

Specimen Collection and Processing Agreement

**Name of Investigator Requesting Specimens: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Study Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HRPO #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fund #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dept #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Patient Enrollment Goal:

2. Contact Information:

Name and phone of person picking up specimens:

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3. Staff Coverage (check all that apply):

Regular Business Hours No additional charge for staff coverage if specimens collected between

the hours of 7 a.m. to 4 p.m. Monday through Friday.

Evenings/Weekends $25/hour for each patient after normal business hours (4:00 p.m. to 7:00 a.m.) and on the weekend (Friday, 4:00 p.m. to Monday, 7 a.m.). If attendance at delivery is not required, the minimum hours charged per patient will be 2 hours. If attendance at delivery is required, the minimum hours charged per patient will be 4 hours. The maximum hours charged per patient will be 6 hours.

Holidays $50/hour for each patient during Wash U holidays starting after 4:00 p.m. the day

before the holiday through 7 a.m. the day following the holiday. If attendance at delivery is not required, the minimum hours charged per patient will be 2 hours. If attendance at delivery is required, the minimum hours charged per patient will be 4 hours. The maximum hours charged per patient will be 6 hours.

4. Data collection: Available per fee schedule.

5. Storage of Specimens: Specimens will be stored in -80 freezer 2-4 weeks with no charge. If long

term storage is needed, additional information for storage at the TPMP will be provided.

6. Supplies: Investigator may be required to provide supplies for special collection requests.

7. Specimen Collection: Collection of specimens is not guaranteed.

8. Subject Exclusions: Specimens will not be collected from subjects with HIV, Hepatitis B and Hepatic C.

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| **Specimen Type Needed** | **Special Instructions** | **# Samples** | **Timepoint** |
| Maternal Serum (red top) |  |  |  |
| Maternal Plasma (pink top)  *(specify if buffy needed)* |  |  |  |
| Urine |  |  |  |
| Vaginal Swab |  |  |  |
| Cord Blood Serum (red top) |  |  | Delivery only |
| Cord Blood Plasma (pink top)  *(specify if buffy needed)* |  |  | Delivery only |
| Placenta |  |  | Delivery only |
| Amniotic Fluid |  |  | C-Section only |
| Infant 6-12 hours Dried Spot  Infant 24 hours Dried Spot | Also: Infant whole blood 6-12 hours |  | After Delivery Only |
| Infant Whole Blood |  |  | After Delivery Only |
| Follicular Fluid |  |  | IVF Procedure |
| Granulosa Cells |  |  | IVF Procedure |
| Oocytes |  |  | IVF Procedure |
| Semen |  |  | Fresh Frozen  From Home |

***Signature of Investigator Requesting Specimens*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***Date*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Signature of WIHSC Investigator* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *Date* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**