

BioSpecimen Exchange for Neurological Disorders (BioSEND)

Dissecting Oligogenic Biomarkers in Ashkenazi
Jews with Parkinson's Disease


Training Webinar- AJPD

BioSEND Training Webinar Overview

1. Study Reminders
2. Site Equipment
3. Biospecimen Collection Protocol
4. Study Visit Protocol
5. Kits & Samples
 - Requesting Kits
 - Labels
 - Sample Collection & Processing
 - Sample Shipment
5. BioSEND Website
6. Contact Information

Study Reminders

Please remember...

- Biospecimens are limited, valuable resources.
- Standardization and quality are key! 
- Reference the BioSEND Manual of Procedures as needed.
- Do not replace or supplement any kit components without first receiving approval from BioSEND.

Site Equipment

The following items are to be supplied by the site:

- Personal protective equipment
- Alcohol prep pads
- Butterfly needles and hubs
- Tourniquet
- Gauze pads
- Bandages
- Sharps bin and lid
- Microcentrifuge tube rack
- Test tube rack
- Crushed ice
- 4°C Centrifuge
- -80°C Freezer
- Dry ice

Biospecimen Collection Protocol

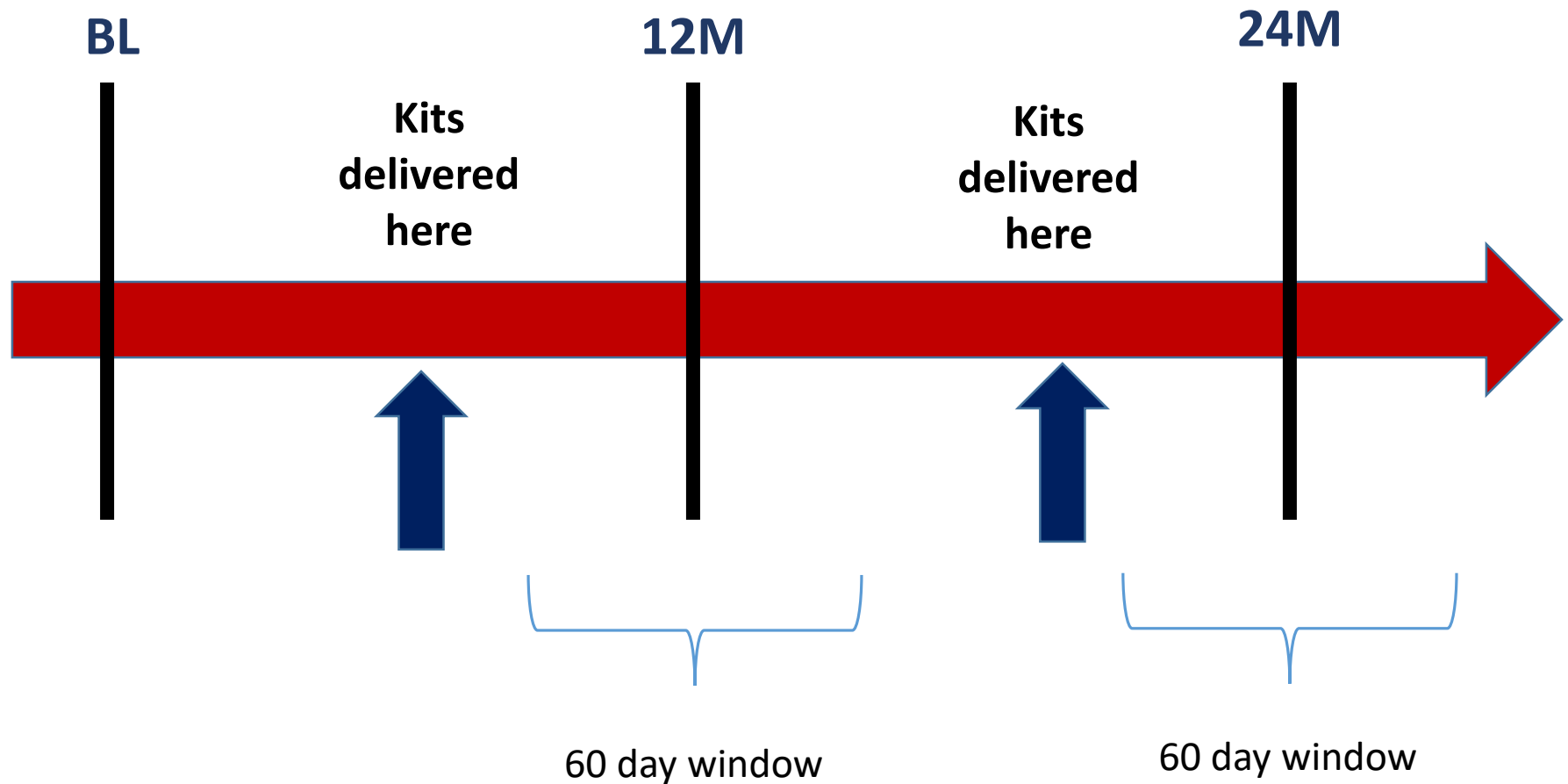
All specimen types FROZEN

| | BL | 12M | 24M | 36M | 48M |
|-----------------------------------|----|-----|-----|-----|-----|
| Whole Blood (6ml) | X | X | X | X | X |
| Plasma (6 x 1ml) | X | X | X | X | X |
| Serum (6 x 1ml) | X | X | X | X | X |
| Buffy Coat (2 aliquots) | X | X | X | X | X |
| RNA (2 x 2.5ml) | X | X | X | X | X |
| CSF (10 x 1ml) | X | X | X | X | X |
| Urine (2 x 15ml) | X | X | X | X | X |

Study Visit Protocol

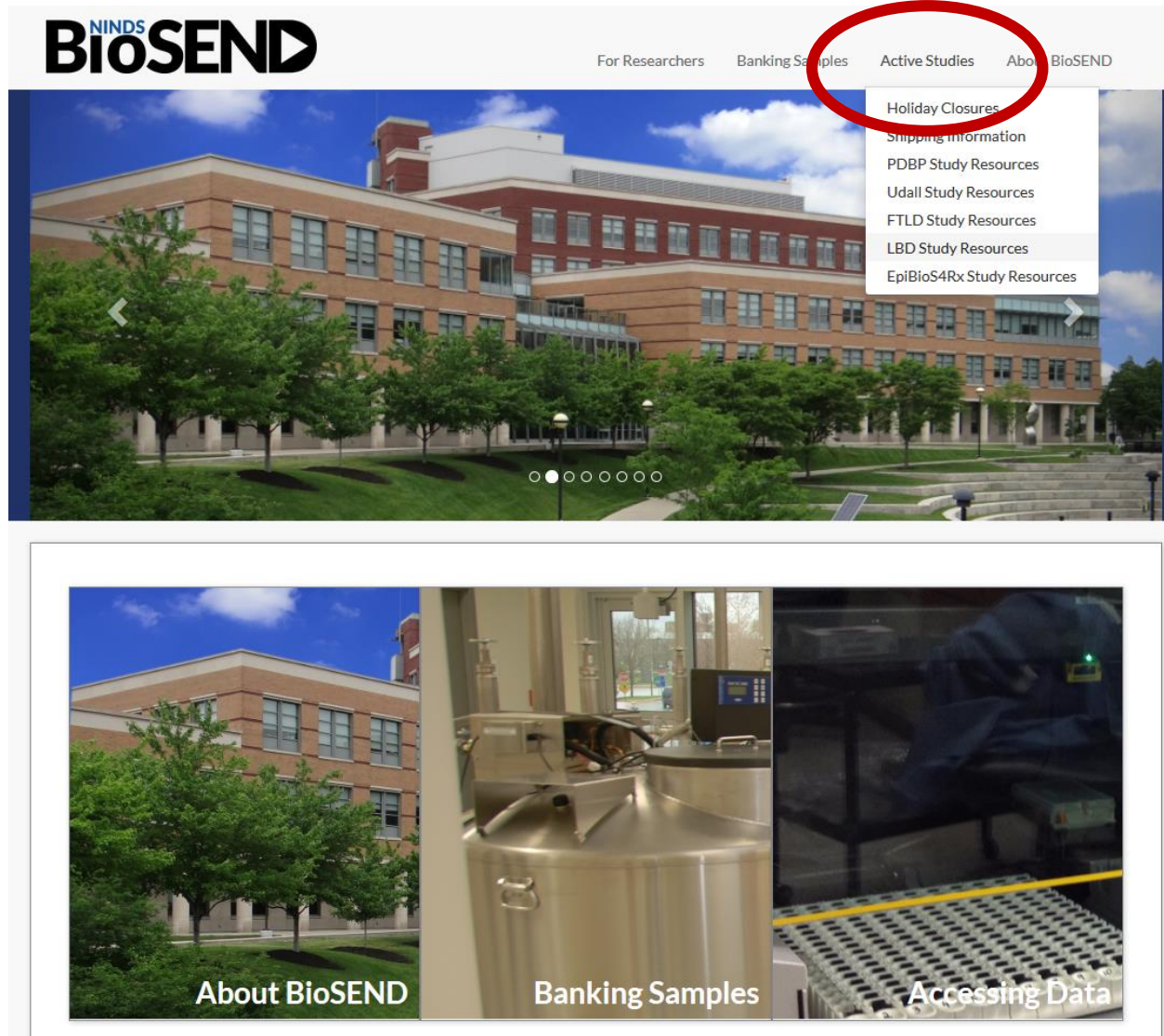
- After subject completes baseline visit, BioSEND sets up automated kit sending schedule for subject's subsequent visits
- Schedule gives 2 month window around the longitudinal study visit target (1 month on either side)
- BioSEND will send kits prior to start of study window
 - Reduces effort for study coordinators
 - Sites only need to order kits if visit will occur **AHEAD** of the study visit window
- All study visit target dates are determined from Baseline Visit (not from last study visit date)

Study Visit Protocol

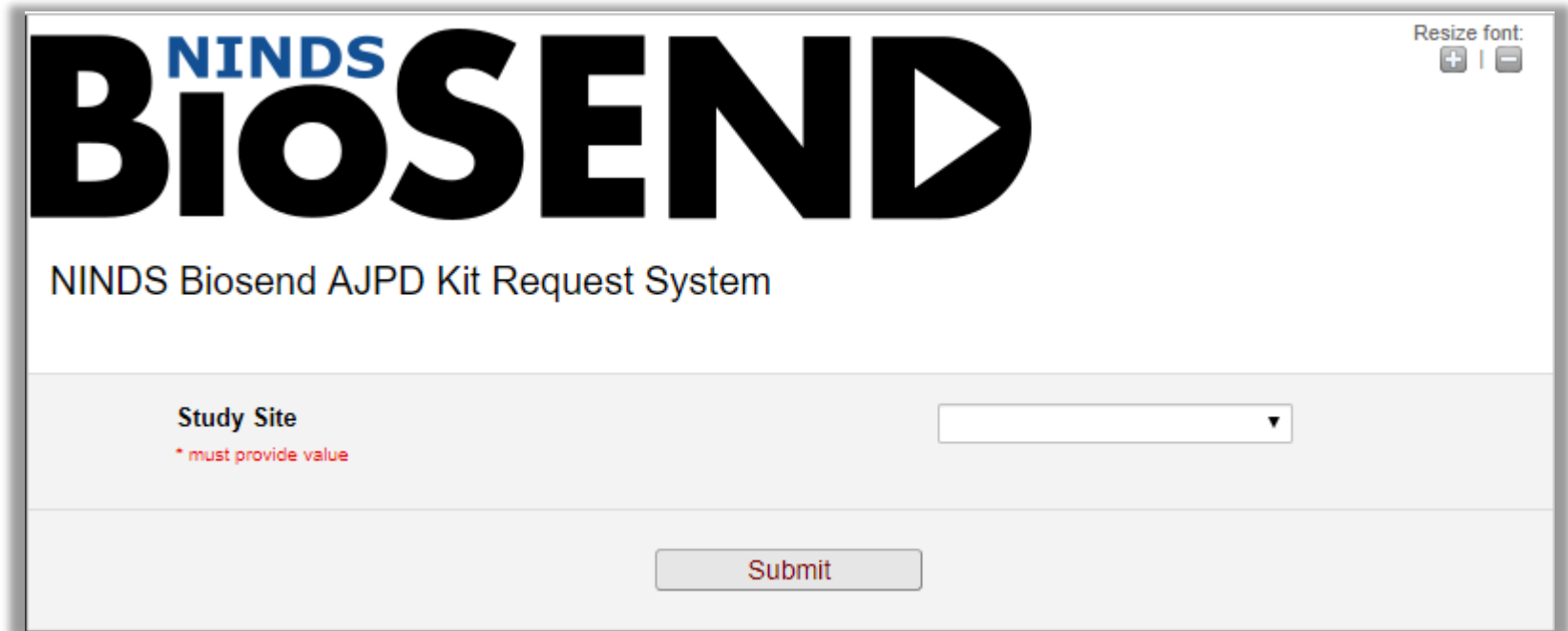


Requesting Kits

NINDS BioSEND Website



BioSEND Kit Request Module



The screenshot shows the NINDS BioSEND Kit Request System interface. At the top, the logo "NINDS BioSEND" is displayed in large, bold letters. Below the logo, the text "NINDS Biosend AJPD Kit Request System" is visible. In the top right corner, there is a "Resize font:" option with plus and minus icons. The main form area contains a "Study Site" label, a red asterisk indicating a required field, and a drop-down menu. A "Submit" button is located at the bottom of the form.

NINDS BioSEND

NINDS Biosend AJPD Kit Request System

Study Site

* must provide value

Submit

- <http://kits.iu.edu/biosend/ajpd>
- Choose your site PI from the drop-down list.

