South Asia, Middle East, and North Africa Study

COLLECTION AND SHIPMENT TRAINING

Version 1.0

National Centralized Repository for
Alzheimer's Disease and Related Dementias

Training Overview

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- Sample Form
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- Common Nonconformance Issues
- Questions?

NCRAD

NCRAD Contact Information

Questions?

Zoë McManus, BA, CCRP, Study Coordinator

Phone: (317) 278-9086

Email: zdpotter@iu.edu

General NCRAD Contact Information

Phone: 1-800-526-2839

Alt. Phone: (317)-278-8413

Email: alzstudy@iu.edu

Website: www.ncrad.org

SAMENA Study Specific Webpage: NCRAD - The SAMENA Active Study Page

SAMENA Blood-Based Collection Schedule

	Serum	Plasma	DNA	Whole Blood
All Visits	X	X	X	X
Store/Ship:	Rutgers & NCRAD	Rutgers & NCRAD	NCRAD	NCRAD

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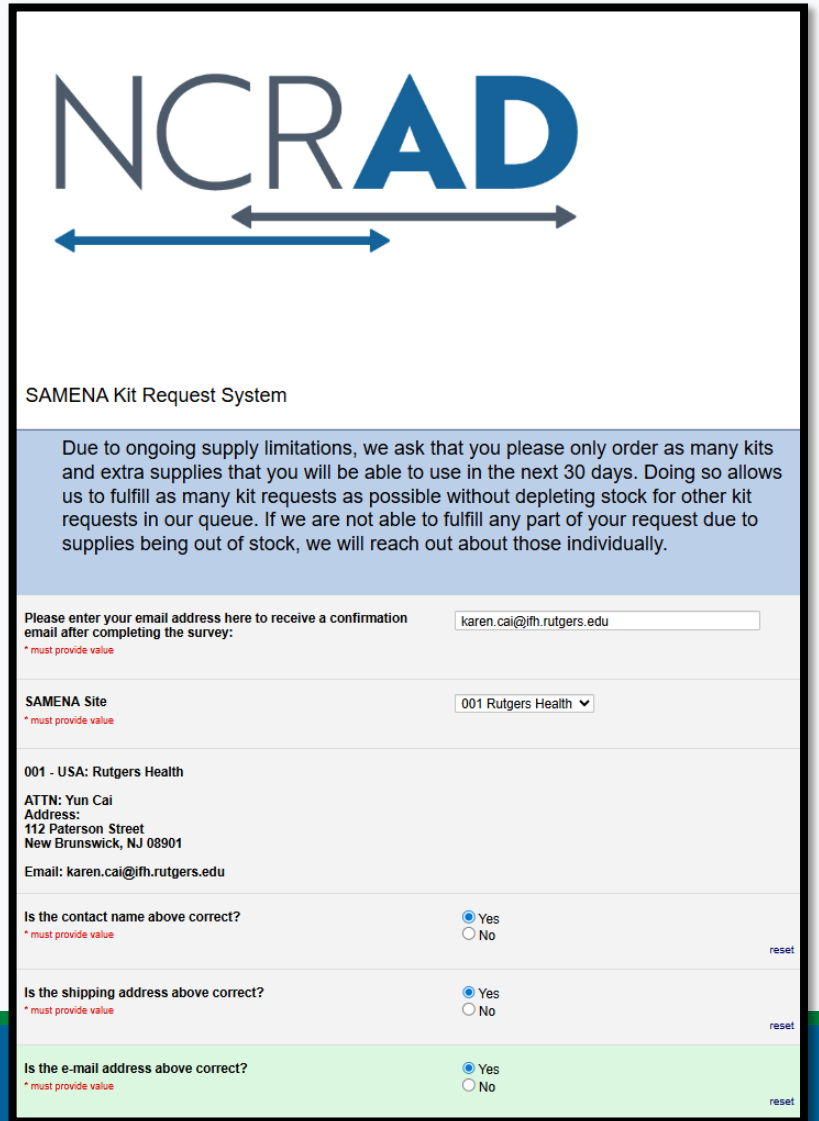
Kit Request Module

https://redcap.link/SAMENA

SAMENA Kit Request Module

If possible, only order what you will need in the next month



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SAMENA Kit Request System

Due to ongoing supply limitations, we ask that you please only order as many kits and extra supplies that you will be able to use in the next 30 days. Doing so allows us to fulfill as many kit requests as possible without depleting stock for other kit requests in our queue. If we are not able to fulfill any part of your request due to supplies being out of stock, we will reach out about those individually.

Please enter your email address here to receive a confirmation email after completing the survey: karen.cai@ifh.rutgers.edu
* must provide value

SAMENA Site: 001 Rutgers Health
* must provide value

001 - USA: Rutgers Health

ATTN: Yun Cai
Address:
112 Paterson Street
New Brunswick, NJ 08901

Email: karen.cai@ifh.rutgers.edu

Is the contact name above correct? Yes / No
* must provide value
reset

Is the shipping address above correct? Yes / No
* must provide value
reset

Is the e-mail address above correct? Yes / No
* must provide value
reset

- Enter your email to receive a confirmation email after you submit your kit request.
- Choose your site from the drop-down list.
- The coordinator name and contact information will appear.
- Verify that this information is accurate. Correct if necessary.

