiar with the PVDOMICS blood processing MOP Chapter 34. Check if participant ID on Vacutainer™ blood tubes matches with ID on the cryovials and sticker provided in processing kit. The study coordinator will provide the study participant identification number and alphacode.

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1. Identification Number

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2. Alphacode

|  |  |  |  |  |  |
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3. Processing Date (mm/dd/yyyy)

Place bag label here

4. Username of the person processing the sample .....

5. Time received at lab (24-hr clock) (hh:mm)..... : .....

| Type of Blood                    | Type of Tube(s)           | 6. Was the required volume of blood collected?<br>0=No, 1=Yes, 8=Not collected | 7. Was the specimen placed on ice before processing?<br>0=No, 1=Yes, 8=Not collected | 8. Specimen condition<br>0=Normal, 1=Hemolysis, 2=Milky | 9. Start time of processing sample (24-hr clock) (hh:mm) | 10. Time specimen frozen in dry ice (24-hr clock) (hh:mm) | 11. Time specimen placed in -70°C/-80°C freezer (24-hr clock) (hh:mm) |
|----------------------------------|---------------------------|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------|----------------------------------------------------------|-----------------------------------------------------------|-----------------------------------------------------------------------|
| Rest Venous                      | a. Lavender Top EDTA 10ml | ___                                                                            | ___                                                                                  | ___                                                     | ___:___                                                  | ___:___                                                   | ___:___                                                               |
| Rest Venous                      | b. Lavender Top EDTA 10ml | ___                                                                            | ___                                                                                  | ___                                                     | ___:___                                                  | ___:___                                                   | ___:___                                                               |
| Rest Venous                      | c. Gold Top SST 5ml       | ___                                                                            | ___                                                                                  | ___                                                     | ___:___                                                  | ___:___                                                   | ___:___                                                               |
| Rest Systemic Artery             | d. Lavender Top EDTA 4 ml | ___                                                                            | ___                                                                                  | ___                                                     | ___:___                                                  | ___:___                                                   | ___:___                                                               |
| Pulmonary Capillary “Rest Wedge” | e. Lavender Top EDTA 4ml  | ___                                                                            | ___                                                                                  | ___                                                     | ___:___                                                  | ___:___                                                   | ___:___                                                               |
| Pulmonary Artery “Rest Mix”      | f. Lavender Top EDTA 4ml  | ___                                                                            | ___                                                                                  | ___                                                     | ___:___                                                  | ___:___                                                   | ___:___                                                               |

12. Number of cryovials of 200ul Plasma Rest-Venous ..... \_\_\_\_ \_\_\_\_
13. Number of cryovials Buffy Coat-Venous ..... \_\_\_\_ \_\_\_\_
14. Number of cryovials of 200ul Serum-Rest-Venous ..... \_\_\_\_ \_\_\_\_
15. Number of cryovials of 200 ul Plasma-Rest-Syst Art ..... \_\_\_\_ \_\_\_\_
16. Number of cryovials of 200ul Plasma Rest-Wedge ..... \_\_\_\_ \_\_\_\_
17. Number of cryovials of 200ul Plasma Rest-Mix..... \_\_\_\_ \_\_\_\_

*Note: Place a black dot with permanent marker on the screw cap if the volume is less than 200 ul*

18. Were any issues experienced during processing (0=No, 1=Yes)..... \_\_\_\_

Comments:

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|  |

200. Date form completed (mm/dd/yyyy)..... \_\_\_\_/\_\_\_\_/\_\_\_\_

201. Username of person completing/reviewing completeness of this form ..... \_\_\_\_

Clinical Center Use Only

Date form entered (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_

Username of person entering this form \_\_\_\_\_

# Expected Forms for C2

Since not all sites are drawing blood during exercise there are 2 different sets of forms for C2. Only 1 set of forms should be completed per subject

Non Exercise (Cornell, Columbia,  
Johns Hopkins, Vanderbilt)

Exercise (BWH, Mayo Clinic,  
Arizona)

304-C2 Blood Draw

307-C2 Blood Draw

305-C2 Processing of PAXgene

308-C2 Processing of PAXgene

306-C2 Processing of Cryovials

309-C2 Processing of Cryovials

**Note: Use the forms designated for your site. The database reports only look at the forms expected from your site. If you use 304 instead of 307 or vice versa, the form will appear uncompleted in the reports**

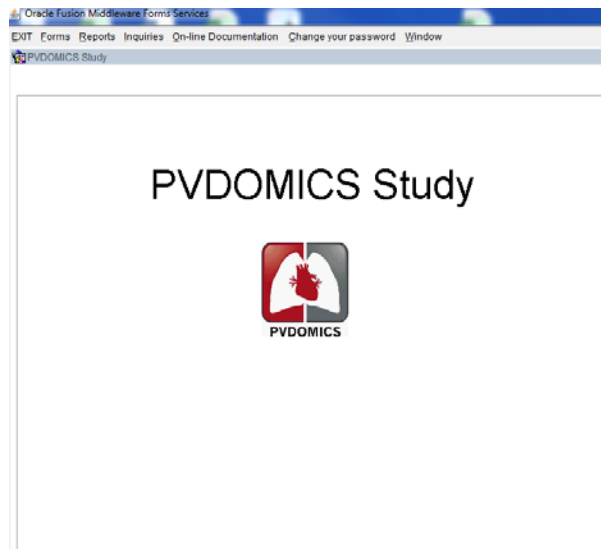
# Shipping and Creating Shipping Log for Room Temperature Biorepository Specimens

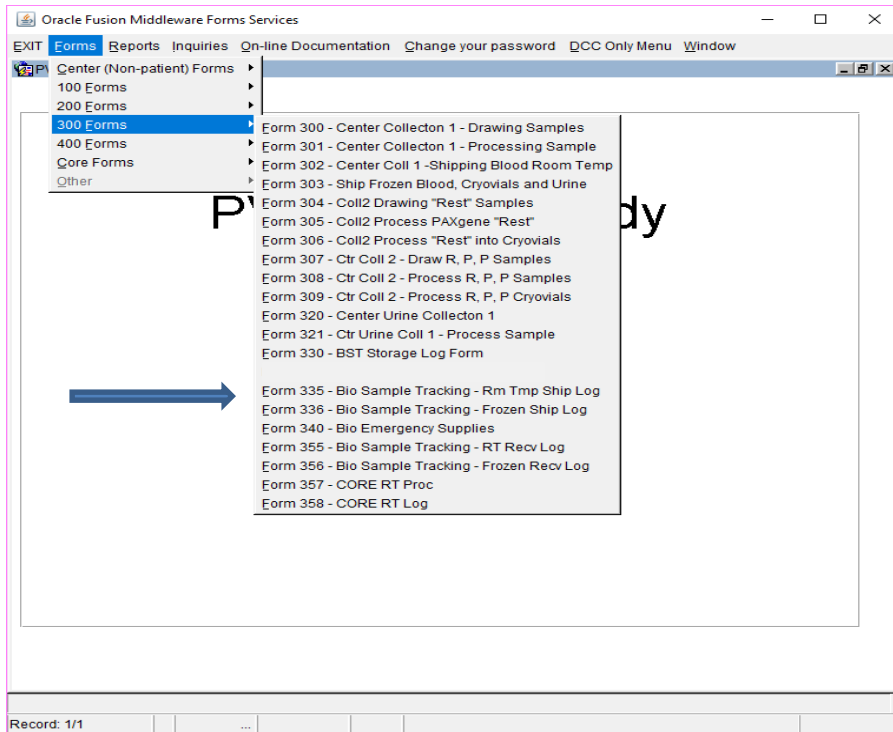


## **NHLBI Pulmonary Vascular Disease Phenomics Program**

*Funded by the National Heart, Lung, and Blood Institute of the  
National Institutes of Health with support from  
the Pulmonary Hypertension Association*

- Use Internet Explorer browser to go PVDOMICS website  
<http://qhsapps.ccf.org/pvdomics/>
- Click [Log into the PVDOMICS Database](#) and enter username and password
- Go to Forms, click on 300 Forms





## 1. Select Form 335

Oracle Fusion Middleware Forms Services

Action Edit Query Block Record Field Help Window

PVD Room Temperature Specimen Shipment Log Form - Form 335

Change Value SAVE EXIT Revision of 11/01/2016

PVD Biological Sample Tracking System Room Temperature Specimen Shipment Log Form - Form 335

1. Identification Number

2. Alphacode

3. Date of collection (mm/dd/yyyy)

4. Shipment box ID (auto populated).....

5. Username of person preparing the shipment.....

6. Courier used for this shipment (1=UPS, 2=STERLING).....

| Sample Barcode | Tube top color code |
|----------------|---------------------|
|                |                     |
|                |                     |

Comments:

Date Form Entered (mm/dd/yyyy) 04/12/2017 Username of person entering this form TRAIN09

2. Fill in ID number, Alpha Code, Collection Date
3. Select Username and Courier Used
4. Scan RT tubes (10ml EDTA, 4ml Heparin)
5. Run Report and print
6. Include print out in package
7. Email biorepository tracking information

**\*Note: There is no storage log for these tubes as they are never stored at your site**

# Using UPS CampusShip

- At least one member from each site should have a UPS account
- If a new or additional account is needed, email the biorepository [pvd-biorepos@bio.ri.ccf.org](mailto:pvd-biorepos@bio.ri.ccf.org)
- Once an account is activated, our dock address needs to be added  
Cleveland Clinic, LRI  
Laura Peterson  
2111 E 96<sup>th</sup> Street  
NB2-37  
Cleveland, OH 44106  
216-445-6625

The screenshot shows the 'Create A Shipment' page on the UPS CampusShip website. The header is dark brown with the UPS CampusShip logo and navigation links: 'QUICK START', 'Tracking', 'Shipping', and 'Services'. Below the header, the page title 'Create A Shipment' is displayed. The main form area is titled 'Begin Your Shipment' and includes a 'Help' link. A message bar states: 'Set your preferences to enable one-step shipping. (Don't show this message again)'. The form is divided into sections. The first section, 'WHERE IS THIS SHIPMENT GOING?', contains an 'Address Book' dropdown set to 'Select One' and a prompt to 'Enter a New Address'. The 'Enter a New Address' section includes fields for 'Company or Name' (Cleveland Clinic), 'City' (Cleveland), 'Contact' (Laura Peterson), 'State' (Ohio), 'Country or Territory' (United States), 'ZIP Code' (44106), 'Address Line 1' (2111 E 96th St, NC22), and 'Telephone' (2164456625). There are also fields for 'Address Line 2', 'Ext.', 'Address Line 3', and 'E-mail' (petersl@ccf.org). Checkboxes for 'Validate this street address' and 'Residential address' are present. At the bottom, there are 'Save Options for Address' and 'Save this to my Address Book as' sections, both with a 'Save as New Entry' button and a preview of the address '2111 E 96th St, NC22'.

# Creating Label for Room Temperature Shipment

**UPS CampusShip®**  
QUICK START   Tracking   Shipping

PBB CA-3  
Boston MA 02115  
Telephone: 2164456625  
email: petersl@ccf.org

Return Address:  Same As Ship From

**3 WHAT ARE YOU SHIPPING?**

Number of Packages:  Use the same values for all packages?

Packaging Type:

Weight:  lb

Package Dimensions:  Length  Width  Height in.

Large or Unusually Shaped Packages: ☐ Large Package ☐ Additional Handling

Package Declared Value:  USD

Note: Additional shipping fees may apply based on declared value.

Does this package include batteries? ☐ Yes ☒ No

**4 HOW WOULD YOU LIKE TO SHIP?**

Service:  [Compare Time and Cost](#)

Do you need additional services?

|                                                           | Fee? |
|-----------------------------------------------------------|------|
| <input type="checkbox"/> Send E-mail Notifications        | Free |
| <input type="checkbox"/> Receive Confirmation of Delivery | Yes  |
| <input type="checkbox"/> Deliver On Saturday              | Yes  |
| <input type="checkbox"/> Dry Ice                          | Yes  |

Some services may require extra information. You will be able to enter the required information on the next page.

**5 WOULD YOU LIKE TO ADD REFERENCE NUMBERS TO THIS SHIPMENT?**

UPS gives you the option to track your shipments using [references](#) that you define.

Accounting Unit:

Activity Code:

Reference 3:

☐ Add a bar code for Accounting Unit to my Shipping label

**6 HOW WOULD YOU LIKE TO PAY?**

Please enter your payment information below. The information you enter will be transmitted using a secure connection. Required fields are indicated with \*.

Payment Method for Shipping Charges:

**7 WOULD YOU LIKE TO SCHEDULE A PICKUP?**

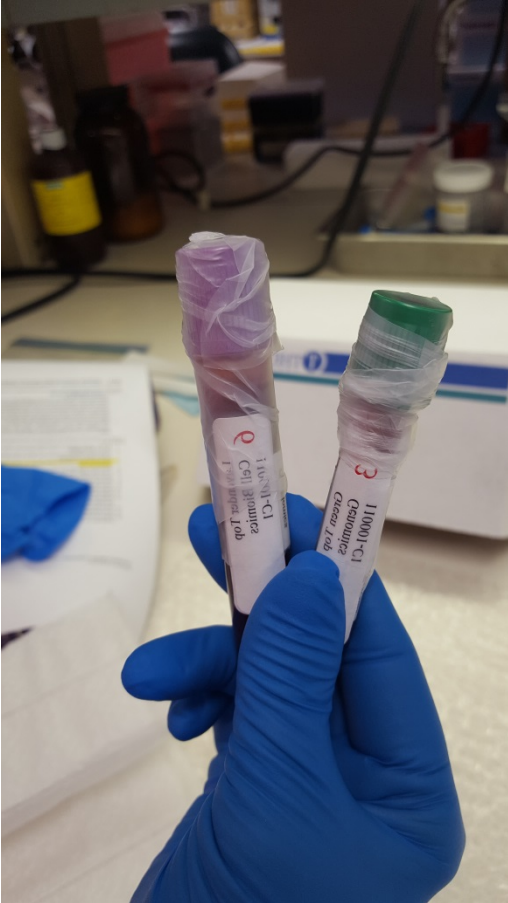
☐ Schedule a [UPS On-Call Pickup](#) - An additional fee may apply

☒ Review Shipping details, including price, before completing this shipment

[Start Over](#) [Next](#)

- Select Other Packaging in Package Type
- Enter in weight (about 4lbs)
- Service level is autoset to UPS Next Day Air
- Optional to send email notifications
- Select Ship Now and print shipping label
- Adhere to package with provided shipping pouches

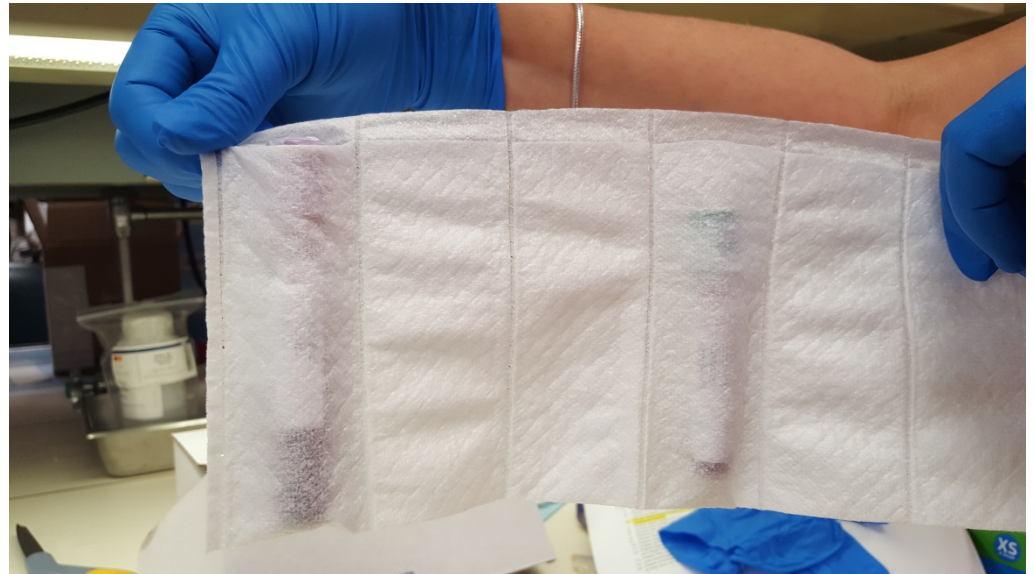
# Shipping of room temperature tubes



Wrap tubes (10ml Purple Top EDTA tube and 4ml Green Top Heparin tube) in parafilm

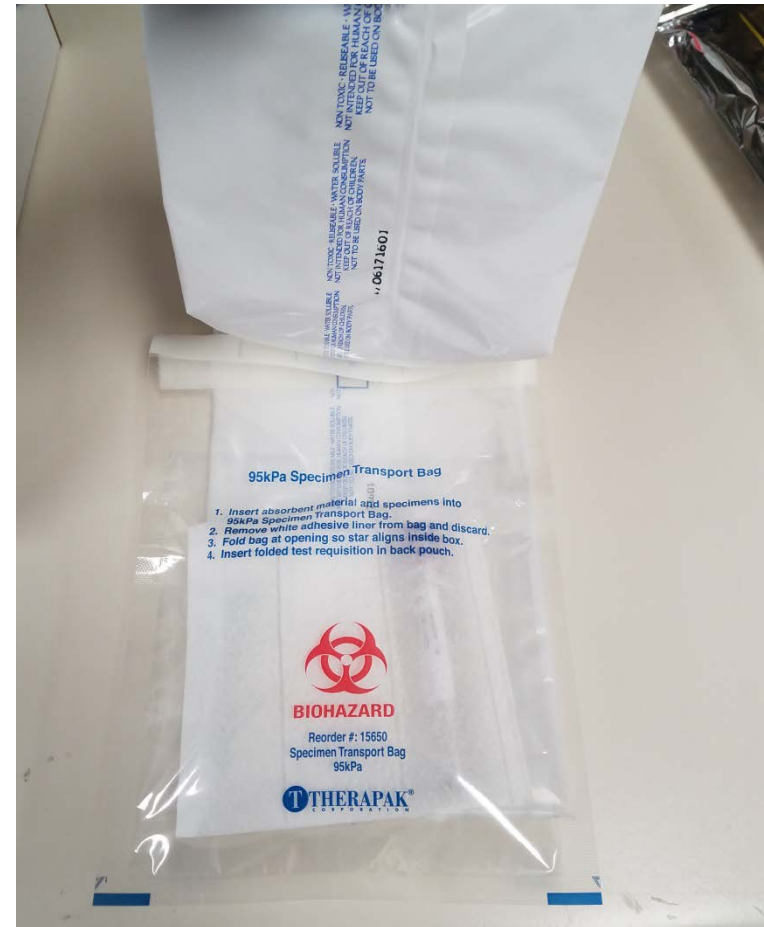
Place tubes in absorbent pouch

If more than one patient had a C1 in a day, their tubes can be sent in the same package, up to 6 total tubes.

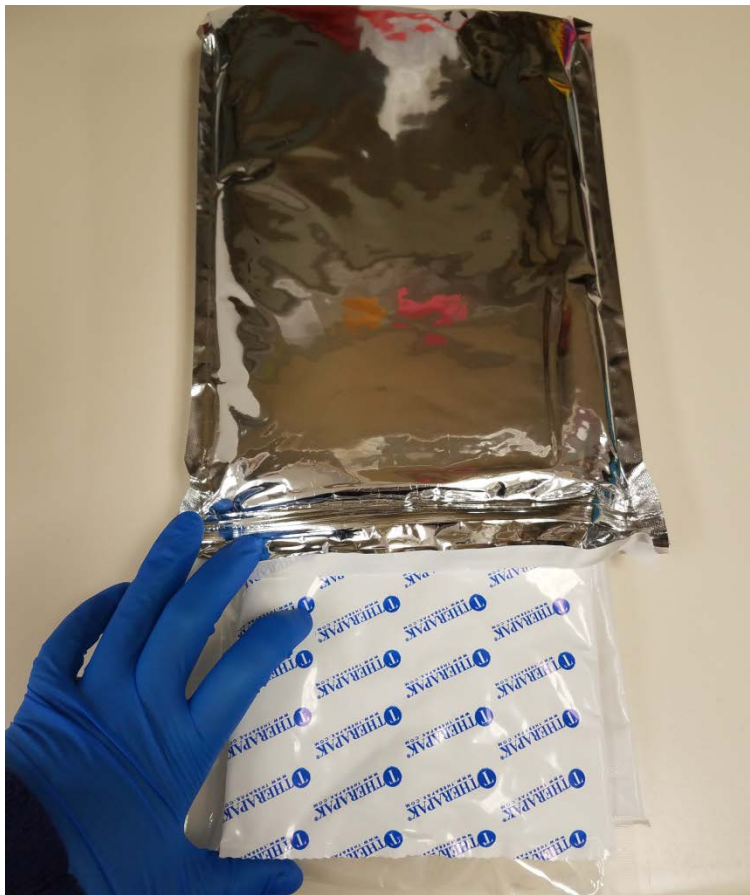




Place tubes in absorbent pouch in bag



Sandwich bag in unfrozen gel wrap



Slide gel pack into insulated envelope

Include Form 335 printout

Close package and place UN3373 label  
and shipping document on box

# Collection 1 occurring on Friday

- If Collection 1 is scheduled for Friday, email [pvd-biorepos@bio.ri.ccf.org](mailto:pvd-biorepos@bio.ri.ccf.org) as soon as possible, ideally by noon on Thursday
- We will provide the shipping label since our dock is closed on the weekend and the package will need to be sent to a technician's house
- An orange "UPS Saturday Delivery" sticker needs to be placed on the package
- Email [pvd-biorepos@bio.ri.ccf.org](mailto:pvd-biorepos@bio.ri.ccf.org) with confirmation the collection occurred so we know to expect the sample

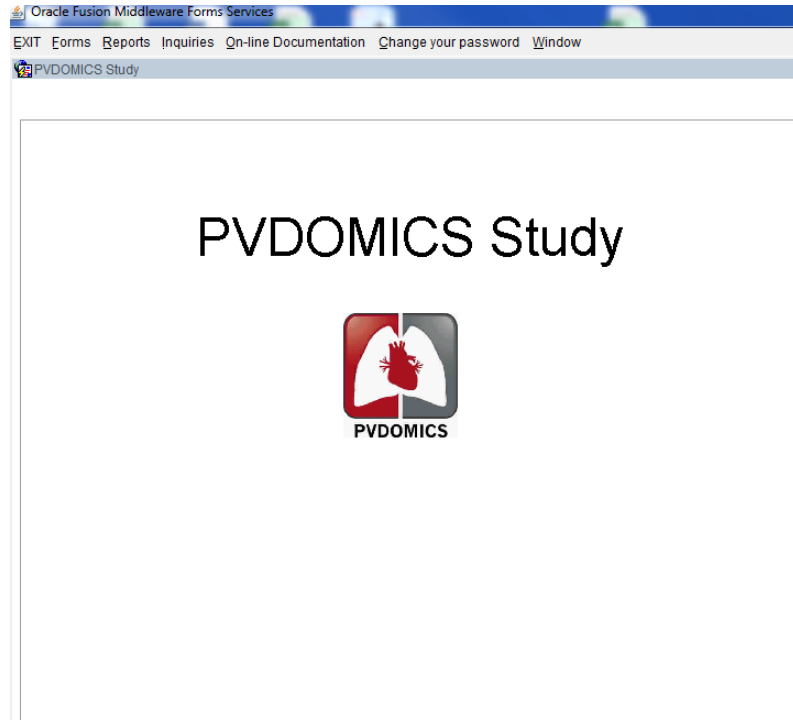
# Creating Storage and Shipment Logs for Frozen Biorepository Specimens



## **NHLBI Pulmonary Vascular Disease Phenomics Program**

*Funded by the National Heart, Lung, and Blood Institute of the  
National Institutes of Health with support from  
the Pulmonary Hypertension Association*

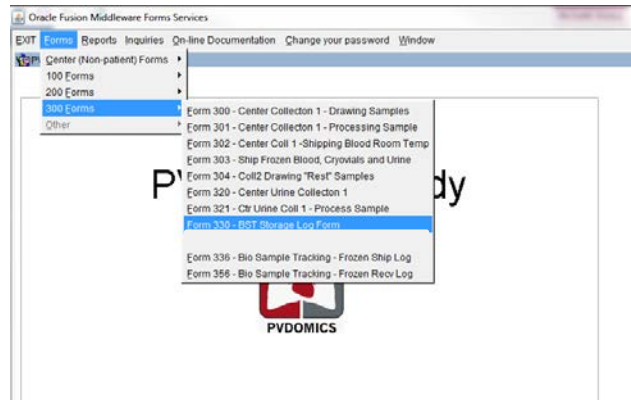
- Use Internet Explorer browser to go PVDOMICS website  
<http://qhsapps.ccf.org/pvdomics/>
- Click [Log into the PVDOMICS Database](#) and enter username and password
- Go to Forms, click on 300 Forms



# Storage Log

**A separate storage log need to be completed for each collection number for each patient.**

1. Select Form 330 – BST Storage Log Form



2. Fill in ID Number, Alpha Code, Collection Date, and Collection Number
3. Make sure cursor is in the sample barcode column
4. Scan in the all aliquots for given patient and collection

The screenshot displays the 'PVD Biological Sample Tracking System Specimen Storage Log Form - Form 330'. The form includes a header with the PVDOMICS logo and a revision date of 11/01/2016. Below the header, there are input fields for '1. Identification Number', '2. Alphacode', '3. Collection Date (mm/dd/yyyy)', and '4. Collection Number'. A 'Run Report' button is located next to the collection date field. The main body of the form is a table with the following columns: 'Sample Barcode', 'Tube / cryovile top color', 'Black Dot?', and 'Comments'. The table has multiple rows for data entry. At the bottom of the form, there are fields for 'Date log created (mm/dd/yyyy)' (02/27/2018) and 'Username of person creating the log' (SHERERS). The footer indicates 'Record: 1/1'.