BioSEND Kit Request Module

NINDS Biosend AJPD Kit Request System

Study Site
* must provide value

Saunders-Pullman, Rachel ▼

Mount Sinai Beth Israel- Saunders-Pullman, Rachel

Sarah Simon
Mount Sinai Downtown-Union Square
10 Union Square East, Suite 5K15
New York, NY 10003
212-844-8711
Rachel.Saunders-Pullman@mountsinai.org>
Sarah.Simon2@mountsinai.org

Is the contact name above correct?
* must provide value

☐ Yes
☐ No

reset

Is the shipping address above correct?
* must provide value

☐ Yes
☐ No

reset

Is the e-mail address above correct?
* must provide value

☐ Yes
☐ No

reset

Confirm site information:

- Study site
- Shipping address
- Contact name
- Email

BioSEND Kit Request Module

| | | |
|--|--|-------|
| Is the contact name above correct? <small>* must provide value</small> | <input type="radio"/> Yes <input checked="" type="radio"/> No | reset |
| New Contact Name <small>* must provide value</small> | <input type="text"/> | |
| Is the shipping address above correct? <small>* must provide value</small> | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| New Shipping Address <small>* must provide value</small> | <div><input type="text"/></div> <div>Expand</div> | |
| Is the e-mail address above correct? <small>* must provide value</small> | <input type="radio"/> Yes <input checked="" type="radio"/> No | reset |
| New e-mail Address <small>* must provide value</small> | <input type="text"/> | |

If information is not correct, select 'No' and provide correct info.

BioSEND Kit Request Module: Kit Type

Kit Type

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

* must provide value

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

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

Typically, you will only need to order kits for the Baseline visit


BioSEND Kit Request Module: Baseline Kit

| | |
|--|---|
| Kit Type **Please allow two weeks for shipment** * must provide value | <input checked="" type="checkbox"/> Baseline Visit Kit <input type="checkbox"/> Annual Visit Kit <input type="checkbox"/> Supplemental Kit <input type="checkbox"/> Extra Supplies <small>Please specify in comments if you need kits before the standard two week shipment time.</small> |
| CSF Sprotte® Needle Gauge * must provide value | <input checked="" type="radio"/> 22 <input type="radio"/> 24 reset |
| Baseline Visit Kit Quantity * must provide value | <input type="text"/> <small>If you need more than 10 kits or labels, please use the file upload option or submit multiple requests.</small> |

- BioSEND creates ST numbers for baseline kits
- Enter preferred CSF needle gauge
- Enter kit quantity

BioSEND Kit Request Module: Annual Visits

Only use this if
the subject will
be seen ahead of
a study visit
window

| | |
|--|---|
| Annual Visit Kit Quantity | <input type="text" value="2"/> |
| <small>* must provide value</small> | |
| <small>If you need more than 10 kits or labels, please use the file upload option or submit multiple requests.</small> | |
| If you going to request more than 10 kits/labels or prefer to upload a file with the Biorepository ID and Visit, you may download this template file and fill in the relevant information. | |
| Attachment:  BioSEND_Kit_IDs_Template.xlsx (0.01 MB) | |
| If you are using the provided template to upload Biorepository IDs and Visits, please upload your template file here. | + Upload document |
| 1st Kit Visit ID (only if not using file upload option) | <input type="text" value="ST-00012345"/> <small>e.g. ST-00012345</small> |
| 1st Kit Visit Month | <input type="text" value="12 Month"/> |
| 2nd Kit Visit ID (only if not using file upload option) | <input type="text" value="ST-00012346"/> <small>e.g. ST-00012345</small> |
| 2nd Kit Visit Month | |

For follow-up visits, please provide the ST- and visit type of the kit(s) you are requesting. **We cannot complete your request without this information.**

BioSEND Kit Request Module: Supplemental Kit

| | |
|--|---|
| Kit Type **Please allow two weeks for shipment** <small>* must provide value</small> | <input type="checkbox"/> Baseline Visit Kit <input type="checkbox"/> Annual Visit Kit <input checked="" type="checkbox"/> Supplemental Kit <input type="checkbox"/> Extra Supplies <small>Please specify in comments if you need kits before the standard two week shipment time.</small> |
| Supplemental Kit Quantity <small>* must provide value</small> | <input type="text"/> <small>If you need more than 10 kits or labels, please use the file upload option or submit multiple requests.</small> |
| Comments | <div></div> <div>Expand</div> |
| Each Supplemental Kit Contains: 2 100 ml absorbent sheets 2 6-tube bubble pouches 2 Cryoboxes 20 Siliconized sterile cryogenic vials (2 ml) 4 Screw-top centrifuge tubes (15 ml) 2 Screw-top centrifuge tubes (50 ml) 2 Biohazard bags 2 PAXgene® tubes (2.5 ml) 2 Lavender-top EDTA tubes (10 ml) 2 Purple-top EDTA tubes (6 ml) 2 Red-top serum tubes (10 ml) 2 Disposable transfer pipettes (1ml) 2 Warning label packets | |

Contains a variety of
extra kit pieces

BioSEND Kit Request Module: Extra Supplies

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

Option to choose specific supplies and particular quantities

BioSEND Kit Request Module: Multiple Orders

Kit Type

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

* must provide value

- ☒ Baseline Visit Kit
- ☒ Annual Visit Kit
- ☒ Supplemental Kit
- ☒ Extra Supplies

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

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

BioSEND Kit Request Module: Submit

- Click “Submit” to turn in your request.
- The BioSEND staff will notify you that your request has been received and address any issues.

NINDS BioSEND
NINDS Biosend AJPD Kit Request System

Study Site * must provide value Saunders-Pullman, Rachel ▼

Mount Sinai Beth Israel- Saunders-Pullman, Rachel
Sarah Simon
Mount Sinai Downtown-Union Square
10 Union Square East, Suite 5K15
New York, NY 10003
212-844-8711
Rachel.Saunders-Pullman@mountsinai.org>
Sarah.Simon2@mountsinai.org

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

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

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

Kit Type **Please allow two weeks for shipment**
* must provide value
☐ Baseline Visit Kit
☐ Annual Visit Kit
☐ Supplemental Kit
☐ Extra Supplies
Please specify in comments if you need kits before the standard two week shipment time.

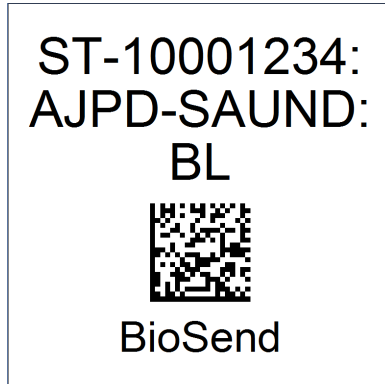
Comments [Expand](#)

Submit

Labels

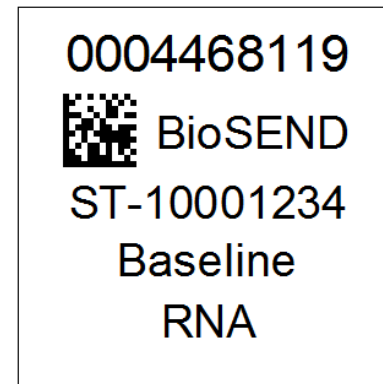
Types of Labels

Case Label



Identify study and PI

Specimen Label



Identify individual biospecimens

Case Label

ST-10001234:
AJPD-SAUND:
BL



BioSend



Subject Number



Study – PI



Visit

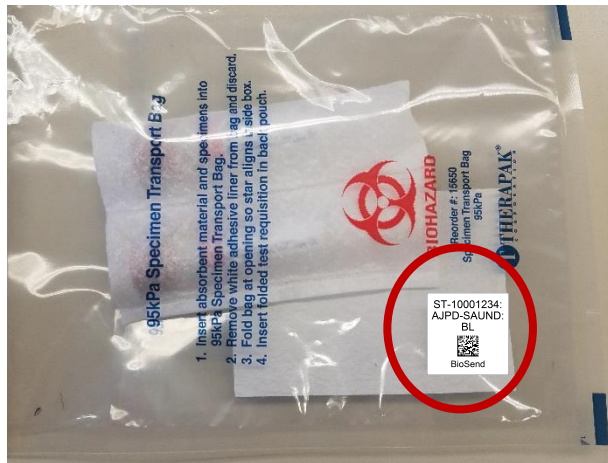


Biorepository Name

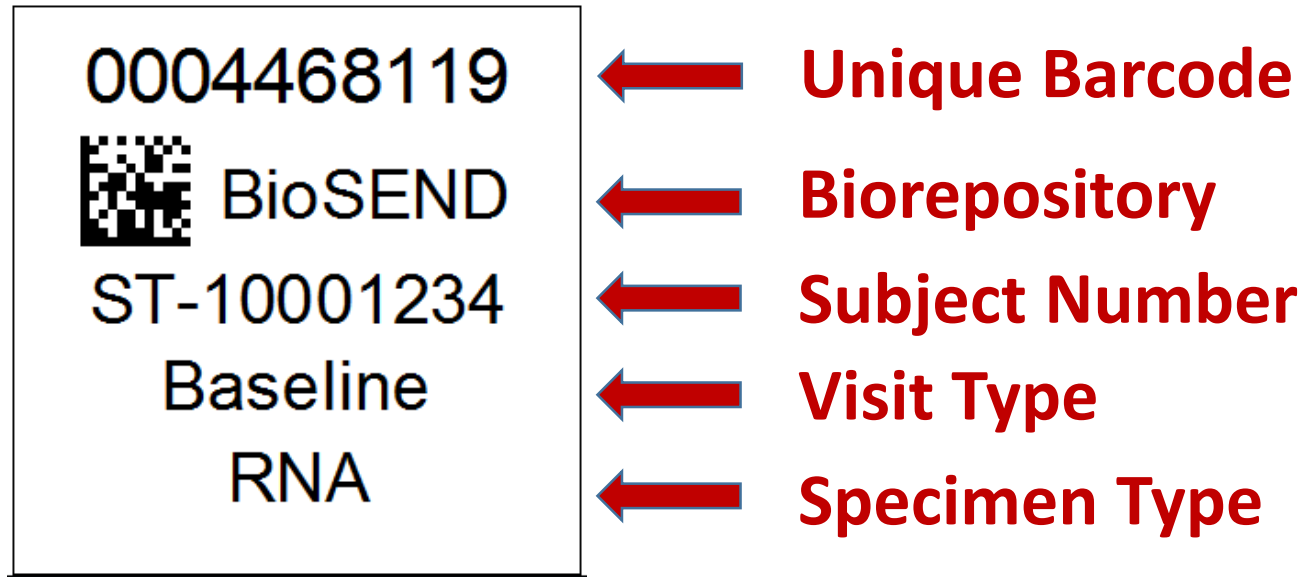
Case Labels

Case labels are placed:

- On the plastic biohazard bag of the cryovial transport box.
- On the plastic biohazard bag for the PAXgene® tubes.
- *On the lid of frozen shippers*



Collection and Aliquot Tube Label

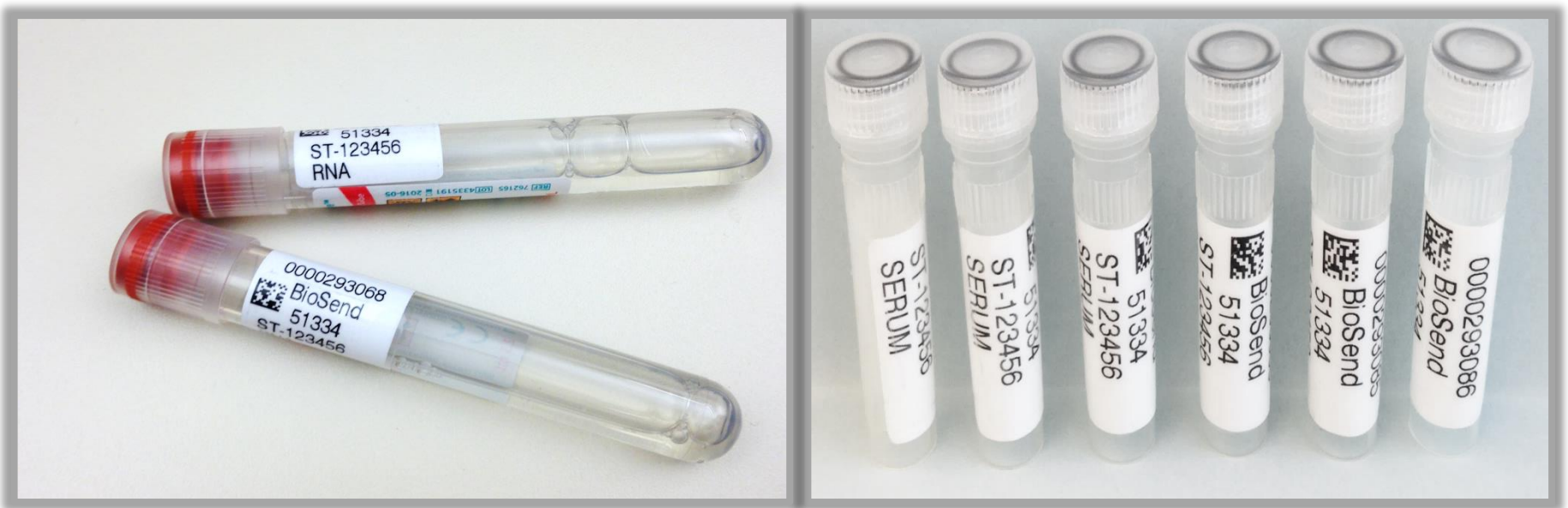


Collection and Aliquot Tube Label

Collection and Aliquot Tube Labels are placed on:

- All collection tubes
- All aliquot tubes (cryovials)

Be sure that the tube has the correct specimen type on the label



Sample Collection & Processing

Reminders:

- Collection of biospecimen blood samples should be from subjects who have been fasting for 8 hours or more. If fasting is not feasible, follow suggested low-fat diet.
- G force \neq RPM
- All specimens should be frozen and stored UPRIGHT
 - For RNA and whole blood specimens, please freeze samples upright in a non-styrofoam rack
 - For plasma, buffy coat, serum, and CSF aliquots, please freeze samples upright in the cryobox provided

Calculating Centrifugation Speed

<https://www.eppendorf.com/CA-en/centrifuge-speed-calculator/>

Centrifuge Calculator

Rotational Speed and centrifugal force

To calculate the relative centrifugal force at the given rotor speed and given rotor radius, please enter the values in the appropriate fields and press the Calculate RCF key.

