



Appendix B



Participant ID: DSR _____ Biological Sample and Shipment Notification Form

Please email or fax this from prior to the date of shipment.

To: Kelley Faber Email: alzstudy@iu.edu Phone: 1-800-526-2839

General Information:

UPS tracking #: _____

From: _____

Date: _____

Phone: _____

Email: _____

Study: LIFE-DSR

Kit #: _____

KIT BARCODE

Visit (circle one): **BASELINE** MONTH 16 MONTH 32

Sex: M F Year of Birth: _____

Blood Collection:

| | |
|------------------------------------|----------------------------------|
| 1. Date Drawn: [MMDDYY] | 2. Time of Draw: [HHMM] |
| 3. Last time subject ate: [MMDDYY] | 4. Last time subject ate: [HHMM] |

Blood Processing:

| | |
|--|---------------------------------------|
| Plasma & Buffy Coat (Lavender-top) Tube (10 mL) | |
| Time spin started: | _____ [HHMM] |
| Duration of centrifuge: | _____ Minutes |
| Temp of Centrifuge: _____ °C | Rate of centrifuge: _____ x g |
| Time aliquoted: | _____ [HHMM] |
| Number of 1.5 mL plasma aliquots created (lavender cap): | |
| If applicable, volume of residual plasma aliquot (less than 1.5 mL in blue cap): | _____ mL |
| If applicable, specimen number of residual plasma aliquot (last four digits): | |
| Buffy coat #1 last four digits of specimen number: | |
| Buffy coat #1 volume: _____ mL | Original blood volume drawn: _____ mL |
| Buffy coat #2 last four digits of specimen number: | |
| Buffy coat #2 volume: _____ mL | Original blood volume drawn: _____ mL |
| Buffy coat #3 last four digits of specimen number: | |
| Buffy coat #3 volume: _____ mL | Original blood volume drawn: _____ mL |
| Buffy coat #4 last four digits of specimen number: | |
| Buffy coat #4 volume: _____ mL | Original blood volume drawn: _____ mL |
| Buffy coat #5 last four digits of specimen number: | |
| Buffy coat #5 volume: _____ mL | Original blood volume drawn: _____ mL |
| Time aliquots placed in freezer: | _____ [HHMM] |
| Storage temperature in freezer: | _____ °C |

Notes: