

National Institutes of Health Bethesda, Maryland 20892 http://www.nih.gov

#### MEMORANDUM

To: Principal Investigator

From: David E. Kleiner, MD, PhD Medical Director, Tissue Procurement/Processing Facility NCI/CCR/Laboratory of Pathology Joseph W. Chinquee, DHSc, MT(ASCP), DLM Clinical Manager, Laboratory of Pathology

#### Subject: Tissue Resource Committee (TRC) request for Human Biological Materials for Research

Thank you for your inquiry into Laboratory of Pathology (LP) for Human Biological Materials. This TRC form is to request archived paraffin-embedded biomaterial from clinical cases, and for anonymized fresh frozen biomaterial waste tissues. Your proposed experiment must be covered either by an existing IRB-approved protocol or exemption from the requirement for IRB review.

*Note*: Do not use the attached form to request fresh tissues approved by an IRB protocol; rather, please use the NIH-2803 Medical Record form, which is available in the TPPF or electronically in the Clinical Research Information System (CRIS) as the Research Tissue Procurement Request form.

Biological material from autopsy cases or deceased patients do not require IRB review through the IRIS system. Submissions for determination of "Excluded from IRB review" (either for "exempt human subjects research" or "not human subjects research") must be made in iRIS: https://irb.nih.gov/(NIH Login required). Please provide a copy of the exemption that designates your activity "Excluded from IRB review" with the TRC request form.

Where necessary, include information on IRB approval or exemption, protocol requirements, and patient name, medical record number, pathology case number, and block number - if known. Requests should be submitted to Dr. Joseph Chinquee, Bldg 10, Room 3N238, MSC 1500. Requests will be reviewed by the LP Tissue Resource Committee and forwarded to the Laboratory of Pathology clinical manager and clinical section head for review as quickly as possible. Requests are generally reviewed within 3 days after receipt. Approval notification or request for additional information will be made through e-mail. Turnaround time for processing the biomaterial usually takes between 5-15 working days (3 weeks) for simple requests; but, larger requests could take several weeks, up to two months to complete.

Materials cannot be released unless sufficient diagnostic material is available for NIH clinical archives. If adequate material is available, standard recuts will be prepared by the LP Histology section. Requests for recuts from non-NIH consultation (SS) cases can be processed through the TRC program if the Histology laboratory can accommodate based on workload. If a request cannot be accommodated based on the workload or complexity, it will be sent out to our designated reference laboratory at the requestor's expense. Current reference laboratory costs run from \$5.50 to \$9.30 per slide (subject to change). All requests must include a Common Accounting Number (CAN) to cover the cost of such request(s).

Requests for temporarily signing out stained diagnostic slides for whole-slide imaging must be indicated in the IRB-approved protocol, or have an OHSRP determination and approval from the protocol PI if the request is not linked to the protocol.

For additional information about:

- Applications are to be submitted to Dr. Joseph Chinquee (DHSc) at chinquej@mail.nih.gov. Inquires about the TRC program or request requirements, please email Dr. Chinquee or phone at (301) 480-7177
- Inquiries about status of request after approval, Dr. Chinquee. Please do not contact the laboratory staff about TRC requests.
- For Fresh Tissue collections via the Walter Reed MCC / NCI collaboration; contact Dr. David Kleiner (301) 480-8487 and specify this request on the TRC form under Description of Resource Needs.
- Use of NIH-2803 for IRB approved fresh tissue or questions about the WRMCC/NCI tissue collaboration, please contact Ms. Sarah Young (301) 480-7182



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### NCI LABORATORY OF PATHOLOGY INTRAMURAL REQUEST FOR HUMAN BIOLOGICAL MATERIALS FOR RESEARCH PURPOSES

