

BIOCARD – Biomarkers of Cognitive Decline Among Normal Individuals: the BIOCARD Study

**E1. Biospecimen Request Form**

All individuals requesting BIOCARD biospecimen samples must submit this form. This form may also be used to request access to BIOCARD data and brain images. Please type in responses and save before emailing this form to BIOCARD@jhu.edu.

**Section A. Principal Investigator Information**

1. First name:

2. Last name:

3. Address:

4. City:

5. State:

6. Zip Code:

7. Email address:

8. Re-enter email address:

9. Work phone:

10. Is the requesting investigator a student, graduate student, or fellow?

 [ ]  No

 [ ]  Yes, specify name of faculty mentor on this project:

10a. First name:

 10b. Last name:

 10c. Email address:

**Section B. Project Information**

11. Title:

12. Specific Aims – Please provide between 1 and 4 concise aims for your project:

 12a.

 12b.

 12c.

 12d.

**Section C. Details of Biospecimen Request and Other Relevant Data/Images**

13. Which biospecimens are you requesting? (Check ‘yes’ or ‘no’ for each item):

 **No Yes**

13a. CSF samples [ ]  [ ]

 13b. Blood samples [ ]  [ ]

 13c. Immortalized cell lines [ ]  [ ]

 13d. Brain tissue [ ]  [ ]

For requests of biospecimens, a Research Plan must accompany your request.

14. Are you requesting data derived from biospecimen?

 [ ]  No, **SKIP to item 16**

 [ ]  Yes

15. Which biospecimen datasets are you requesting? (Check ‘yes’ or ‘no’ for each item):

 **No Yes**

15a. CSF dates of collection [ ]  [ ]

15b. CSF data analyzed by BIOCARD investigators [ ]  [ ]

15c. Neuropathology (brain tissue) dates of collection [ ]  [ ]

15d. Neuropathology findings [ ]  [ ]

16. Are you requesting clinical, cognitive, or diagnostic datasets?

 [ ]  No, **SKIP to item 18**

 [ ]  Yes

17. Which clinical, cognitive, or diagnostic datasets are you requesting? (Check ‘yes’ or ‘no’ for each item):

 **No Yes**

 17a. Visits [ ]  [ ]

17b. Diagnosis [ ]  [ ]

 17c. Demographics and status [ ]  [ ]

17d. Family history of dementia [ ]  [ ]

17e. Health history [ ]  [ ]

 17f. Medications [ ]  [ ]

 17g. Cognitive Assessment [ ]  [ ]

 17h. Neuropsychiatric Symptoms [ ]  [ ]

17i. Functional evaluation [ ]  [ ]

 17j. Genetics [ ]  [ ]

 17k. Physical function [ ]  [ ]

 17l. Leisure activities [ ]  [ ]

18. Are you requesting brain imaging data or brain images?

 [ ]  No, **SKIP to item 20**

 [ ]  Yes

19. Which brain imaging data or images are you requesting? (Check ‘yes’ or ‘no’ for each item):

 **No Yes**

 19a. MRI scan dates of collection [ ]  [ ]

19b. MRI scans [ ]  [ ]

 19c. MRI data analyzed by BIOCARD Investigators [ ]  [ ]

19d. PET scans [ ]  [ ]

19e. PET scan dates of collection [ ]  [ ]

19f. PET data analyzed by BIOCARD investigators [ ]  [ ]

**Section D. Funding Information**

20. Do you have funding for the proposed project?

 [ ] No, **SKIP to Section E**

 [ ]  Yes

21. Indicate the type of funding to be used for this project (check ‘yes’ or ‘no’ for each item):

 **No Yes**

 21a. Industry [ ]  [ ]

 21b. Federal [ ]  [ ]

 21c. Private [ ]  [ ]

 21d. Internal/Departmental [ ]  [ ]

22. Primary sponsor:

23. Grant title:

24. Grant number:

25. Grant start and end dates:

25a. Start date of funding (mm/dd/yyyy):

25b. (Expected) ending date of funding (mm/dd/yyyy):

**Section E. Administrative Information**

26. Date of request (mm/dd/yyyy):

27. What is the purpose of this request (check ‘yes’ or ‘no’ for each item):

 **No Yes**

 27a. Current or planned research [ ]  [ ]

27b. Preliminary feasibility [ ]  [ ]

 27c. Data exploration [ ]  [ ]

 27d. Grant application [ ]  [ ]

 27e. Journal publication [ ]  [ ]

 27f. Abstract submission [ ]  [ ]

 27g. Clinical trial [ ]  [ ]

 27h. Other [ ]  [ ] , specify:

**Section F. Materials and Documents**

The cost of the transfer of biospecimen is the responsibility of the person requesting the specimen.

28. Do you agree to pay the cost incurred during the transfer of the requested biospecimens?

 [ ]  No

 [ ]  Yes

 [ ]  Other, specify:

29. Did you also submit the following documents via email to BIOCARD@jhu.edu? (check ‘yes or no, for

 each item): **No Yes**

 29a. E2. Data Use Agreement [ ]  [ ]

 29b. E3. Code Access Agreement [ ]  [ ]

 29c. NIH biosketch or CV [ ]  [ ]

 29d. E5. Research Plan [ ]  [ ]

Once the biospecimen request has been approved, a Material Transfer Agreement must be submitted.