

COLLECTION AND SHIPMENT OF FIBROBLAST SAMPLES FOR IFAR REGISTRY THE ROCKEFELLER UNIVERSITY HOSPITAL Laboratory of Genome Maintenance

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PURPOSE:

This sample is being obtained **for research purposes.** Any genetic testing that might be done on this sample has to be confirmed in a clinical laboratory. As the sample is being obtained for research purposes, we cannot say how long it will take to discover findings. Sometimes it can take months or years before we are able to provide any information to the referring physician.

CONSENT:

No sample should be collected or shipped unless a valid consent is obtained. For participants already enrolled in IFAR, consent may already be on file. For questions about consent status, please contact our study coordinator (contact information below).

NOTIFICATION:

Please notify our study coordinator (contact information below) at least one week in advance of the scheduled skin biopsy procedure OR 2 days in advance for the shipment of cultured fibroblasts.

| | SKIN BIOPSY | CULTURED FIBROBLASTS |
|-------------|---|--|
| COLLECTION | New fibroblast primary cultures are set | Provide two T25 flasks of cultured |
| | up at Integrated Genetics, which are | fibroblasts at 80% confluency (at time of |
| | then returned to our lab. Collection and | shipment), at room temperature. |
| | shipping materials will be provided by | If fibroblasts have already been frozen |
| | IFAR. Collect one 3 to 4 mm punch and | please send one frozen vial containing at |
| | place directly into the sterile transport | least one million viable cells on dry ice. |
| | medium provided. | |
| TIMING | Samples should be collected/shipped MONDAY-THURSDAY. Samples should | |
| | NOT be collected/shipped on Friday, Saturday, or Sunday. | |
| PACKING | It is extremely important to carefully pack the specimens, providing ample protection | |
| | against breakage. Use an insulated secondary container and include absorbent | |
| | material AND sturdy outer packaging as an overpack. FedEx air bills will be | |
| | provided by IFAR, but please complete Sender's Info before shipping. | |
| TEMPERATURE | Shipped at room temperature | Cultured Fibroblasts at room temp |
| | | Frozen Fibroblasts on dry ice |
| REQUISITION | The IFAR will provide you with the | Please complete the requisition form |
| | completed requisition form for | provided by the IFAR and include it with |
| | Integrated Genetics. This must | the cells sent directly to the IFAR. |
| | accompany the biopsy being sent | |
| SHIPPING | FED EX PRIORITY OVERNIGHT | FED EX PRIORITY OVERNIGHT |
| | Integrated Genetics/Genzyme | The Rockefeller University |
| | 2000 Vivigen Way | Laboratory of Genome Maintenance |
| | Santa Fe, NM 87505 | Attn: Frank Lach |
| | 800-848-4436 | 1230 York Avenue Box 182 |
| | Integrated Genetics sends cultured cells | New York, NY 10065 |
| | to our laboratory for all analyses | 212-327-8862 |

QUESTIONS/CONTACT INFORMATION:

For questions about the research study: fanconiregistry@rockefeller.edu or 212-327-8612. For questions about specimen retrieval/shipment: Frank Lach at 212-327-8862.