# Storage Log

5. A new row should populate after each tube is scanned. If it doesn't, press tab or enter and a blank row will be created
6. To add a black dot, enter "1" in Black Dot column. If there is no black dot, do not enter anything
7. Add any comments that are necessary
8. Click "Dup Barcodes?" to check for duplicates. If there are duplicates, the row will be highlighted
9. Delete by clicking Record in Toolbar and selecting Remove
10. Check for duplicates until none are found
11. Save. After saving no more edits can be made
12. Once saved, run the report. Report will be created in Internet Explorer window, not in database window
13. Print report for study records



## Note:

- Do not scan empty tubes into the storage log
- Collection 2: Scan *PAXgene*® tubes into the storage log after 2 hours at room temperature.
- Multiple storage logs can be created for the same person and collection but we recommend scanning all the tubes at once to limit possible errors

## Example of Specimen Storage Log



### PVDOMICS Study Specimen Storage Log

04/12/2017 01:09 PM

Page 1 of 1

| PVIDOMICS |            |        |            |            |         |
|-----------|------------|--------|------------|------------|---------|
|           |            | PID    | AC         | Visit Date | Coll No |
|           |            | 210001 | BJ         | 02/23/2017 | C1      |
| Barcode   | Coll Date  | Color  | Vial Label | DOT        | Comment |
| B2100001  | 02/23/2017 | Purple | Plasma     |            |         |
| B2100004  | 02/23/2017 | Purple | Plasma     |            |         |
| B2100005  | 02/23/2017 | Purple | Plasma     |            |         |
| B2100006  | 02/23/2017 | Purple | Plasma     | 1          |         |
| B2100007  | 02/23/2017 | Purple | Plasma     |            |         |
| B2100008  | 02/23/2017 | Purple | Plasma     |            |         |
| B2100009  | 02/23/2017 | Purple | Plasma     |            |         |
| B2100010  | 02/23/2017 | Purple | Plasma     |            |         |
| B2100012  | 02/23/2017 | Purple | Plasma     |            |         |
| B2100013  | 02/23/2017 | Purple | Plasma     |            |         |
| B2100014  | 02/23/2017 | Blue   | Plasma     |            |         |
| B2100015  | 02/23/2017 | Blue   | Plasma     |            |         |
| B2100016  | 02/23/2017 | Blue   | Plasma     |            |         |
| B2100017  | 02/23/2017 | Blue   | Plasma     |            |         |
| B2100018  | 02/23/2017 | Blue   | Plasma     |            |         |
| B2100019  | 02/23/2017 | Blue   | Plasma     |            |         |
| B2100020  | 02/23/2017 | Blue   | Plasma     |            |         |
| B2100021  | 02/23/2017 | Blue   | Plasma     | 1          |         |
| B2100022  | 02/23/2017 | Blue   | Plasma     |            |         |
| B2100023  | 02/23/2017 | Blue   | Plasma     |            |         |
| B2100024  | 02/23/2017 | Blue   | Plasma     |            |         |
| B2100025  | 02/23/2017 | Blue   | Plasma     |            |         |
| B2100026  | 02/23/2017 | Blue   | Plasma     |            |         |
| B2100027  | 02/23/2017 | Yellow | Serum      |            |         |
| B2100028  | 02/23/2017 | Yellow | Serum      |            |         |
| B2100029  | 02/23/2017 | Yellow | Serum      |            |         |
| B2100030  | 02/23/2017 | Yellow | Serum      |            |         |
| B2100031  | 02/23/2017 | Yellow | Serum      |            |         |
| B2100032  | 02/23/2017 | Yellow | Serum      |            |         |
| B2100033  | 02/23/2017 | Yellow | Serum      |            |         |
| B2100034  | 02/23/2017 | Yellow | Serum      |            |         |
| B2100035  | 02/23/2017 | Yellow | Serum      |            |         |
| B2100036  | 02/23/2017 | Yellow | Serum      |            |         |
| B2100037  | 02/23/2017 | Yellow | Serum      | 1          |         |
| B2100038  | 02/23/2017 | Yellow | Serum      |            |         |
| B2100039  | 02/23/2017 | Yellow | Serum      |            |         |
| B2100040  | 02/23/2017 | Yellow | Serum      |            |         |
| U2100043  | 02/23/2017 | Orange | Urine      |            |         |
| U2100044  | 02/23/2017 | Orange | Urine      |            |         |
| U2100045  | 02/23/2017 | Orange | Urine      |            |         |
| U2100046  | 02/23/2017 | Orange | Urine      |            |         |
| U2100047  | 02/23/2017 | Orange | Urine      |            |         |
| U2100048  | 02/23/2017 | Orange | Urine      |            |         |



### PVDOMICS Study Frozen Specimen Shipment Log

04/12/2017 01:10 PM

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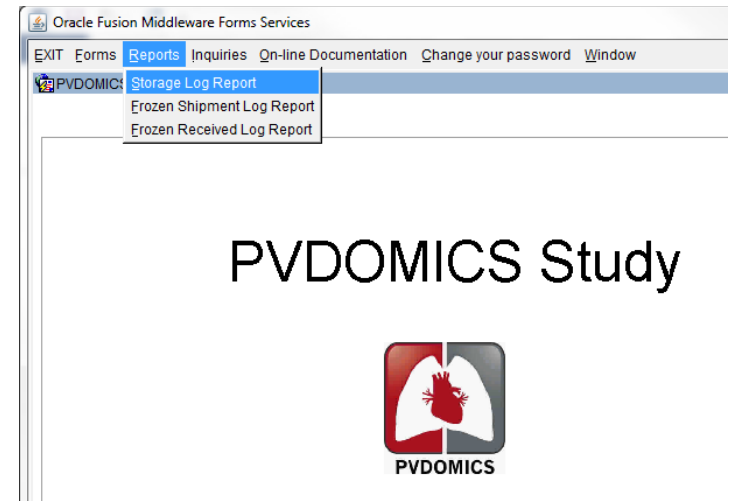
Box ID: 51F001

| Center # |            | Ship Date | Box ID        | Ship User | Comments   |          |
|----------|------------|-----------|---------------|-----------|------------|----------|
| 51       | 04/03/2017 | 51F001    | CORDERA       |           |            |          |
| Barcode  | PID        | AC        | Coll# & Date  | Color     | Vial Label | Comments |
| B5100692 | 510006     | EF        | C1 03/07/2017 | Purple    | Plasma     |          |
| B5100729 | 510006     | EF        | C2 03/07/2017 | Red       | Genomics   |          |
| B5100730 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100731 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100732 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100733 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100734 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100735 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100736 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100737 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100738 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100739 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100740 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100741 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100742 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100743 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100744 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100745 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100746 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100747 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100748 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100749 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100750 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100751 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100752 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100753 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100754 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100755 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100756 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100757 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100758 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100759 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100760 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100761 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100762 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100763 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100764 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100765 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100766 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100767 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100768 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100769 | 510006     | EF        | C2 03/07/2017 | Violet    | Plasma     |          |
| B5100771 | 510006     | EF        | C2 03/07/2017 | Yellow    | Serum      |          |
| B5100772 | 510006     | EF        | C2 03/07/2017 | Yellow    | Serum      |          |
| B5100773 | 510006     | EF        | C2 03/07/2017 | Yellow    | Serum      |          |
| B5100775 | 510006     | EF        | C2 03/07/2017 | Yellow    | Serum      |          |
| B5100777 | 510006     | EF        | C2 03/07/2017 | Yellow    | Serum      |          |

