<b>Human and Vertebrate Animal T</b>	issue Form	(6B)
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Required for research involving fresh/frozen tissue (including primary cell lines, human and other primate established cell lines and tissue cultures), blood, blood products and body fluids. If the research involves living organisms please ensure that the proper human or animal forms are completed. All projects using any tissue listed above must also complete Form 6A.

Student's Name(s) Hugo Amador
Title of Project Laminin and Sildenafil Citrate Stimulates Neurite Outgrowth in PUZ (ells
To be completed by Student Researcher(s):
<ul> <li>1. What vertebrate animal tissue will be used in this study? Check all that apply.</li> <li>□ Fresh or frozen tissue sample</li> <li>□ Fresh organ or other body part</li> <li>□ Blood</li> <li>□ Body fluids</li> <li>□ Primary cell/tissue cultures</li> <li>□ Human or other primate established cell lines</li> </ul>
2. Where will the above tissue(s) be obtained. If using an established cell line include source and catalog number.
r. Gordan Govroff from NIH
<ul> <li>If the tissue will be obtained from a vertebrate animal study conducted at a research institution attach a copy of the IACUC certification with the name of the research institution, the title of the study, the IACUC approval number and a of IACUC approval.</li> <li>To be completed by the Qualified Scientist or Designated Supervisor:         <ul> <li>I verify that the student will work solely with organs, tissues, cultures or cells that will be supplied to him/her by myself or qualified personnel from the laboratory; and that if vertebrate animals were euthanized they were euthanized for a purpose</li> </ul> </li> </ul>
other than the student's research.  AND/OR  I certify that the blood, blood products, tissues or body fluids in this project will be handled in accordance with the standards and guidance set forth in U.S. Occupational Safety and Health Act, 29CFR, Subpart Z, 1910.1030 - Blood Borne Pathogens.
Printed Name  Signature  Date of Approval (mm/dd/yy) (Must be prior to experimentation.)
P.h.D  Title  516 - 877 - 41 9 3  Phone/Email
Adeiphi University Institution