		VESTIGATOR INFOR				
Principal Investigator	(please print name legibly): Branch:					
Institute:	Branch:	Building:	Room:			
Phone:	Pa	ge: F	ax:			
E-mail:						
Alternate Contact Inf	ormation:					
Alternate Phone:	Page:		Fax:			
E-mail:						
CAN number:						
	<b>DESCRIPTION</b>	OF RESOURCE NEED	S			
Type (must check)	Linked (identifiable)	Anonymized [	Autopsy	Deceased		
Tissue source reque	sted:					
<ul> <li>Normal tissue</li> <li>Abnormal tissue. Indicate key diagnostic terminology for database search.</li> <li>Recuts: Recuts only (please attach list with patient name, NIH MRN number, path number, block #)</li> <li>Recuts with pathology review (attach list )</li> </ul>						
Tissue Type (circle all that apply):       Fresh       Frozen       Paraffin       Autopsy       Cytology         Is this request for Fresh       Tissue collection via Walter Reed MCC / NCI collaboration         Request to temporarily sign out diagnostic slides for whole slide imaging         Check the recut slide type :       Regular/untreated       Charged       Other/specify:						
# of slide recuts: check if recuts should be made using Rnase precautions. Tubes must be provided.						
Other:						
NOTE: Materials cannot be released unless sufficient diagnostic material is available for NIH archives. Tissues and						
slides from n	slides from non-NIH consultation cases are not typically eligible for TRC requests.					

#### INTENDED USE & METHODOLOGY (Attach additional pages if necessary)

Please include a list of any special requirements or exclusions, and include and expiration date of request if applicable.

#### OSHR EXEMPTION FORM or IRB APPROVAL NUMBER MUST BE PROVIDED

Attach OHSR Exemption Form or provide IRB Protocol #: \_

Note: An OSHR exemption is not required for Autopsy material.

For release of material from non-living patients, please attach certification or proof that the patient has expired.

#### **CERTIFICATION BY PRINCIPAL INVESTIGATOR**

The approval provided covers both the protocol and patient-executed consent, and the research proposed is specified within the approved protocol and consent or IRB waiver of consent.

Signature of Principal Investigator of the specified protocol or waiver:

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#### \*\*\* INCOMPLETE FORMS WILL BE RETURNED TO PRINCIPAL INVESTIGATOR \*\*\*

For more information contact:	Joseph Chinquee, DHSc, MBA, MT(ASCP)DLM, Clinical Manager
	(301) 480-7177 or NIH page 102-10321 or e-mail: <u>chinquej@mail.nih.gov</u>
Return form and attachments to: Laboratory of Pathology, Tissue Resource Committee	
	10 Center Drive, Room 10/3SN38, MSC 1500
	Attn: Ms. Annya Lopes (annya.lopes@nih.gov)

Laboratory of Pathology-Internal Use		Processing notes:
Deviewed by	Deter	
Reviewed by:	Date:	



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# **GUIDE TO COMPLETING THE TRC FORM**

When completing the requisition form, please ensure the following information is included or the request will be returned.

## **DESCRIPTION OF RESOURCE NEEDS**

- CAN number must be included in case the work has to be sent to a reference laboratory. The requester will be notified if the work must be sent out and a quote provided to the requester.
- Type linked (to a specific protocol) must be the PI's protocol, or receive permission from the admitting PI to use their material
- Tissue requested typically recuts
- Type typically paraffin
- Charged or regular untreated slides (review the intended purpose if the slides should be charged)
- # of slides per recut
- Note if it needs to have RNase precautions
- Other: elaborate on any notes you want the LP to understand with this request

### **INTENDED USE & METHODOLOGY**

- INTENDED USE must be completed. This allows us to review the protocol to ensure that the patient has consented to have the material released for the intended purpose, but also to allow us to ensure the recuts requested meet the standard for the number of material requested.

### **OSHR EXEMPTION FORM OR IRB APPROVAL**

- IRB Protocol number which allows the use of this material for the intended purpose must be included

### CERTIFICATION

- Signature must be a Principal Investigator