# Retrieve Storage Log

1. Go to Reports tab in database
2. Click on Storage Log Report
3. Enter Patient ID, Alphacode, and Collection Number
4. Click on Run BST Specimen Storage Log Report button

Report will be generated in Internet Explorer window



This screenshot shows the 'PVD Study Run BST Specimen Storage Log Report' form. The form has a title bar 'Oracle Fusion Middleware Forms Services' and a menu bar with 'Action', 'Edit', 'Query', 'Block', 'Record', 'Field', 'Help', and 'Window'. Below the menu bar is a toolbar with various icons. The form itself has a header section with a PVDOMICS logo and buttons for 'Change Value', 'SAVE', 'EXIT', and 'Revision of'. The main content area is titled 'PVD Study Run BST Specimen Storage Log Report' and contains three input fields: '110011' for '1. Identification Number', 'RC' for '2. Alphacode', and 'C1' for '3. Collection Number'. At the bottom of the form is a button labeled 'Run BST Specimen Storage Log Report'.

# Shipment Log

A shipment log can only be created if a storage log for the cryovials was previously created!!!

1. Select Form 336 – Bio Sample Tracking Frozen Ship Log
2. Enter Center Number, Shipment Date, and Username of the person preparing the shipment

**Note: Shipment logs are created based on dry ice shipper boxes.** A maximum of 7 boxes (9x9) can go into a dry ice shipper. Once 7 boxes have been scanned, save the log and **make note of the autopopulated Shipment Box ID.**

**Combine boxes if only partially filled. Each box can have samples from multiple subjects**

Oracle Fusion Middleware Forms Services

Action Edit Query Block Record Field Help Window

PVD Biological Sample Tracking System Frozen Specimen Shipment Log Form - Form 336

DCC Inq. Change Value SAVE EXIT Revision of 11/01/2016

PVD Biological Sample Tracking System Frozen Specimen Shipment Log Form - Form 336

1. Center Number 2. Shipment Date (mm/dd/yyyy) Run Report Dup Barcodes?

3. Shipment box ID: 4. Username of person preparing the shipment v

| Sample Barcode<br>(scan the code<br>from each tube<br>or cryovial) | PID | AC | Collection<br>Number | Collection<br>Date | Tube /<br>cryovial<br>top color<br>code | Storage<br>Log<br>Comments | Cryovial<br>marked<br>with a<br>black dot? |
|--------------------------------------------------------------------|-----|----|----------------------|--------------------|-----------------------------------------|----------------------------|--------------------------------------------|
|                                                                    |     |    |                      |                    |                                         |                            |                                            |
|                                                                    |     |    |                      |                    |                                         |                            |                                            |
|                                                                    |     |    |                      |                    |                                         |                            |                                            |
|                                                                    |     |    |                      |                    |                                         |                            |                                            |
|                                                                    |     |    |                      |                    |                                         |                            |                                            |
|                                                                    |     |    |                      |                    |                                         |                            |                                            |
|                                                                    |     |    |                      |                    |                                         |                            |                                            |
|                                                                    |     |    |                      |                    |                                         |                            |                                            |
|                                                                    |     |    |                      |                    |                                         |                            |                                            |

Comments

Date log created (mm/dd/yyyy) 02/27/2018 Username of person creating the log SHERERS

Record: 1/1

# Shipment Log

3. Make sure cursor is in the sample barcode column
4. Scan in the tubes
5. A new row should populate after each tube is scanned. If it doesn't, press tab or enter and a blank row will be created
6. If cryovial has a black dot, enter "1" in Black Dot column
7. Click "Dup Barcodes?" to check for duplicates
8. Remove any duplicates
9. Save. After saving no more edits can be made
10. Once saved, run the report. Report will be created in Internet Explorer window, not in database window
11. Print 2 copies of the report: for documentation and shipper box

**Note:** If you receive the error invalid barcode, this means the vial was not scanned into a storage log. Put the vial aside and once you are finished with the log, scan these tubes into storage logs. A new shipment log would need to be created to include these tubes

Oracle Fusion Middleware Forms Services

Form 336 - Patient ID: 41 - Date: 02/05/2018

Change Value SAVE EXIT Revision of 11/01/2016

PVD Biological Sample Tracking System Frozen Specimen Shipment Log Form - Form 336

1. Center Number 41 2. Shipment Date (mm/dd/yyyy) 02/05/2018 Run Report Dup Barcodes?

3. Shipment box ID

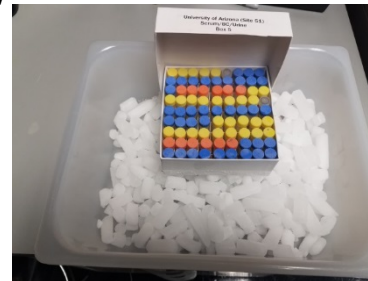
4. Username of person preparing the shipment PETERSL

| Sample Barcode<br>(scan the code from each tube or cryovial) | PD     | AC | Collection Number | Collection Date | Tube / cryovial top color code | Storage Log | Comments | Cryovial marked with a black dot? |
|--------------------------------------------------------------|--------|----|-------------------|-----------------|--------------------------------|-------------|----------|-----------------------------------|
| B4110030                                                     | 410007 | PB | C2                | 12/22/2017      | Violet                         |             |          |                                   |
| B4110032                                                     | 410007 | PB | C2                | 12/22/2017      | Violet                         |             |          |                                   |
| B4110033                                                     | 410007 | PB | C2                | 12/22/2017      | Violet                         |             |          |                                   |
| B4110034                                                     | 410007 | PB | C2                | 12/22/2017      | Violet                         |             |          |                                   |
| B4110035                                                     | 410007 | PB | C2                | 12/22/2017      | Violet                         |             |          |                                   |
| B4110036                                                     | 410007 | PB | C2                | 12/22/2017      | Violet                         |             |          |                                   |
| B4110037                                                     | 410007 | PB | C2                | 12/22/2017      | Violet                         |             |          |                                   |
| B4110038                                                     | 410007 | PB | C2                | 12/22/2017      | Violet                         |             |          |                                   |
| B4110039                                                     | 410007 | PB | C2                | 12/22/2017      | Violet                         |             |          |                                   |
| B4120995                                                     |        |    |                   |                 |                                |             |          |                                   |