The Calculate Speed key provides information on the required rotational speed at the given relative centrifugal force and the given rotor radius.



Please specify centrifuge and rotor or enter rotor's radius directly

5810/5810 R

Rotors for 5810/5810 R -----
- 30-place fixed-angle rotor for 1.5-2.0 ml tubes (F-45-30-11)
- 30-place Aerosol-tight fixed-angle rotor for 1.5-2.0 ml tubes (FA-45-30-11)
- 6 x 85 ml High-speed fixed-angle rotor (F-34-6-38)

= Radius 10 cm

Relative centrifugal force (RCF)

RCF 1500 x g

Calculate Speed >>

<< Calculate RCF

Speed

Speed 3663 rpm

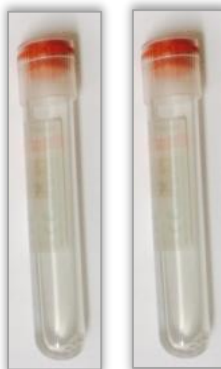
****The 3663 rpm speed was calculated using a hypothetical radius of 10 cm and a RCF of 1500 x g.***

Order of Specimen Collection

1. Serum **10 ml (red top)** blood collection for serum
2. PAXgene[®] tube for RNA
3. EDTA **10 ml (lavender top)** blood collection for plasma and buffy coat
4. EDTA **6 ml (purple top)** blood collection for frozen Whole Blood



Serum



PAXgene
(RNA)



EDTA
(Plasma)

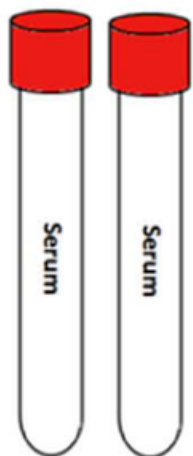


EDTA
(WB)

Serum Preparation (10ml Red Top Tube)



Step One



- Store tubes at room temperature.
- Label 2 tubes with pre-printed subject labels prior to blood draw.

Step Two



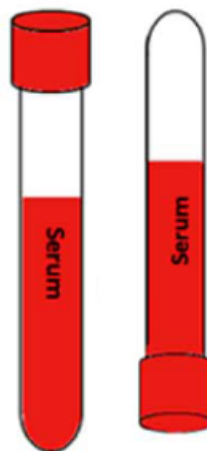
- Label 6 cryovials with pre-printed subject labels prior to blood draw.
- Pre-chill cryovials on wet ice for 5 minutes or longer.

Step Three



- Collect blood in Serum Tube allowing blood to flow for 10 seconds and ensuring blood flow has stopped.

Step Four



- Immediately after blood draw, invert tubes 8-10 times to mix samples.
- **Repeat steps three and four for second tube.**

Step Five



- Allow blood to clot for 30 minutes.
- Within 60 minutes of blood draw, centrifuge samples at 1500 x g for 15 minutes at 4°C.



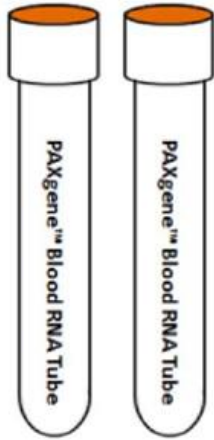
- Aliquot 1.0 mL into each cryovial tube.
- Store serum aliquots at -80°C until shipment.
- Return 6 X 1.0 mL aliquots to BioSend



PAXgene™ Preparation (2.5ml Tube)



Step One



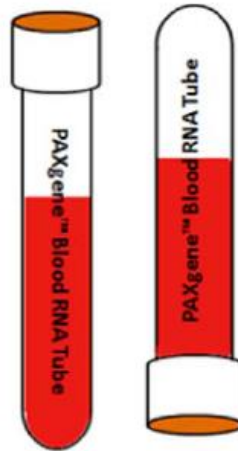
- Store tubes at room temperature.
- Label tubes with pre-printed subject labels prior to blood draw.

Step Two



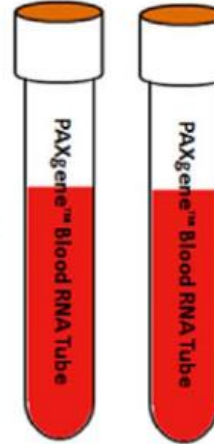
- Collect blood into *one* PAXgene Tube allowing blood to flow for 10 seconds and ensuring blood flow has stopped.

Step Three



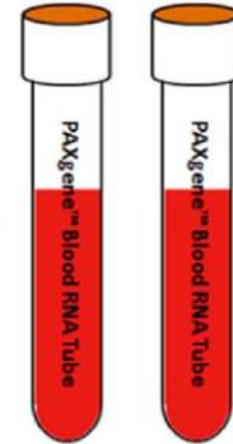
- Immediately after blood draw, invert tubes 8-10 times to mix samples.
- **Repeat steps two and three for second tube.**

Step Four



- Incubate tubes upright at room temperature for 24 hours before freezing the samples.

Step Five



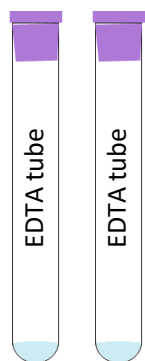
- After 24 hour incubation at room temperature, store tubes upright in a -80°C in a wire rack until shipment.



Plasma Preparation –10 ml EDTA (Purple Top) Tube



Step One



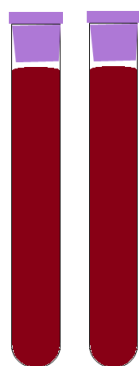
- Store tubes at room temperature.
- Label tubes with preprinted plasma labels prior to blood draw.

Step Two



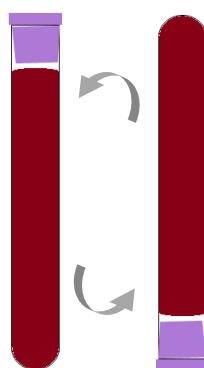
- Label 6 cryotubes with plasma aliquot labels.
- Pre-chill cryotubes on wet ice for at least 5 minutes

Step Three



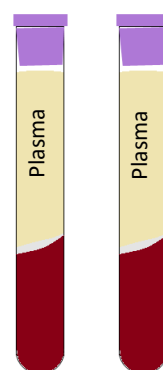
- Collect blood in EDTA tubes, allowing blood to flow for 10 seconds and ensuring blood flow has stopped.

