

BPV Case ID: _____  Affix BPV Case ID Barcode Label  Tissue Bank ID: _____  Primary Organ: _____	Form Completed By: _____  Date on Which Form Was Completed: ____/____/_____ (MM/DD/YYYY)  Biospecimen Source Site: _____
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**Specimen Receipt Overview**

<b>1. Confirm that pre-operative/          pre-anesthesia blood samples          specified in the BPV Blood          Collection and Processing          Standard Operating Procedure          (SOP) were collected from the          participant and were successfully          banked in the Tissue Bank.</b>	Select one: <input type="radio"/> Yes <input type="radio"/> No	<b>Note: If "No" is selected for this question,          complete only question #2. This participant          is excluded from further participation in the          study. Document the reason(s) that blood          was not banked in question #2.</b>
<b>2. Reason(s) that pre-operative          blood was not banked:</b>	Select all that apply: <input type="checkbox"/> The blood was not received in the Tissue Bank <input type="checkbox"/> The minimum amount of required pre-op blood was not drawn <input type="checkbox"/> The minimum number of aliquots were not banked <input type="checkbox"/> The blood was hemolyzed or not usable <input type="checkbox"/> Other, specify:	

Receipt and dissection of surgical tissue are expected to conform to the BPV Surgical Tissue Collection and Processing SOP. Please specify any deviations from the SOP in the Comments fields at the bottom of each section.

BPV SOP governing receipt and dissection of surgical tissue in the Tissue Bank:

<b>3. Date and time at which tissue          specimens were received in          Tissue Bank from the Pathology          Gross Room:</b>	____/____/_____ (MM/DD/YYYY)	____ : ____ (HH:MM)
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<b>4. Tissue specimens were received in Tissue Bank from the Pathology Gross Room by:</b>	
<b>5. Comments/issues with tissue receipt or deviation(s) from SOP:</b>	
<b>Tumor Tissue Specimen Dissection Information: Details of processing of required tumor tissue are recorded on the BPV Tissue Processing Worksheet for this BPV Case ID and Experimental Key ID pair. Note any deviations from BPV Surgical Tissue Collection and Preservation SOP in the Comments field at the bottom of this section.</b>	
<b>6. Parent Tissue Specimen ID of the required study tumor tissue received in the Tissue Bank from the Pathology Gross Room:</b>	
<b>7. Experimental Key ID:</b>	
<b>8. Dissection of parent tissue specimen was performed by:</b>	
<b>9. Time at which dissection of the parent tissue specimen began:</b>	____:____ (HH:MM)
<b>10. Time at which the dissection of parent tissue specimen ended:</b>	____:____ (HH:MM)
<b>11. Gross appearance of the parent tissue specimen as determined in the Pathology Gross Room:</b>	Select one: <input type="radio"/> Tumor <input type="radio"/> Other, specify:

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<b>12. Source of tumor tissue:</b>		
<b>13. Tissue collection procedure:</b>	Select one: <input type="radio"/> Surgical <input type="radio"/> Core biopsy <input type="radio"/> Needle biopsy <input type="radio"/> Other, specify:	

**Required Study Tissue: Fixative Information (for quality control formalin-fixed, paraffin-embedded control and experimental blocks, as applicable)**

<b>14. Fixative type:</b>	Select one: <input type="radio"/> Buffered formalin <input type="radio"/> Ethanol <input type="radio"/> PAXgene™ tissue <input type="radio"/> Other, specify:	
<b>15. Fixative formula (buffer):</b>		
<b>16. Fixative pH:</b>		
<b>17. Manufacturer of fixative:</b>		
<b>18. Fixative lot number:</b>		
<b>19. Fixative lot expiration date:</b>	___/___/____ (MM/DD/YYYY)	
<b>20. Fixative product number:</b>		

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<p><b>21. Is the fixative a commercial product or prepared in house?</b></p>	<p>Select one:  <input type="radio"/> Commercial  <input type="radio"/> In-house  <input type="radio"/> Other, specify:</p>	
<p><b>22. Is the formalin fresh or recycled?</b></p>	<p>Select one:  <input type="radio"/> Fresh  <input type="radio"/> Recycled</p>	
<p><b>23. Comments/issues with tissue receipt or deviations from SOP:</b></p>		