Comments

Date log created (mm/dd/yyyy) 02/05/2018 Username of person creating the log PETERSL

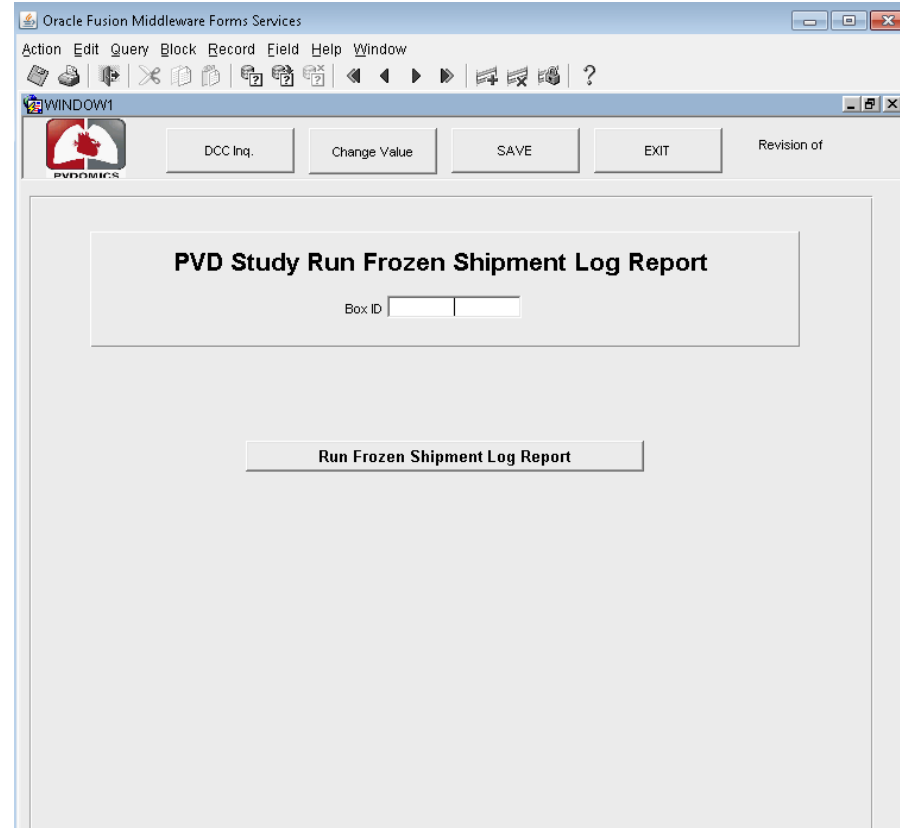
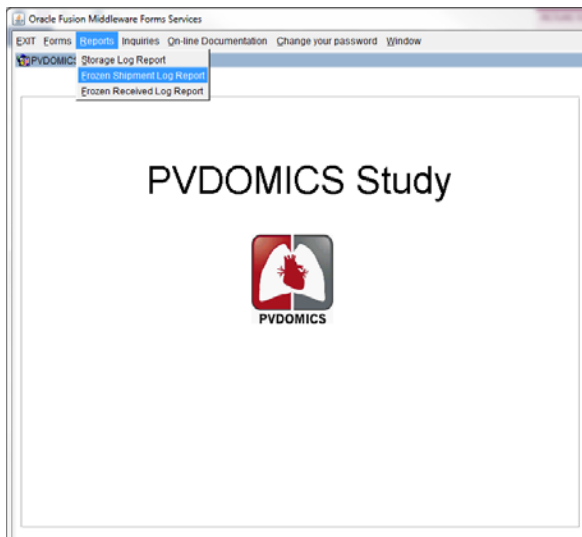
PVD Application Invalid barcode OK



# Retrieve Shipment Log

1. Go to Reports tab in the database
2. Click on Frozen Shipment Log Report
3. Enter Box ID
4. Click on Run Frozen Shipment Log Report

Report will be generated in Internet Explorer window



## Example of Specimen Shipment Log

Print 2 copies

| <br><b>PVDOMICS</b> |            | <b>PVDOMICS Study</b> <span style="float: right;">04/11/2017 02:06 PM</span>       |               |            |          |
|------------------------------------------------------------------------------------------------------|------------|------------------------------------------------------------------------------------|---------------|------------|----------|
|                                                                                                      |            | <b>Frozen Specimen Shipment Log</b> <span style="float: right;">Page 1 of 9</span> |               |            |          |
|                                                                                                      |            | Box ID: 51F001                                                                     |               |            |          |
| Center #                                                                                             | Ship Date  | Box ID                                                                             | Ship User     | Comments   |          |
| 51                                                                                                   | 04/03/2017 | 51F00                                                                              | CORDERA       |            |          |
| Barcode                                                                                              | PID        | AC                                                                                 | Coll# & Date  | Tube Color | Comments |
| B5100692                                                                                             | 510006     | EF                                                                                 | C1 03/07/2017 | Purple     | DOT      |
| B5100729                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Red        |          |
| B5100730                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100731                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100732                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100733                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100734                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100735                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100736                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100737                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100738                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100739                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100740                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100741                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100742                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100743                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100744                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100745                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100746                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100747                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100748                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100749                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100750                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100751                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100752                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100753                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100754                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100755                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100756                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100757                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100758                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100759                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100760                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100761                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100762                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100763                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100764                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100765                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |
| B5100766                                                                                             | 510006     | EF                                                                                 | C2 03/07/2017 | Violet     |          |



**PVDOMICS STUDY**  
**Shipping of Frozen Blood and Urine Cryovials,**  
**PAXgene® Tubes and Urine Tubes to Biorepository Form #303**

|  |  |
|--|--|
|  |  |
|--|--|

1. Center number

|  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|

2. Date specimen shipped (mm/dd/yyyy)

To: **Cleveland Clinic**  
**Lerner Research, NB2-037**  
**Att: Laura Peterson**  
**2111 E. 96<sup>th</sup> St.**  
**Cleveland, OH 44106**  
**(216) 445-6625**  
[pvd-biorepos@bio.ri.ccf.org](mailto:pvd-biorepos@bio.ri.ccf.org)

Pack the cryovials on dry ice as described in MOP Chapter 34/35. Ship samples to address above in the mailer provided. Specimens should be shipped every **first Monday of the month**. If the shipment has to be done on a different day, **first contact** the Biorepository for approval. **Do not ship frozen packages on Thursday or Friday.**

Notify the Biorepository by email ([pvd-biorepos@bio.ri.ccf.org](mailto:pvd-biorepos@bio.ri.ccf.org)) on the day of shipment with the tracking number. Enclose a copy of this form and the printout of the shipment log in the mailer. Keep a copy of this form for your records. Enter Q. 1-3 in the database.

3. Total number of boxes sent.....

Notify the Biorepository to convey package tracking number and date of shipment.

Package Tracking Number: \_\_\_\_\_

Emailed/Faxed/Called in to: \_\_\_\_\_

|                                       |                                      |                                                 |
|---------------------------------------|--------------------------------------|-------------------------------------------------|
|                                       | ____/____/____                       | ____:____                                       |
| Name of Biorepository<br>Staff Member | Date of Notification<br>(mm/dd/yyyy) | Time of Notification<br>(24 hour clock) (hh:mm) |

200. Date form completed (mm/dd/yyyy) .....

201. Username of person completing/reviewing completeness of this form .....

Clinical Center Use Only

Date form entered (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_

Username of person entering this form \_\_\_\_\_

# Shipping Frozen Specimens to Biorepository



## **NHLBI Pulmonary Vascular Disease Phenomics Program**

*Funded by the National Heart, Lung, and Blood Institute of the  
National Institutes of Health with support from  
the Pulmonary Hypertension Association*

# Creating Label for Dry Ice Shipment

UPS CampusShip®  
QUICK START Tracking Shipping

Boston MA 02115  
Telephone: 2144456625  
email: petersl@ccf.org

Same As Ship From

### 3 WHAT ARE YOU SHIPPING?

Number of Packages: 1 Use the same values for all packages? Yes

Packaging Type: Other Packaging \*

Weight: 40 lb \*

Package Dimensions: Length: Width: Height: in.

Large or Unusually Shaped Packages:

☐ Large Package  
☐ Additional Handling

Package Declared Value: USD

Note: Additional shipping fees may apply based on declared value.

Does this package include batteries? No

### 4 HOW WOULD YOU LIKE TO SHIP?

Service: UPS Next Day Air \* Compare Time and Cost

Do you need additional services?

|                                                           | Fee? |
|-----------------------------------------------------------|------|
| <input type="checkbox"/> Send E-mail Notifications        | Free |
| <input type="checkbox"/> Receive Confirmation of Delivery | Yes  |
| <input type="checkbox"/> Deliver On Saturday              | Yes  |
| <input checked="" type="checkbox"/> Dry Ice               | Yes  |

Some services may require extra information. You will be able to enter the required information on the next page.

- Select Other Packaging in Package Type
- Enter in package weight
- Do not check large package box
- Service level is autoselected to UPS Next Day Air
- **Check Dry Ice Box**
- Optional to send email notifications
- Select Next and enter in dry ice weight. The weight must match the weight on UN1845 and UPS Medical Purposes stickers
- Print shipping label and adhere to package with provided shipping pouches
- Email [pvd-biorepos@bio.ri.ccf.org](mailto:pvd-biorepos@bio.ri.ccf.org) with tracking information

## Create A Shipment

PACKAGE

### Additional Shipping Options

Package specific details are required for Dry Ice. Dry Ice details should be provided in the package information section below.

Additional information is needed to complete your shipment. Required fields are indicated with \*.

#### 1 DRY ICE

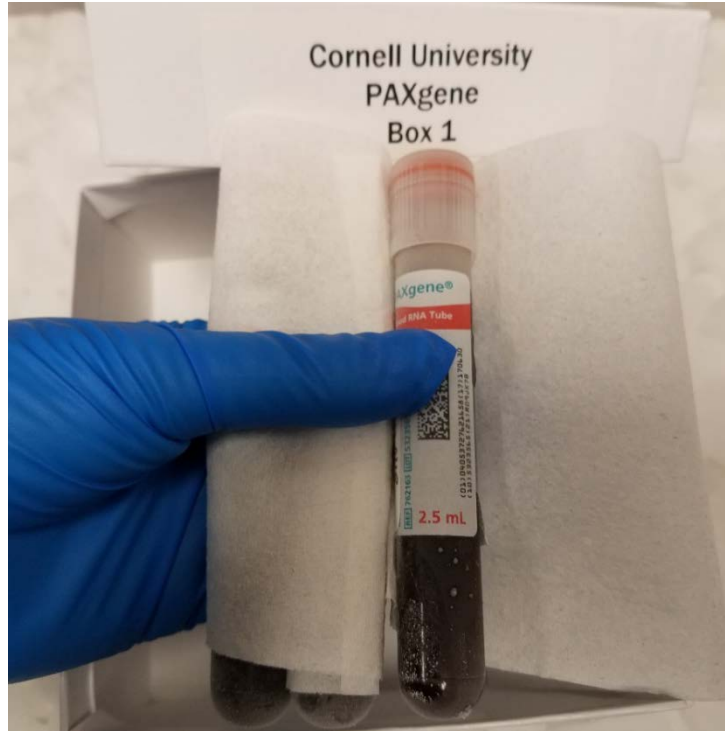
Remove This Option

Dry Ice Weight: 15 kg

Note: All packages are shipped under IATA regulations.

Back Cancel Shipment Next

# Preparing Boxes for Shipment



Wrap PAXgene and urine stock tubes in absorbency material provided



Place rubber band around each box and place up to 2 boxes into each biohazard bags

# Preparing Boxes for Shipment



Fill shipper with layer of dry ice at bottom

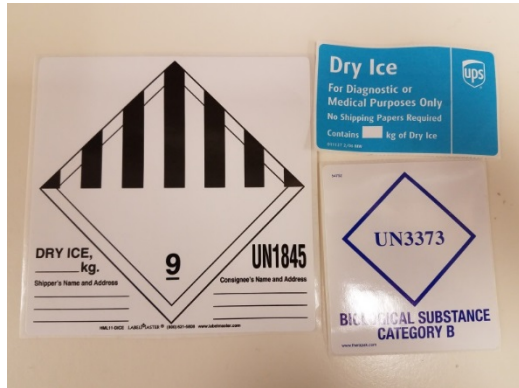
Place biohazard bags with 2 boxes on top of this layer

Up to 7 boxes can fit in each shipper

Fill remaining space with dry ice



# Preparing Boxes for Shipment



Fill out dry ice stickers (the dry ice weight must be the same on both)

Place dry ice and UN3373 stickers on same side of box

Place shipping log on top of inner box.

**Each dry ice shipper needs the correct Shipment Box report which will act as the contents list which is required by Federal regulations**



# **For Questions Please Contact**

**Laura Peterson, Biorepository Manager**  
**Suzy Comhair, PhD, Biorepository Director**

Email: [petersl@ccf.org](mailto:petersl@ccf.org), [comhais@ccf.org](mailto:comhais@ccf.org)

Phone: 216-445-6625