Step Four



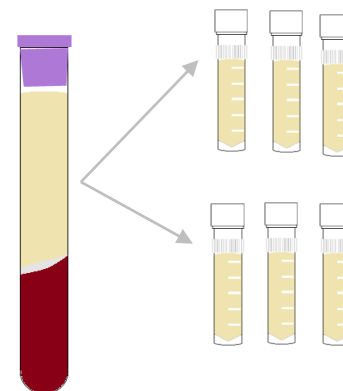
- Immediately after blood draw, invert tubes 8-10 times to mix samples.

Step Five



- Within 30 minutes of blood draw, centrifuge sample at 4°C at 1500 x g for 15 minutes.

Step Six

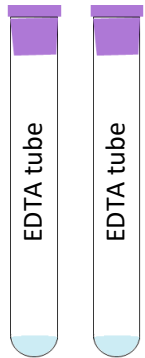


- Using a clean transfer pipet, aliquot 1.0 ml plasma into each cryotube.
- Store plasma aliquots upright at -80°C until shipment.

Buffy Coat Preparation –10 ml EDTA (Purple Top) Tube



Step One



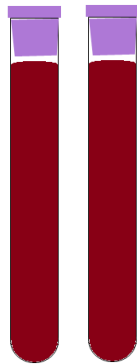
- Store tubes at room temperature.
- Label tubes with preprinted plasma labels prior to blood draw.

Step Two



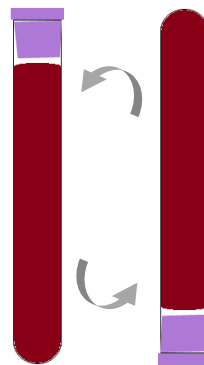
- Label 2 cryotubes with buffy coat aliquot labels.
- Pre-chill cryotubes on wet ice for at least 5 minutes.

Step Three



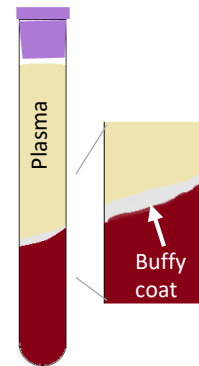
- Collect blood in EDTA tubes, allowing blood to flow for 10 seconds and ensuring blood flow has stopped.

Step Four



- Immediately after blood draw, invert tubes 8-10 times to mix samples.

Step Five



- Within 30 minutes of blood draw, centrifuge sample at 4°C at 1500 x g for 15 minutes.

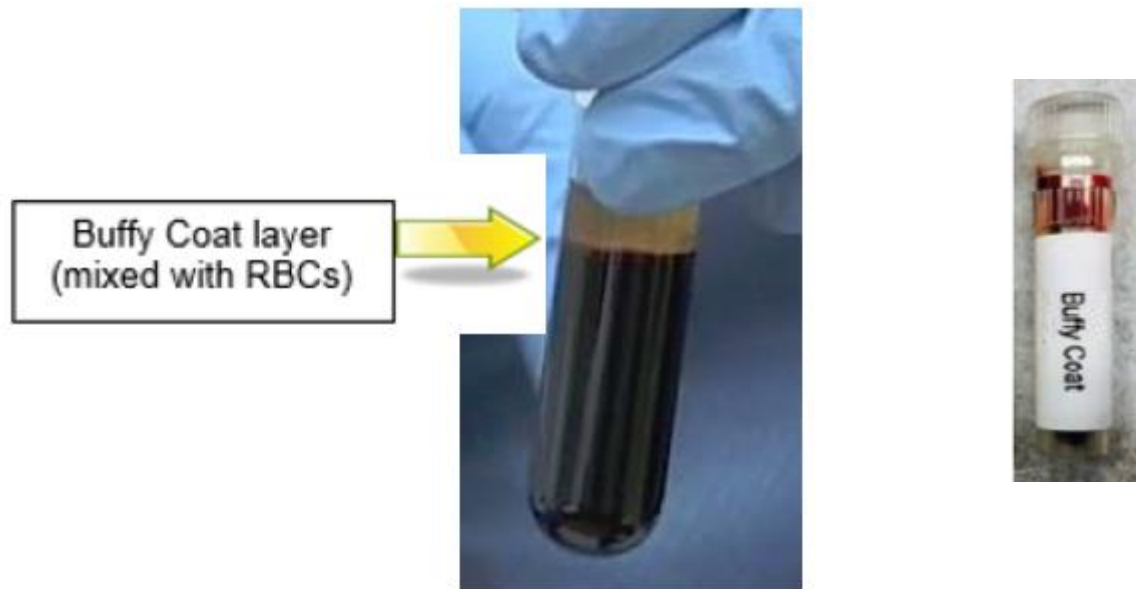
Step Six



- Using a clean transfer pipet, collect the buffy coat (may contain residual plasma and RBCs).
- Transfer the buffy coat from one EDTA into a cryotube. Transfer the buffy coat from the second EDTA into a second cryotube.
- Store buffy coat aliquots upright at -80°C until shipment.

• See Appendix B for instruction on aliquoting plasma

Buffy Coat Collection



Collect the buffy coat layer using the transfer pipet provided. Residual plasma as well as some RBCs will be included in this collection. A buffy coat will be reddish in color due to RBCs.

Whole Blood (6 ml Lavender Top Tube)



Step One



- Store tube at room temperature.
- Label tube with pre-printed labels prior to blood draw.



Step Two



- Collect blood in tube, allowing blood to flow for 10 seconds and ensuring blood flow has stopped.



Step Three



- Immediately after blood draw, invert tubes three times to mix samples.



Step Four



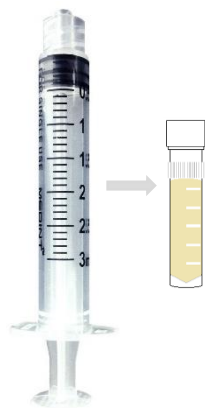
- Transfer to -80°C freezer. Store upright and keep frozen until shipment BioSend.

Lumbar Puncture Procedure

- 24g or 22g spinal needle provided in custom LP tray
- Prepare transfer and aliquot tubes (NOT in LP tray but in kit)
 - **Label first!**
 - **Do NOT** pre-chill aliquot tubes

CSF Collection and Preparation (15-20 ml total)

Step One



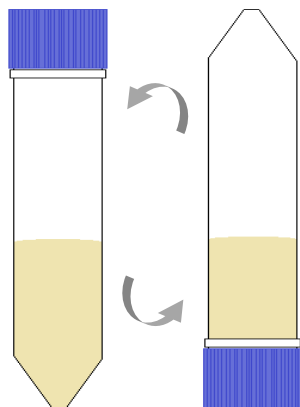
- Collect CSF into the 3ml luer lock syringe or by gravitational pull.
- Dispense 1-2 ml into cryovial.
- Send to local lab for testing.

Step Two



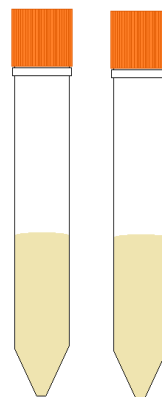
- Collect CSF into the 5ml luer lock syringe or by gravitational pull
- Transfer sample into 50 ml conical tube.

Step Three



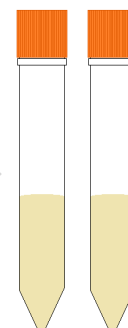
- Immediately after collection, gently invert the 50 ml conical tube 3-4 times to mix the sample.

Step Four

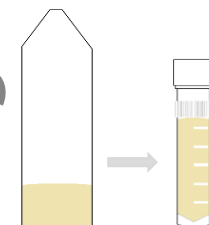


- Transfer CSF into two 15 ml conical tubes.
- Within 15 minutes of collection, centrifuge samples at room temperature at 2000 x g for 10 minutes.

Step Five



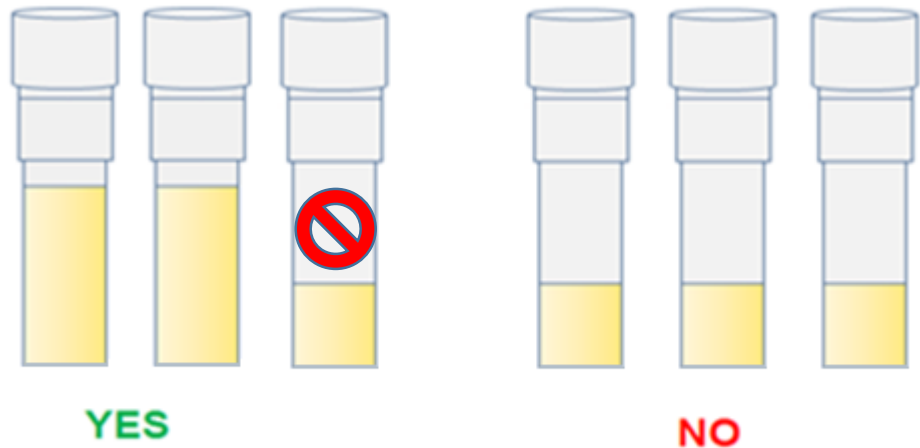
- Using a clean transfer pipette, transfer CSF from both 15 ml conical tubes into a 50 ml conical tube, leaving the debris in the bottom.
- Gently invert the 50 ml conical tube 3-4 times to mix the sample.
- Aliquot 1.0 ml into the cryovials.
- Store CSF aliquots upright at -80°C until shipment to BioSEND.



1.0ml x 10
cryovials

Serum, Plasma, Buffy Coat and CSF Aliquots

- Fill cryovials to 1ml
- Over-filled vials may burst in freezer
- Ship material to BioSEND
 - 6 Serum aliquots
 - 6 Plasma aliquots
 - 2 Buffy Coat
 - 10 CSF aliquots
- Do NOT send residual volumes to BioSEND



Urine Sample Collection

1. Label one urine collection cup prior to urine collection with a pre-printed “URINE” label.
2. Ask study subject to collect a urine specimen in the collection cup. Urine should be collected midstream and should remain as sterile as possible.
3. Label two 15 ml conical tubes with pre-printed “URINE” labels.
4. Transfer 10mL urine from the collection cup into each of the two 15 mL conical tubes.
5. Within 60 minutes of collection, freeze and store samples **upright** at -80°C until shipment.

Blood Collection: Troubleshooting

Issue #1: Collection tube with little/no vacuum

- Always check expiration dates before beginning blood draw and discard expired tubes
 - *Tubes expire on last day of month printed on tube*
- Store tubes at ambient temperature
 - *Extreme temperatures can affect vacuum*
- Keep extra tubes from supplemental kit nearby during blood draw to replace “bad” tubes
- If frequent occurrence, report tube type and lot numbers to Indiana University

Blood Collection: Troubleshooting

Issue #2: Hemolyzed (pink/red) serum and plasma

| Cause: Blood Collection Methods | Corrective Action |
|--|--|
| Improper venipuncture site | Draw from median cubital, basalic, and cephalic veins from antecubital region of arm |
| Prolonged tourniquet use | Tourniquet should be released after no more than 1 min, excessive fist clenching should be avoided |
| Not allowing alcohol to dry on skin before venipuncture | Without touching, allow the venipuncture site to air dry |
| Lumen of needle too close to inner wall of vein (indicated by slow blood flow) | |
| Use of too large/small bore needle resulting in excess force applied to blood | Avoid using too small/large needle. Needle size dependent on the subject's physical characteristics & amount of blood to be drawn. Most commonly used sizes are 19 – 23. |
| Pulling/pushing plunger too fast while drawing/transferring blood | Avoid drawing the syringe plunger too forcefully when collecting blood |
| | Ensure all blood collection assemblies are fitted securely, to avoid frothing |

Blood Collection: Troubleshooting

Issue #2: Hemolyzed (pink/red) serum and plasma

| Cause: Sample Processing Methods | Corrective Actions |
|---|---|
| Vigorous mixing/shaking | Gently invert blood collection tube when mixing additive with specimen, follow guidelines in Biologics Manual regarding number of times to invert each type of tube |
| Not allowing serum to clot for recommended time | Serum tubes without clot activator should be allowed to clot for 60 min in a vertical position |
| Exposure to excessive heat or cold | Keep samples at ambient temp |
| Prolonged contact of serum/plasma with cells | Do not store uncentrifuged samples beyond recommended time |

Reference: BD's "Tech Talk" newsletter, Vol. 2, No. 2, October 2003
(http://www.bd.com/vacutainer/pdfs/techtalk/TechTalk_Jan2004_VS7167.pdf)

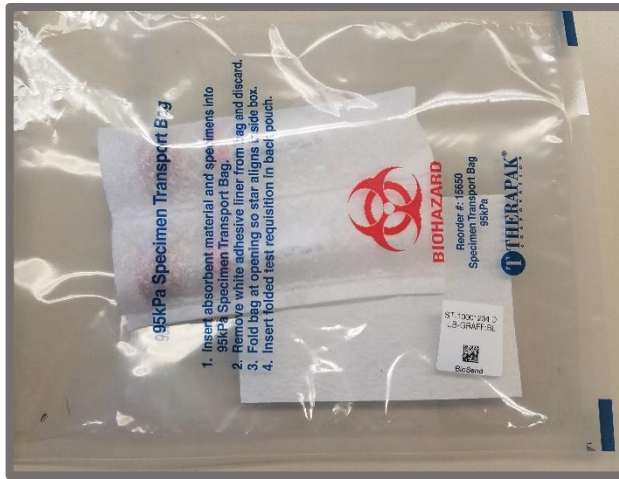
Sample Shipment

Frozen Samples

- **All samples are shipped frozen**
 - Plasma, buffy coat, serum, whole blood, CSF, urine, and PAXgene®
- **Ship Monday-Wednesday Only via FedEx® Priority Overnight**
- Schedule FedEx® pickup
- Email Sample Record and Shipment Notification Form including FedEx® tracking number **AHEAD OF SHIPMENT**



Packaging and Shipping Frozen Samples



Pack bags, place upright & side-by-side



FILL dry ice to top of box

Packaging & Shipping Troubleshooting

Issue: Broken/Damaged Tubes

| Cause | Preventative Action |
|---|---|
| Over filling tubes | Fill tubes to suggested volume. If any sample still remains, place in an additional tube |
| Improper packaging | Ensure the tubes are securely placed into the bubble wrap pouch and are placed in a separate bag from the boxed plasma, serum, and CSF. |
| Rough shipping conditions | Extra bubble wrap may be needed to pad blood tubes |
| Extreme changes in temperature (ambient→freezer; freezer→dry ice) | Wrapping the tubes in bubble wrap before freezing may help slow the cooling process |

Shipping Frozen Samples

- Hold packaged samples in a -80°C freezer until pickup.
- ***Samples should be received at BioSEND within 2 weeks of collection.***



Sample Shipment Notification Form

Sample Record and Shipment Notification

Study:

Site Name:

Principal Investigator:

Coordinator:

Telephone:

Email:

Please list only ONE subject per Sample Record Summary and Shipment Notification Form

GUID:

Subject ID (ST# from pre-printed labels):

Gender:

Visit Type:

Age in Years:

Plus Months:

Instructions: Ship Frozen Shipments Monday- Wednesday ONLY! Ambient Shipments (purple-top EDTA tube) may be shipped Monday- Thursday (preferably Monday- Wednesday) provided they are received at Indiana University within five days of collection. This form must be completed for shipment of all research samples. Notify Indiana University (email preferred) and the DMR in advance of shipment using contact information below. Place a copy in the shipment box and file a copy of the completed form in the study binder. Ensure all frozen shipments are completely filled with dry ice.

Date Sample(s) Shipped:

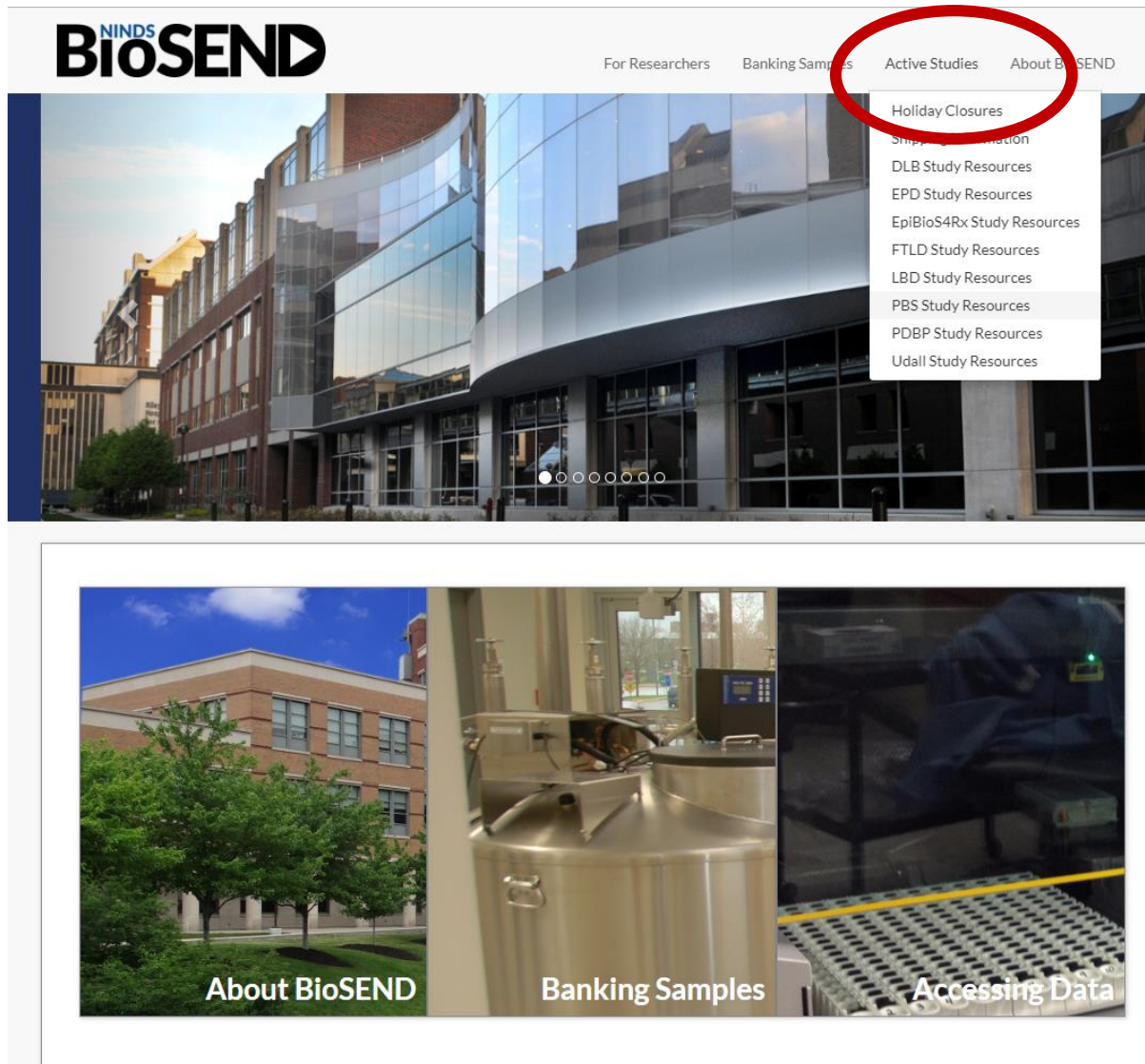
FedEx Tracking Number:

In the table below, please indicate the date of specimen collection and number of tubes/aliquots submitted.

| Completed by Submitter/Site | | | |
|-----------------------------|---------------|---|----------------------|
| Dates of Draw | Specimen Type | Number of Tubes/ Aliquots sent to BioSEND | Notation of Problems |
| | DNA | | |
| | RNA | | |
| | Buffy Coat | | |
| | Plasma | | |
| | Serum | | |
| | CSF | | |
| | Whole Blood | | |
| | | | |

Contact Information: Indiana University; Email: biosend@iu.edu Ph: 317-278-0594
Data Management Resource (DMR); Email: PDBP-OPS@mail.nih.gov

NINDS BioSEND Website



Holiday Closures

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

BioSEND Contact Information

- Questions?

Please contact: Claire Wegel (cwegel@iu.edu)

- Email: biosend@iu.edu

Questions?