MTN 017 – Tissue Subset LDMS Specimen Tracking Sheet

For login of MTN 017 stored specimens into LDMS

Participant ID	Visit Code	Specimen Collection Date
☐☐☐ - ☐☐☐☐☐ - ☐ Site Number · Participant Number · Chk	☐☐.☐	☐☐ ☐☐☐ ☐☐ *dd* · *MMM* · *yy*

# of TUBES or SPECIMENS	PRIMARY SPECIMEN	PRIMARY ADDITIVE	ALIQUOT DERIVATIVE	INSTRUCTIONS FOR LAB
☐	Rectal Sponge – *Mucosal Immuno* **(REC)** **Collection Time:** _____:_____ Hour : Min	NON	SPG	_____.___ - _____.___ = _____.___ mg *Post-weight* · *Pre-weight* · *Net weight* **Time Frozen:** _____:_____ Hour : Min Freeze at ≤-70°C within 2 hours of collection. Enter **MI** into Other Spec ID field of LDMS.
☐	Rectal Biopsies – *PK* **(FSR)** **Collection Time:** _____:_____ Hour : Min	NON	BPS	1 _____.___ - _____.___ = _____.___ mg 2 _____.___ - _____.___ = _____.___ mg 3 _____.___ - _____.___ = _____.___ mg 4 _____.___ - _____.___ = _____.___ mg 5 _____.___ - _____.___ = _____.___ mg *Post-weight* · *Pre-weight* · *Net weight* **Time Frozen:** _____:_____ Hour : Min Freeze at ≤-70°C within 2 hours of collection. Enter **PK** into Other Spec ID field of LDMS.
☐	Rectal Biopsies – G*ene expression microarrays* **(FSR)** **Collection Time:** _____:_____ Hour : Min	RNL	BPS	Store at 4°C overnight then transfer to ≤-70°C. Must be stored at ≤-70°C for a minimum of 24 hours prior to shipping.

Comments: _____

_____

_____

Initials: _____ _____ **LDMS Data Entry Date:** ☐☐ ☐☐☐ ☐☐ / _____
  Sending Staff   Receiving Staff · *dd* · *MMM* · *yy* · LDMS Staff

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MTN 017 LDMS Specimen Tracking Sheet (non-DataFax)

Purpose: This non-DataFax form is used to document collection and entry of MTN 017 specimens into the Laboratory Data Management System (LDMS).

General Information/Instructions: A copy of this form accompanies specimens for storage (in their original specimen collection containers) to the LDMS entry laboratory. Once the specimens have been entered into LDMS, this form is kept on file at the LDMS entry laboratory. If the site chooses, a copy of this completed form may be made once the specimens have been entered into LDMS and the copy kept in the participant's study notebook. This is not required, however. Because this form is a non-DataFax form, this form should NOT be faxed to SCHARP DataFax.

Item-specific Instructions:

- **Visit Code:** Record the visit code of the visit at which the LMDS specimens were collected.

- **# of TUBES or SPECIMENS COLLECTED**: In the box provided, record the total number of tubes or specimens collected for that primary specimen type. If no LDMS specimens of the primary specimen type were collected, record "0."

- **Initials – Sending Staff:** The clinic staff person who completed the form and/or who is sending the LDMS form and specimens to the LDMS entry lab, records his/her initials here.

- **Initials – Receiving Staff:** The laboratory staff person who received this form (and the LDMS specimens accompanying the form), records his/her initials here.

- **LDMS Data Entry Date:** Record the date the LDMS specimens listed on this form were entered into LDMS.

- **LDMS Data Entry Date – LDMS Staff:** The LDMS laboratory staff person who entered the specimens into LDMS, records his/her initials here.

LDMS CODES:

BPS: Biopsy
BTM: Biopsy Transport Media
FOR: Formalin

FSR: Rectal biopsy by flexible
sigmoidoscopy
NON: None

REC: Rectal
RNL: RNAlater
SPG: Sponge

MTN 017 – Tissue Subset LDMS Specimen Tracking Sheet

For login of MTN 017 stored specimens into LDMS

Participant ID			Visit Code	Specimen Collection Date		
Site Number	**Participant Number**	**Chk**	☐☐.☐	☐☐ *dd*	☐☐☐ *MMM*	☐☐ *yy*

# of TUBES or SPECIMENS	PRIMARY SPECIMEN	PRIMARY ADDITIVE	ALIQUOT DERIVATIVE	INSTRUCTIONS FOR LAB
☐	Rectal Biopsy – *Histology* **(FSR)** **Collection Time:** ____:____ Hour : Min	FOR	BPS	Store at room temperature and batch ship to MTN NL quarterly.
☐	Rectal Biopsies – *PD* **(FSR)** **Collection Time:** ____:____ Hour : Min	BTM	BPS	**1** _____.___ - _____.___ = _____.___ **mg** **2** _____.___ - _____.___ = _____.___ **mg** **3** _____.___ - _____.___ = _____.___ **mg** **4** _____.___ - _____.___ = _____.___ **mg** *Post-weight Pre-weight Net weight* Transport biopsies to processing lab within **15-30 minutes** of collection for processing. Enter **PD** into Other Spec ID field of LDMS.
☐	Rectal Biopsies – *T Cell Phenotyping* **(FSR)** **Collection Time:** ____:____ Hour : Min	BTM	BPS	Transport on ice to lab for testing. Enter **PHENO** into Other Spec ID field of LDMS.
☐	Rectal Biopsy – *Proteomics* **(FSR)** **Collection Time:** ____:____ Hour : Min	NON	BPS	Freeze at ≤-70°C within 2 hours of collection. Enter **PRO** into Other Spec ID field of LDMS. **Time Frozen:** _____:_____ Hour : Min

Comments:_____

_____

Initials: _____ _____   **LDMS Data Entry Date:** ☐☐ *dd* ☐☐☐ *MMM* ☐☐ *yy* / _____
   Sending Staff   Receiving Staff   LDMS Staff

MTN 017 – Tissue Subset   LDMS Specimen Tracking Sheet

For login of MTN 017 stored specimens into LDMS

MTN 017 LDMS Specimen Tracking Sheet (non-DataFax)

Item-specific Instructions:

• **Visit Code:** Check to make sure the Visit Code recorded on page 1 and page 2 match.

• **NUMBER OF TUBES or SPECIMENS COLLECTED**: In the box provided, record the total number of tubes or specimens collected for that primary specimen type. If no LDMS specimens of the primary specimen type were collected, record "0."

• **Initials – Sending Staff:** The clinic staff person who completed the form and/or who is sending the LDMS form and specimens to the LDMS entry lab, records his/her initials here.

• **Initials – Receiving Staff:** The laboratory staff person who received this form (and the LDMS specimens accompanying the form), records his/her initials here.

• **LDMS Data Entry Date:** Record the date the LDMS specimens listed on this form were entered into LDMS.

• **LDMS Data Entry Date – LDMS Staff:** The LDMS laboratory staff person who entered the specimens into LDMS, records his/her initials here.

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