Specimen Request Form
Prostate SPORE Tissue/Informatics Core
3411 Rogel Cancer Center

Date of Request: ____________________ Date Required: ____________________

*Must be at least 1 week between date of request and date needed

Type of Specimen Requested:
(ex. Normal Prostate, etc.)

State of specimen Requested:
(ex. Frozen, fresh, TMA, etc.)
(Does not apply to archival paraffin blocks material)

Amount of Tissue Requested:
(ex. 20g, 1 slide, etc.)

Type of slides Requested:
(Charged or uncharged)

Number of samples Requested: ________________

Title of Project and IRB Number/IRB Expiration Date
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Brief background statement, rationale for request; state statistical support for request if available
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Method for specimen processing
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Investigators must agree to return unused sample portions to Prostate SPORE Tissue/Informatics Core within 90 days. When possible, investigators are encouraged to submit raw data for notation within our collective databases. Raw data will be kept confidential and will be not be used without the expressed knowledge and consent of the original investigator. Investigators who do not comply with the tissue return policy will not be eligible to receive future samples.

All requests should be submitted to: SPORE-Request@umich.edu