

### Appendix C: Blood Sample and Shipment Notification Form

Please email the form on or prior to the date of shipment.

|  |                                       |  |                                    |
|--|---------------------------------------|--|------------------------------------|
| To: Kelley Faber    Email: <a href="mailto:alzstudy@iu.edu">alzstudy@iu.edu</a> Phone: 1-800-526-2839      |                                       |  |                                    |
| From: _____  |                                       | UPS tracking #: <b>1Z976R8W84</b>  |                                    |
| Phone: _____   |                                       | Email: _____   |                                    |
| Study: ADCFB    Sex: <input type="checkbox"/> M <input type="checkbox"/> F    Year of Birth: _____         | KIT BARCODE                           |  |                                    |
| Site ID: _____    PT ID: _____   |                                       |  |                                    |
| GUID: _____  |                                       |  |                                    |
| NACC Visit: _____  |                                       |  |                                    |
| <i>Blood Collection:</i>   |                                       |  |                                    |
| Date of Draw: _____ [MMDDYY]   |                                       | Time of Draw: _____ [HHMM]   |                                    |
| Date participant last ate: _____ [MMDDYY]  |                                       | Time participant last ate: _____ [HHMM]                                  |                                    |
| <i>Blood Processing:</i>   |                                       |  |                                    |
| <b>Plasma &amp; Buffy Coat (EDTA Tube)</b>   |                                       |  |                                    |
| EDTA specimen number<br><b>(Last four digits):</b> _____   | _____                                 | Original blood volume of EDTA:   | _____ mL                           |
| Time spin started: _____ [HHMM]  | _____ [HHMM]                          | Duration of centrifuge:  | _____ mins                         |
| Temp of centrifuge: _____ °C   | _____ °C                              | Rate of centrifuge:  | _____ x g                          |
| Time aliquoted: _____ [HHMM]   | _____ [HHMM]                          | Number of 1.5 mL plasma aliquots<br>created (purple cap):                | _____                              |
| Volume of residual plasma aliquot<br>(less than 1.5 mL in blue cap): _____ mL <input type="checkbox"/> N/A | _____ mL <input type="checkbox"/> N/A | Specimen number of residual<br>plasma aliquot <b>(Last four digits):</b> | _____ <input type="checkbox"/> N/A |
| Buffy coat specimen number<br><b>(Last four digits):</b> _____   | _____                                 | Buffy coat volume:   | _____ mL                           |
| Time aliquots frozen: _____ [HHMM]   | _____ [HHMM]                          | Storage temperature of freezer:  | _____ °C                           |
| <b>Notes:</b> _____  |                                       |  |                                    |