# FWCC BIOREPOSITORY

# SPECIMEN STORAGE AGREEMENT

**The purpose of the Specimen Storage Agreement is to allow outside departments and its designated personnel the opportunity to utilize necessary storage equipment to conduct its research. Please return the completed agreement to the FWCC-Biorepository Department (Room B6-220) or email the completed agreement to jimi.murph@lsuhs.edu. All fields must be completed, before agreement is accepted.**

**Principal Investigator:** _____

**Department:** _____

**Email:** _____

**My lab is a FWCC associated research lab:**

☐Yes

☐No

**Use of this equipment is for a cancer-related research project:**

☐Yes

☐No

If yes, please provide project title: _____

**Equipment to be used:**

☐ Liquid Nitrogen Freezer

☐ 80˚ C Freezer

☐ Room Temperature Block Storage

**We anticipate our usage rate(s) of the equipment to be:**

☐ Few samples (*less than 50*), short storage length (*less than 4 months*)

☐ Few samples (*less than 50*), long storage length (*greater than 4 months*)

☐ More samples (*more than 50*), short storage length (*less than 4 months*)

☐ More samples (*more than 50*), short storage length (*less than 4 months*)

**Financials for Storage Equipment use:**

- ☐ Liquid Nitrogen Freezer: $25 per box / month (*FWCC member laboratory*)
- ☐ Liquid Nitrogen Freezer: $300 per box / year (*FWCC member lab laboratory*)
- ☐ Liquid Nitrogen Freezer: $35 per box / month (Non-*FWCC member laboratory*)
- ☐ Liquid Nitrogen Freezer: $420 per box / year (Non-*FWCC member laboratory*)
- ☐ 80˚C Freezer: $15 per box / month (*FWCC member laboratory*)
- ☐ 80˚C Freezer: $180 per box / year (*FWCC member laboratory*)
- ☐ 80˚C Freezer: $25 per box / month (Non-*FWCC member laboratory*)
- ☐ 80˚C Freezer: $300 per box / year (Non-*FWCC member laboratory*)
- ☐ Room Temperature Block Storage: $5 per block / month (*FWCC member laboratory)*
- ☐ Room Temperature Block Storage: $60 per block / year (*FWCC member laboratory)*
- ☐ Room Temperature Block Storage: $10 per block / month (Non-*FWCC member laboratory)*
- ☐ Room Temperature Block Storage: $120 per block / year (Non-*FWCC member laboratory)*

# I agree to the following:

1. Principal Investigators or laboratory personnel may submit research specimens for storage during normal FWCC – Biorepository hours Monday to Friday 8:00am – 4:30pm.
2. Specimens may be submitted must processed and ready for storage.
    a. Sample vials must have a type or handwritten, impervious label with the following minimum information: unique specimen ID, sample type, and collection date.
    b. Samples from study subjects must be de-identified in accordance with the HIPAA privacy rule identification standard (45 C.F.R. 164.514) and at a minimum, shall not contain protected health information nor any patient identifiers such as social security number, name, or hospital number. The Principal Investigator is responsible for coding the study sample identity confidential.
3. Vial Submission Type: 1-2 cc Nunc-style cryovial. **Note:** *Eppendorf tubes, tubes with rubber caps and those larger than 2 cc are not acceptable.*
4. All specimens for storage must be submitted with a **Specimen Inventory List** like the one provided as *Appendix A* to this agreement.
5. The data that is stored in the FWCC – Biorepository database is password protected and HIPAA compliant.
6. Only the Principal Investigator and those individuals so authorized by the Principal Investigator *(authorized individuals listed on the form below)* may access the submitted specimens.
7. Deposited materials may be retrieved during the following hours of operation: Monday to Friday, 8:00am to 4:30pm. The Principal Investigator or Authorized Personnel must complete and submit **Sample Storage Withdrawal Form** like the one provided in *Appendix B* to this agreement. The biorepository will make every attempt to fulfill the request within the same day. Once a biosample is withdrawn from the biorepository, the sample may not be re-stored, as FWCC – Biorepository is no longer able to guarantee the condition of the sample after it leaves our custody. If the investigator would like the sample to be re-stored in the biorepository, then the sample will be stored as a separate new sample (different Specimen ID). A new **Specimen Storage Agreement** needs to be completed.
8. **Transfer of LSUHS investigators' deposited material when a LSUHS investigator leaves LSUHS:**
    *a.* The investigator must contact the FWCC – Biorepository to make arrangements for their deposited storage material before they leave LSUHS.

*b.* Investigators have 4 options:
    *i.* Keep the samples at the FWCC Biorepository and pay the Non-FWCC Laboratory Storage fee
    *ii.* Transfer custody of the samples to another LSUHS Investigator or to the departing LSUHS investigators Department Chair
    *iii.* Submit a written request to the FWCC Biorepository requesting that the specimens be discarded
    *iv.* Ship samples to a new location (pending approved Material Transfer Agreement)

c. If an LSUHS investigator fails to make arrangements for the deposited material when he or she leaves, then the material will be discarded sixty (60) days after the LSUHS investigators monthly or yearly term has expired.

9. **Releasing Submitted Specimens to others not listed below:**
    *a.* Only the LSUHS Investigator can authorize the release of deposited material to others.
    *b.* If release is needed to someone not listed below, the LSUHS Investigator must provide a written request to the FWCC Biorepository before the material is released.
10. Study subjects and/or family members cannot directly request that the FWCC Biorepository discard specimens submitted for storage. Study subjects may withdraw consent to participate in a study by contacted the LSUHS Investigator responsible for their individual biosample. Should a study subject withdraw from a study, the LSUHS Investigator may request, in writing, that all samples and data for that study be destroyed.
11. Institution and/or Principal Investigator and LSUHS Investigators shall adhere to the fee structure set forth by the FWCC – Biorepository.
12. Principal investigators will be invoiced monthly or yearly depending on financial option chosen above.

**List of Authorized Personnel**

| Name | Status (grad student, technician, postdoc etc.) |
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***By signing below, I acknowledge that I have read and that I agree to be bound by the Terms and Conditions of this Agreement.***

**Principal Investigator Signature** **Date**

**Jimi R. Murph** **Date**
**FWCC-Biorepository Supervisor**

**Ellen Friday** **Date**
**FWCC-Biorepository Scientific Director Signature**

*Appendix A*

**SPECIMEN INVENTORY LIST**

***(Columns 2 through 5 must be completed by the Principal Investigator)***

| *Storage Location* | *Specimen ID* | *Specimen Type* | *Collection Date* | *Temperature Requirement* |
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| ***Storage Location*** | ***Specimen ID*** | ***Specimen Type*** | ***Collection Date*** | ***Temperature Requirement*** |
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*Appendix B*

**SAMPLE STORAGE WITHDRAWAL FORM**

**Principal Investigator: _____ Date of Request: _____**

**PI Email Address: _____**

**PI Phone Number: _____**

**Contact Person: _____**

**Contact Person Email Address: _____**

**Contact Person Phone Number: _____**

## Specimens to be Withdrawn

***(Columns 2 through 4 must be completed by the Principal Investigator)***

| *Storage Location* | *Specimen ID* | *Specimen Type* | *Date Submitted to Biorepository* |
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| *Storage Location* | *Specimen ID* | *Specimen Type* | *Date Submitted to Biorepository* |
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**Note:** Once a biosample is withdrawn from the biorepository, the sample may not be re-stored, as FWCC – Biorepository is no longer able to guarantee the condition of the sample after it leaves our custody. If the investigator would like the sample to be re-stored in the biorepository, then the sample will be stored as a separate new sample (different Specimen ID). A new **Specimen Storage Agreement** needs to be completed.

**Principal Investigator or Authorized Personnel Signature** **Date**

**Jimi R. Murph** **Date**
**FWCC-Biorepository Supervisor**