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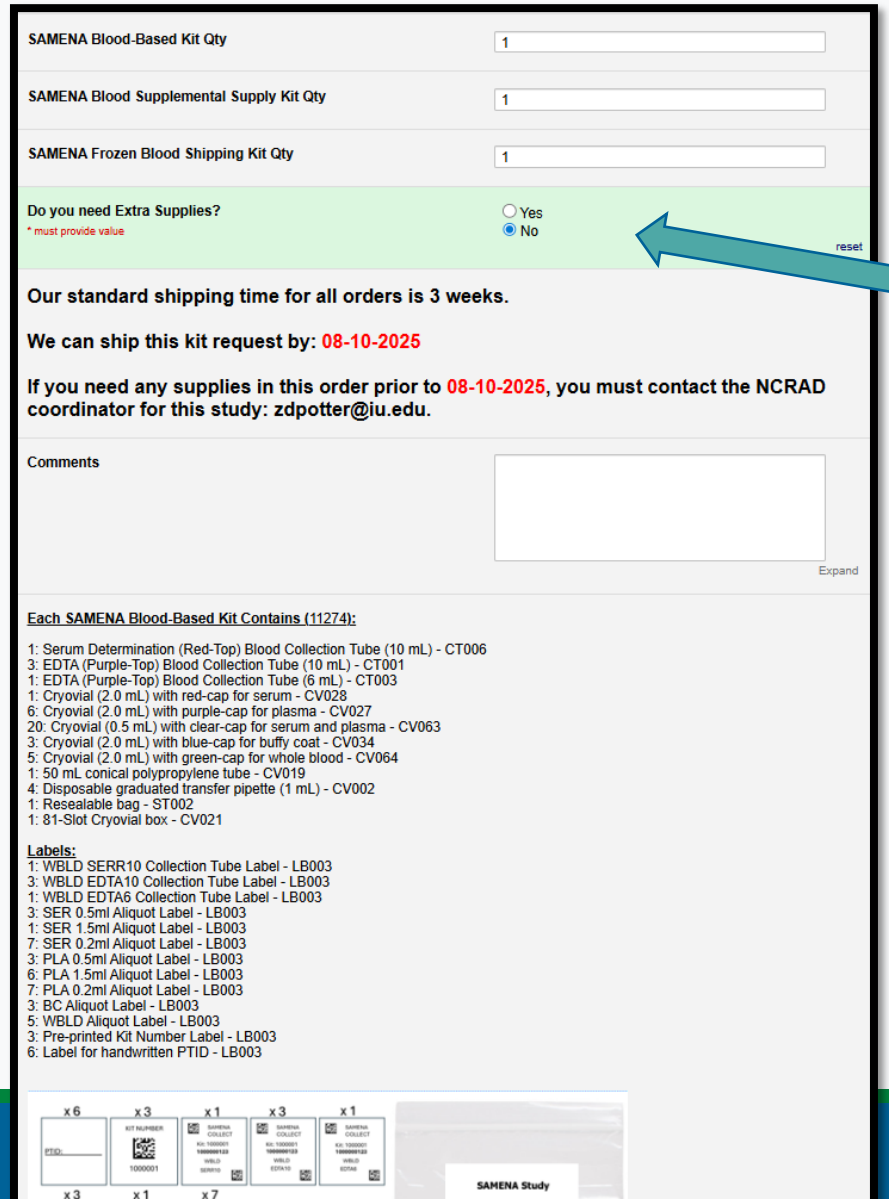
SAMENA Kit Request Module



- Indicate the quantity needed of each kit
  - Once selected, kit components of the chosen kit will appear at the bottom of the screen
- You can order extra supplies individually by selecting “Yes” here.
- We will return requests within 3 weeks from the order date.
  - If you need any supplies expedited, please contact the NCRAD Coordinator via email.
- Click “Submit” to turn in your request.
- **Note: You can order more than one type of kit in a single kit request**

SAMENA Kit List

- SAMENA Blood-Based Supply Kit
- SAMENA Blood-Based Supplemental Supply Kit
- SAMENA Frozen Blood Shipping Kit

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- Each individual site will be responsible for ordering and maintaining a steady supply of kits from NCRAD. We advise sites to keep a supply of each kit type available for scheduled participants.

- Be sure to check your supplies and order additional materials before you run out or supplies expire so you are prepared for study visits.

- Allow a minimum of **3 weeks** for your order to be processed and delivered.

- Due to ongoing supply limitations, we ask that you please only order as many kits and extra supplies that you will be able to use in the next 30 days.

