

Protocol ID: \_\_\_\_\_

Study Name: \_\_\_\_\_

Site: \_\_\_\_\_

Event Name: \_\_\_\_\_

Event Date: \_\_\_\_\_

Study Subject ID: \_\_\_\_\_

Interviewer Name: \_\_\_\_\_

Interview Date: \_\_\_\_\_

**BLSA Muscle Biopsy - Ver. 1.1****Section Title: Eligibility****Instructions:**

Date Completed

☐ Blank

Tester ID

Is able to provide informed  
consent☐ Yes ☐ No

Click to deselect entry

Does not have history of bleeding  
disorder☐ Yes ☐ No

Click to deselect entry

Does not take medications that will  
increase bleeding such as  
Coumadin, Plavix or Heparin☐ Yes ☐ No

Click to deselect entry

Does not use NSAIDS such as  
Motrin, Advil or Naproxen on a  
daily basis and such that that they  
are unable to stop 4 days before  
and 3 days after procedure☐ Yes ☐ No

Click to deselect entry

Does not take more than 81mg  
Aspirin a day☐ Yes ☐ No

Click to deselect entry

Is not allergic to Lidocaine or other  
local anesthetic☐ Yes ☐ No

Click to deselect entry

Has no active infection or chronic  
skin condition around biopsy site

☐ Yes ☐ No

Click to deselect entry

Is not pregnant

☐ Yes ☐ No

Click to deselect entry

Eligibility: Participant satisfies all  
eligibility criteria.

☐ Yes ☐ No

Click to deselect entry

Name of staff member completing  
eligibility

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Interview Date: \_\_\_\_\_

**Section Title: Muscle Biopsy****Instructions:**

Date Completed

Tester ID

Muscle Biopsy consent reviewed: ☐ Yes ☐ No [Click to deselect entry](#) Eligibility criteria reviewed: ☐ Yes ☐ No [Click to deselect entry](#)**Pre-Procedure Vital Signs**

Body Temperature: \_\_\_\_\_ (F) Pulse: \_\_\_\_\_ (beat/min)

Respirations: \_\_\_\_\_ (breaths/min)

Systolic: \_\_\_\_\_ (mmHg) Diastolic: \_\_\_\_\_ (mmHg)

Brief History and Physical performed by MD/NP: ☐ Yes ☐ No [Click to deselect entry](#)**Procedure Times**

Anesthesia start time: \_\_\_\_\_ (am)

First biopsy needle inserted: \_\_\_\_\_ (am)

Leg pressure - Start \_\_\_\_\_ (am)

Leg pressure - Stop \_\_\_\_\_ (am)

Total amount of anesthesia given: (cc)

Incision closed

☐ Steri Strips ☐ Self Absorbing Sutures

[Click to deselect entry](#)

Biopsy Tester ID

Biopsy performed:

☐ Yes ☐ No

[Click to deselect entry](#)

[Comment](#)

Dressing applied:

☐ Yes ☐ No

[Click to deselect entry](#)

[Comment](#)

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Interviewer Name: \_\_\_\_\_

Interview Date: \_\_\_\_\_

**Section Title: Post Procedure****Instructions:****Vital Signs post procedure**

Pulse: \_\_\_\_\_ (beat/min)

Respirations: \_\_\_\_\_ (breaths/min)

Blood Pressure: Systolic \_\_\_\_\_ (mmHg)

Diastolic: \_\_\_\_\_ (mmHg)

Post Procedure instructions reviewed: ☐ Yes ☐ No [Click to deselect entry](#)**Tissue sent to NIA CORE LAB**

Pass 1 \_\_\_\_\_ (mg)

Pass 2 \_\_\_\_\_ (mg)

Pass 3 \_\_\_\_\_ (mg)

Total \_\_\_\_\_ (mg)

**Container with BIOPS Buffer; <10 mg**Oroboros respirometry ☐ Sample Collected ☐ Quantity not sufficient Sample Weight \_\_\_\_\_ (mg)Cardiolipin ☐ Sample Collected ☐ Quantity not sufficient Sample Weight \_\_\_\_\_ (mg)**Tube with 2.5% Paraformaldehyde + 3% Glutaraldehyde; < 10 mg**

Electron Microscopy	<input type="radio"/> Sample Collected <input type="radio"/> Quantity not sufficient	Sample Weight	(mg)
Cryotube with flash frozen muscle; > 20 mg			
2D-PAGE & Complex I activity	<input type="radio"/> Sample Collected <input type="radio"/> Quantity not sufficient	Sample Weight	(mg)
Cryotube with flash frozen muscle; 20 mg			
Cardiolipin	<input type="radio"/> Sample Collected <input type="radio"/> Quantity not sufficient	Sample Weight	(mg)
Cryotube with flash frozen muscle; if possible, 3 tubes with one 3-5mm sample per tube			
Confocal sample 1	<input type="radio"/> Sample Collected <input type="radio"/> Quantity not sufficient	Sample Weight	(mg)
Confocal sample 2	<input type="radio"/> Sample Collected <input type="radio"/> Quantity not sufficient	Sample Weight	(mg)
Confocal sample 3	<input type="radio"/> Sample Collected <input type="radio"/> Quantity not sufficient	Sample Weight	(mg)
<b>Total Weight</b> Samples 1 2 & 3	(mg)		
Cryotube with flash frozen muscle; > 20 mg			
RNA, microarray, mtDNA:nDNA	<input type="radio"/> Sample Collected <input type="radio"/> Quantity not sufficient	Sample Weight	(mg)
Cryotube with flash frozen adipose tissue			
SubQ	<input type="radio"/> Sample Collected <input type="radio"/> Quantity not sufficient	Sample Weight	(mg)