

## Appendix D: ALLFTD2 6, 24, 36, 48-Month Blood Sample and Shipment Notification Form

*Online sample form submission is preferred, use this as back up only*

To: Kelley Faber      Email: [alzstudy@iu.edu](mailto:alzstudy@iu.edu)      FAX: 317-278-1100      Phone: 1-800-526-2839

From: \_\_\_\_\_      UPS tracking #: \_\_\_\_\_  
 Phone: \_\_\_\_\_      Email: \_\_\_\_\_      Site #: \_\_\_\_\_

Study: ALLFTD2      RAVE ID: \_\_\_\_\_      Sex:  M  F      Year of Birth: \_\_\_\_\_

ALLFTD2 Visit (circle one): 6-Month    24-Month    36-Month    48-Month

RAVE Cycle (circle one): 1   2   3   4   5   6   7   8   9   10   11   12   13   14   15   16   17   18

Kit #: \_\_\_\_\_      KIT BARCODE

**Blood Collection:**

Date of Draw: _____ [MMDDYY]	Time of Draw: _____ [HHMM]
Date participant last ate: _____ [MMDDYY]	Time participant last ate: _____ [HHMM]

Storage temperature of freezer: \_\_\_\_\_ °C

**Blood Processing:**

**Plasma & Buffy Coat (Lavender-Top) Tube (10 mL)**

Time spin started:	_____ [HHMM]
Duration of centrifugation:	_____ Minutes
Temp of centrifuge: _____ °C    Rate of centrifuge: _____ x g	
Time aliquoted:	_____ [HHMM]
Number of 1.5 mL plasma aliquots created (lavender cap, up to 13):	_____
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	
Time plasma and buffy coat aliquots frozen:	_____ [HHMM]

Notes: