

## BOA Holder Assessment Questionnaire for Participation in the SRS to Support CADP

### *Institution/Program/Biorepository*

Name:	Location:
Year Established:	Website:

### *Principal Investigator (PI) and/or Point of Contact (POC)*

Name:	Email:
Phone Number:	

Please note that the following are NOT acceptable candidates for responding to this RFP:

- International biorepositories
- Biorepositories with specimens collected or distributed without consent or IRB approval when it was needed
- Biorepositories with specimens bought from third parties

Have donors of tissue consented for use of tissue in research? If a standard consent exists, please attach.

## BOA Holder Assessment Questionnaire for Participation in the SRS to Support CADP

Please provide general information about the resource; state purpose of the resource, source of specimens, history of collection, what clinical information is available (basic diagnostic report, clinical treatment history, clinical response), to whom have the specimens been supplied, plans for further distribution of specimens.

Have you collected specimens following SOPs? Please describe.

Please describe the current application process (forms, contact persons, etc.) and associated time for requesting specimens.

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Do you currently provide specimens to researchers? Briefly describe.

Please list references/publications published that have been generated with the use of your specimens (please limit to the last 5 years).

Please provide the approximate number of specimens that your biorepository provided to researchers in:

2012:

2011:

Please provide the approximate number of specimens that your biorepository provided to researchers from 2005 through 2010.

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Please fill in the following fields for each specimen your institution is willing to share for **this program** (up to 10 specimens).

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Provide the definition of “specimen” in your biorepository:

\* Each specimen type should be in a different line item (for example: prostate cancer and BPH should be in two different line items)

Specimen #	Site/Location	Condition	Specimen Type	Preparation	Matched Materials
Example	Breast	Normal	Needle biopsy	Fresh Frozen	Serum and/or whole blood
Example	Breast	Cancer	Surgical Resection	FFPE	Matched plasma
Example	Prostate	BPH	Needle biopsy	FFPE	Matched plasma
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

(Tables continued on next page)

**BOA Holder Assessment Questionnaire for Participation in the SRS to Support CADP**

Specimen #	H&E Slide available?	Path Report Available?	Access to treatment info?	Access to demographic info?*	Access to outcome info?	Estimated # specimens available	Consent/ De-identified
Example	Yes	Yes	Yes	No	Yes	150	Both
Example	Yes	Yes	Yes	Yes	Yes	50	Both
Example	Yes	Yes	Yes	No	No	75	Both
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

\*Demographic info includes age, gender, race, ethnicity, smoking history

***Estimated Per Specimen Cost (by number of specimens)***

Per specimen cost includes: estimated cost per specimen, estimated cost per H & E slide, estimated cost for matched specimens (plasma, serum, whole blood), labor, materials/supplies, shipping charges and indirect costs.

Specimen #	1-50	51-100	101-200	201-500	501-1000
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

## BOA Holder Assessment Questionnaire for Participation in the SRS to Support CADP

Were specimens collected or distributed without consent or IRB approval when it was needed?

Other comments:

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Please refer to RFP for submission details.