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Specimen Labels

Provided by NCRAD

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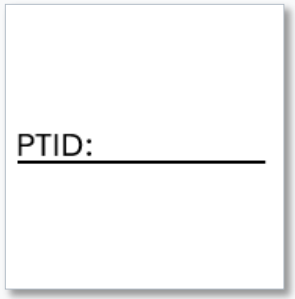
National Centralized Repository for
Alzheimer's Disease and Related Dementias

Four Label Types

Kit Number Labels



PTID Labels

Collection Tube Labels

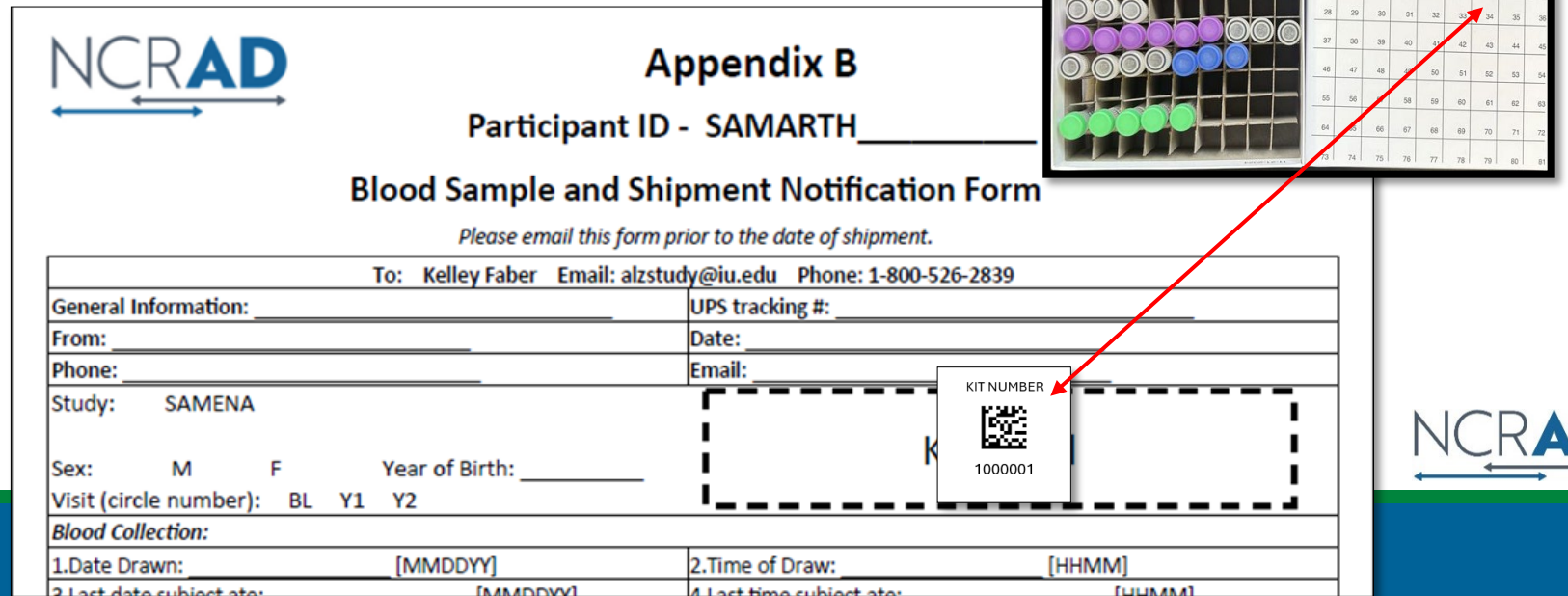
Aliquot Tube Labels

Kit Number Labels

KIT NUMBER

1000001

- Used to track patient samples and provide quality assurance – Will be placed on the following locations :
  1. Blood Sample and Shipment Notification Form (Appendix B).
  2. Lid of cryobox that houses aliquot tubes during storage and shipment.
  3. One extra label provided



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Appendix B

Participant ID - SAMARTH_____

Blood Sample and Shipment Notification Form

Please email this form prior to the date of shipment.

To: Kelley Faber Email: alzstudy@iu.edu Phone: 1-800-526-2839	
General Information: _____	UPS tracking #: _____
From: _____	Date: _____
Phone: _____	Email: _____
Study: SAMENA Sex: M F Year of Birth: _____ Visit (circle number): BL Y1 Y2	KIT NUMBER 1000001
Blood Collection:	
1.Date Drawn: _____ [MMDDYY]	2.Time of Draw: _____ [HHMM]
3.Last date subject ate: _____ [MMDDYY]	4.Last time subject ate: _____ [HHMM]

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Collection Tube Labels

- Collection Tube labels have 6 components:
  - Study name
  - COLLECT – Indicates the label is for the collection tube
  - Kit number (assigned by NCRAD)
    - Unique to participant AND visit
  - 10-digit specimen number (assigned by NCRAD)
  - Specimen type = WBLD
  - Collection tube type
- Will be placed on the following locations :
  - All Collection Tubes
    - 1 x Serum Determination (Red-Top) Blood Collection Tube (10 mL)
    - 3 x EDTA (Purple-Top) Blood Collection Tube (10 mL)
    - 1 x EDTA (Purple-Top) Blood Collection Tube (6 mL)

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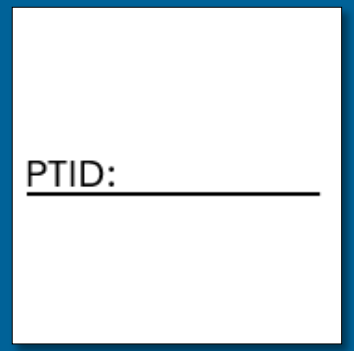
PTID Labels



- Subjects will be identified by their Site and PTID
- Sites will be responsible for handwriting this onto the provided labels
  - Must use fine point permanent marker
  - Write information on label prior to adhering to tube
- Will be placed on the following locations :
    - 1 x Serum Determination (Red-Top) Blood Collection Tube (10 mL)
    - 3 x EDTA (Purple-Top) Blood Collection Tube (10 mL)
    - 1 x EDTA (Purple-Top) Blood Collection Tube (6 mL)

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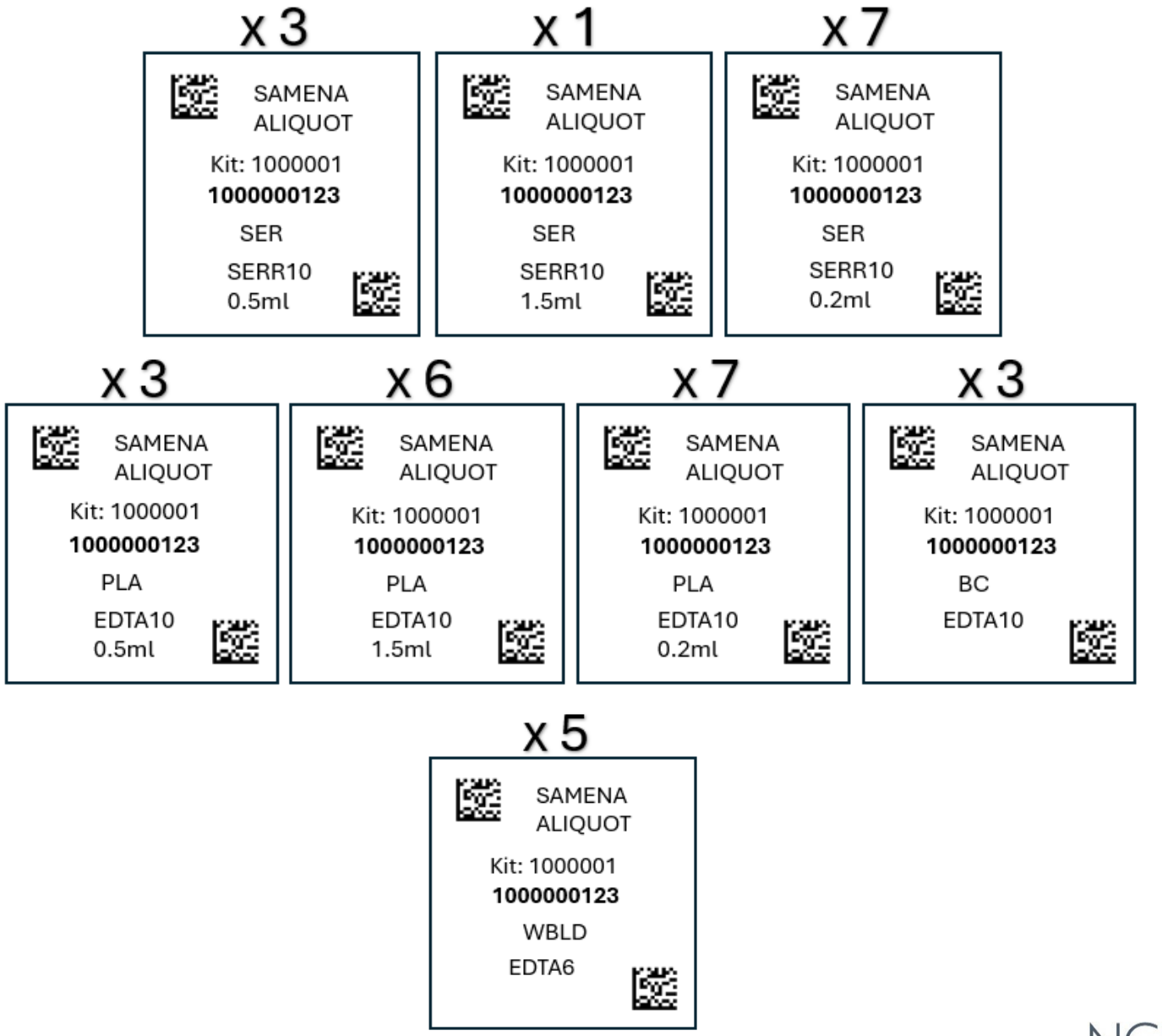
Aliquot Tube Labels

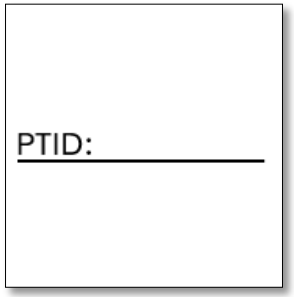
- Only one label to be placed on each 0.5 mL and 2.0 mL cryovial
  - **Serum**
    - From Red-Top Serum Tube
  - **Plasma**
    - From 10 mL EDTA Tube
  - **Buffy Coat**
    - From 10 mL EDTA Tube
  - **Whole Blood**
    - From 6 mL EDTA Tube



Blood Collection Tube Labels:

Label 1: Collection Tube Label

Label 2: PTID Label



Labeled Serum Determination (Red-Top) Blood Collection Tube (10 mL)

Labeled EDTA (Purple-Top) Blood Collection Tube (10 mL)

Labeled EDTA (Purple-Top) Blood Collection Tube (6 mL)

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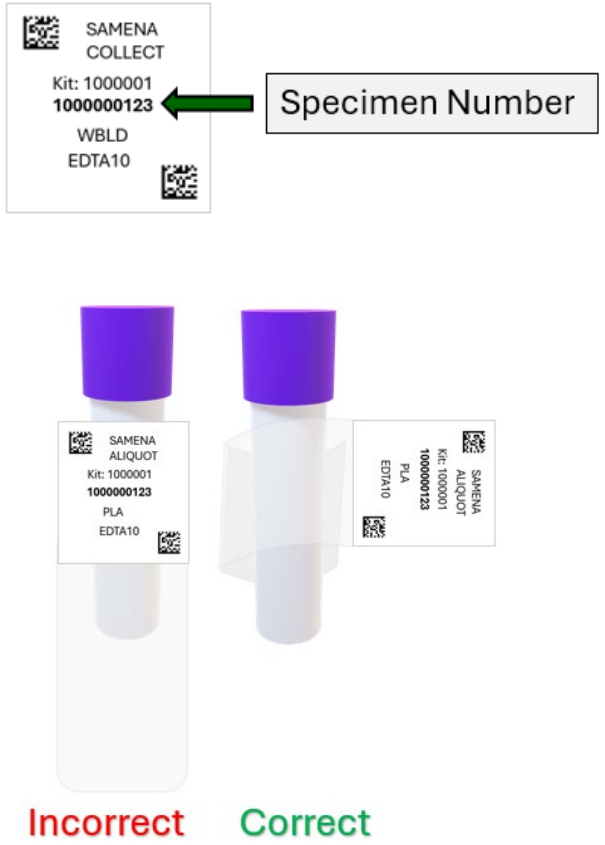
Labeling Biologic Samples

- Label all collection and aliquot tubes *before* cooling, collecting, processing or freezing samples
- Label only *1* subject's tubes at a time to avoid mix-ups
- Wrap the label around the tube *horizontally*. Label position is important for *all* tube types
- Make sure the label is completely adhered by rolling between your fingers



Handling/Processing Study Specimens

National Centralized Repository for
Alzheimer's Disease and Related Dementias

Site Required Equipment

BLOOD COLLECTION/SAFETY EQUIPMENT

- Personal Protective Equipment: lab coat, nitrile/latex gloves, safety glasses
- Tourniquet
- Alcohol Prep Pad
- Gauze Pad
- Bandage
- Butterfly needles and hub
- Microcentrifuge tube rack
- Sharps bin and lid
- Wet Ice Bucket
- Wet Ice
- Pelleted dry ice

PROCESSING/STORAGE EQUIPMENT

1) Centrifuge capable of ≥ 2000 x g with refrigeration to 4°C
2) -80°C Freezer
3) Wet Ice Bucket

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Blood Draw Order

Tube Type	Number of Tubes Drawn	Tube Image
1. Serum Determination (Red-Top) Blood Collection Tube (10 mL)	1	
2. EDTA (Purple-Top) Blood Collection Tube (10 mL)	3	
3. EDTA (Purple) Blood Collection Tube (6 mL)	1	

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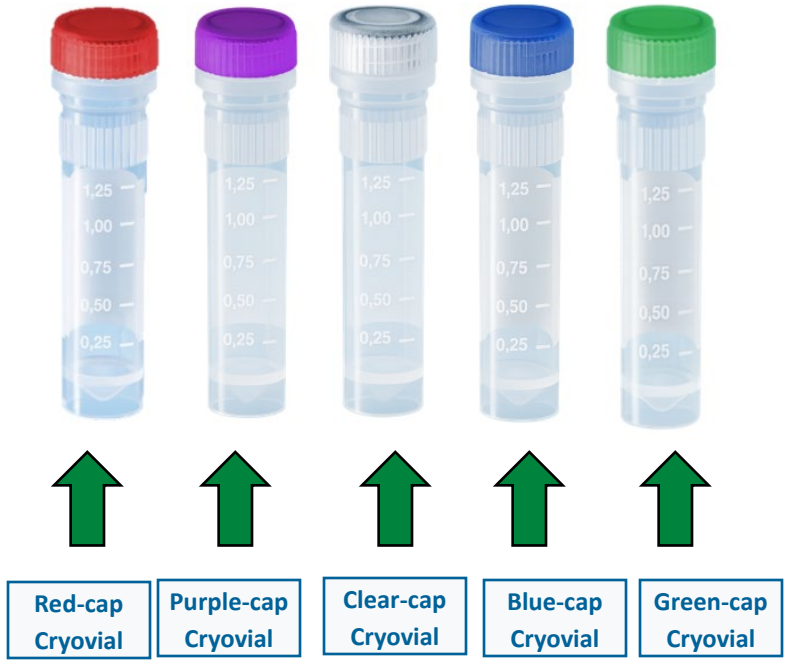
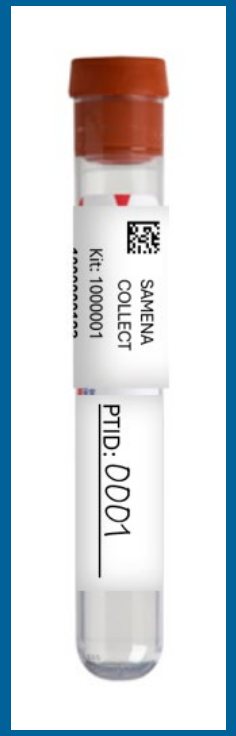
Aliquot Cap Colors

Cryovial Type	Sample Type
2 mL Red-cap Cryovial	Serum
2 mL Purple-cap Cryovial	Plasma
0.5 mL Clear-cap Cryovial	Serum and Plasma
2 mL Blue-cap Cryovial	Buffy Coat
2 mL Green-cap Cryovial	Whole Blood

81-Slot Cryobox with Serum, Plasma, Buffy Coat, And Whole Blood Aliquots



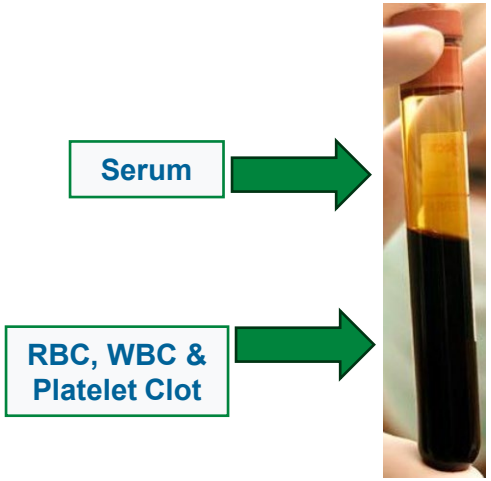
Serum Collection



81-cell cryobox with 0.5 mL and 2.0 mL cryovials

1 x Serum Determination (Red-Top) Blood Collection Tube (10 mL)

- Create up to 3 x 500 uL Serum Aliquots in 0.5mL clear-cap cryovials to store at Rutgers
- Create up to 1 x 1500 uL Serum Aliquots in 2.0mL red-cap cryovials and 7 x 200 uL Serum Aliquots in 0.5mL clear-cap cryovials to NCRAD



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Serum Determination (Red-Top) Blood Collection Tube (10 mL) for Serum x 1

Step 1

- Store tubes at room temperature.
- Label Collection Tube and Cryovials with pre-printed labels prior to blood draw.

Step 2

- Collect blood in (1) 10 mL Red-Top tube, allowing blood to flow for 10 seconds and ensure blood flow has stopped.

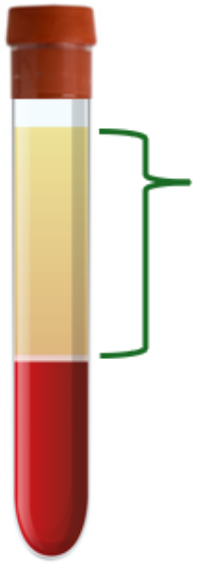
Step 3

- Immediately after blood draw, invert tube 5 times to mix samples.

Step 4

- Allow blood to clot at room temperature by placing it upright in a vertical position in a tube rack for 30 minutes.

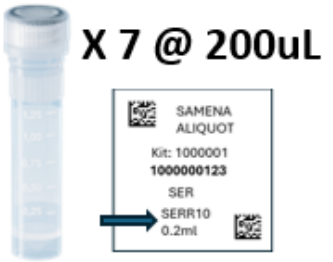
Step 5



- Within 2 hours of blood draw, centrifuge samples at 2000 x g at 4°C for 10 minutes.

Step 6

- Using a clean pipette, aliquot 0.5mL of serum from collection tube to pre-labeled clear-cap 0.5mL serum cryovials.
- **Store serum aliquots upright at -80°C at Rutgers site.**



Step 7

- Aliquot 1.5mL of serum from collection tube to pre-labeled red-cap 2.0mL serum cryovial.
- Aliquot 0.2mL of serum from collection tube to pre-labeled clear-cap 0.5mL serum cryovials.
- **Store serum aliquots upright at -80°C until shipment to NCRAD.**

Important Note: Ensure all tubes are not expired prior to collection and processing of samples.

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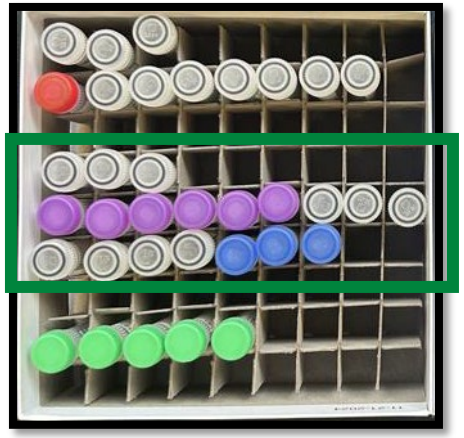
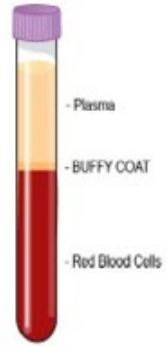
Plasma Collection

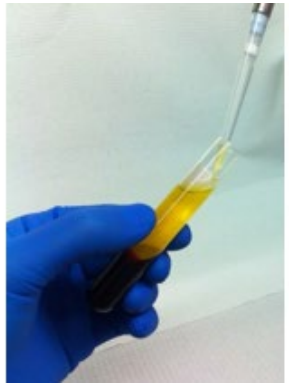


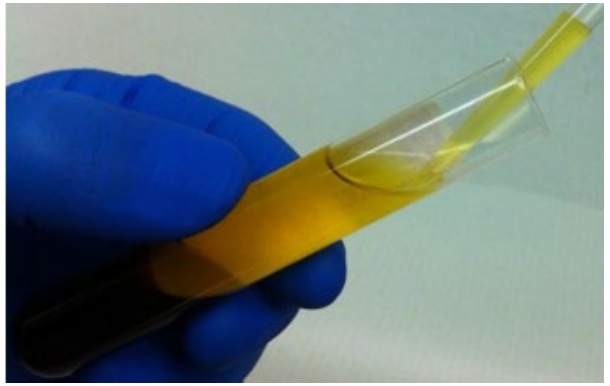
81-cell cryobox with 0.5 mL and 2.0 mL cryovials

3 x EDTA (Purple-Top) Blood Collection Tube (10 mL)

- Create up to 3 x 500 uL Plasma Aliquots in 0.5mL clear-cap cryovials to store at Rutgers
- Create up to 1 x 1500 uL Serum Aliquots in 2.0mL purple-cap cryovials and 7 x 200 uL Serum Aliquots in 0.5mL clear-cap cryovials to ship to NCRAD



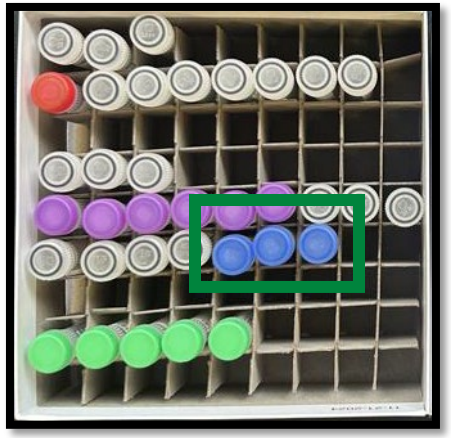




NOTE: When pipetting plasma from the plasma tubes into the 50 mL conical tube, be very careful to pipette the plasma top layer only, leaving the buffy coat and the red blood cell layers untouched.

NCRAD

Plasma Collection

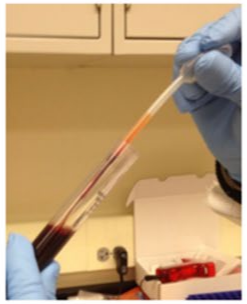


81-cell cryobox with 0.5 mL and 2.0 mL cryovials

3 x EDTA (Purple-Top) Blood Collection Tube (10 mL)

- Create up to 3 x Buffy Coat Aliquots in 2.0 mL blue-cap cryovials to ship to NCRAD
- Expected to have a reddish color from the RBCs.
- Be sure to only place the buffy coat from one EDTA tube into each cryovial

Buffy Coat Layer (mixed with RBCs)



Buffy Coat Aliquot (Please use blue cryovial)

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EDTA (Purple-Top) Blood Collection Tube (10 mL) for Plasma and Buffy Coat x 3

Step 1

- Store tubes at room temperature.
- Label Collection Tube and Cryovials with pre-printed labels prior to blood draw.

Step 2

x3

- Collect blood in (3) 10 mL Purple-Top tube, allowing blood to flow for 10 seconds and ensure blood flow has stopped.

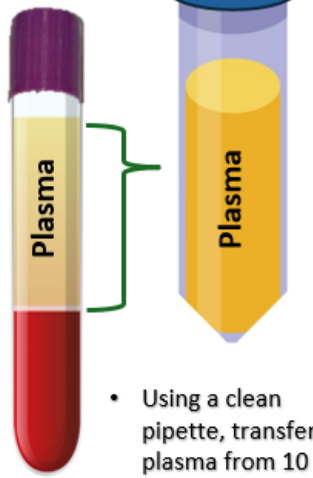
Step 3

- Immediately after blood draw, invert tube 8-10 times to mix samples.

Step 4

- Immediately after inverting the EDTA tubes, place them on wet ice until centrifugation begins.
- Within 2 hours of blood draw, centrifuge samples at 2000 x g at 4°C for 10 minutes.

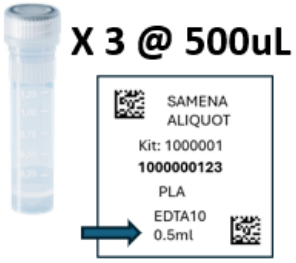
Step 5



x3

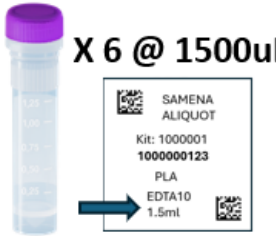
- Using a clean pipette, transfer plasma from 10 mL EDTA tubes into the 50 mL conical tube.
- Mix the plasma by gently inverting the conical tube 3 times.

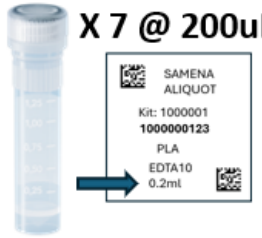
Step 6



- Using a clean pipette, aliquot 0.5mL of plasma from collection tube to pre-labeled clear-cap 0.5mL plasma cryovials.
- **Store plasma aliquots upright at -80°C at Rutgers site.**

Step 7





- Aliquot 1.5mL of plasma from collection tube to pre-labeled purple-cap 2.0mL plasma cryovial.
- Aliquot 0.2mL of plasma from collection tube to pre-labeled clear-cap 0.5mL plasma cryovials.
- **Store plasma aliquots upright at -80°C until shipment to NCRAD.**

Step 8

x3

- Using a clean pipette, transfer each buffy coat layer from EDTA tubes to pre-labeled blue-cap buffy coat cryovials (do not pool buffy coats).
- Store buffy coat aliquots upright at -80°C until shipment to NCRAD.

Important Note: Ensure all tubes are not expired prior to collection and processing of samples.

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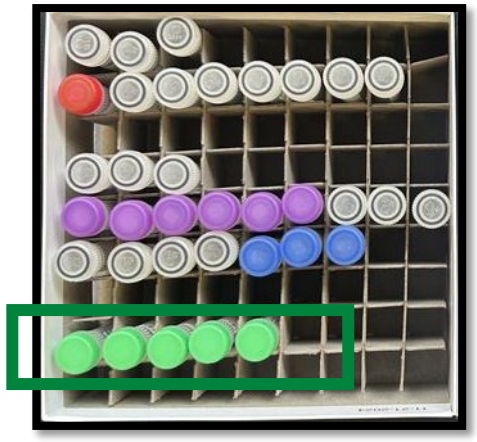
Whole Blood Collection



81-cell cryobox with 0.5 mL and 2.0 mL cryovials

1 x EDTA (Purple) Blood Collection Tube (6 mL)

- Create up to (5) 1.0 mL whole blood aliquots in green-cap cryovials

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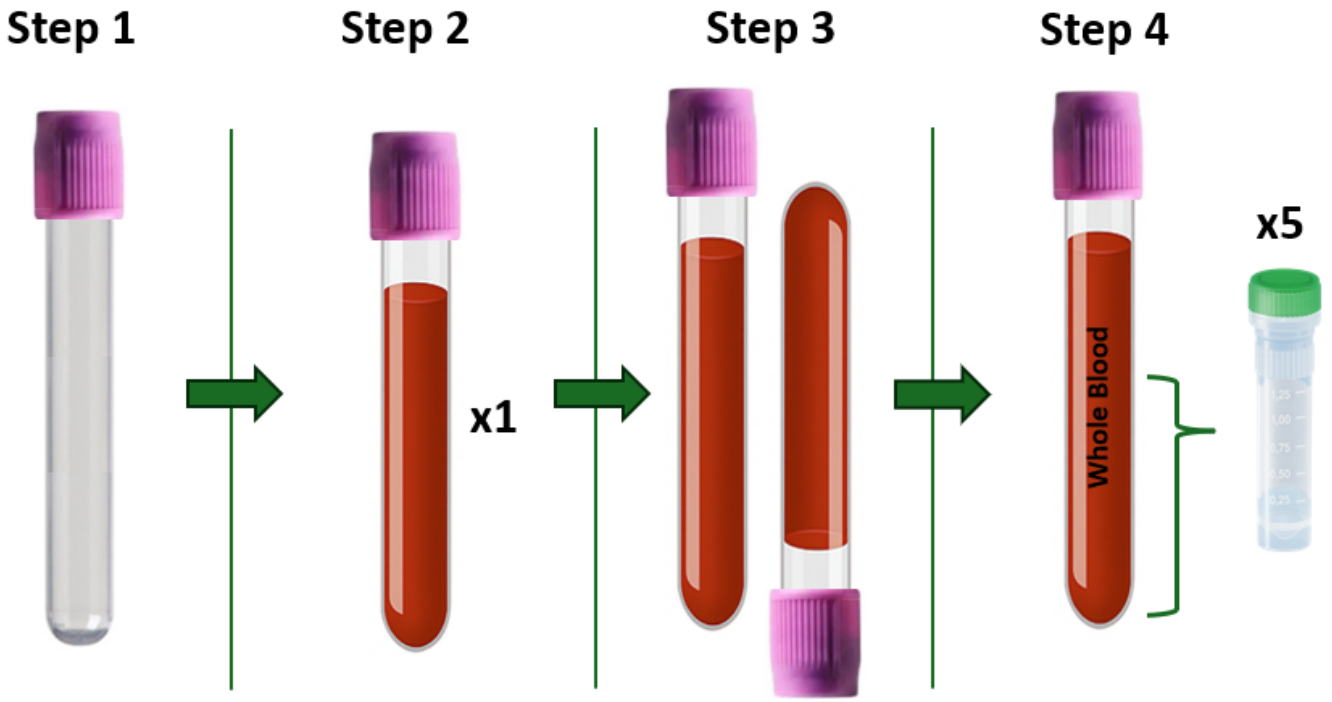
EDTA (Purple-Top) Blood Collection Tube (6 mL) for Whole Blood x 1



- Store tube at room temperature.
- Label Collection Tube and Cryovials with pre-printed labels prior to blood draw.

- Collect blood in (1) 6 mL Purple-Top tube, allowing blood to flow for 10 seconds and ensure blood flow has stopped.

- Immediately after blood draw, invert tube 8-10 times to mix samples.

- Using a clean pipette, aliquot 1.0 mL of whole blood to (5) green-cap cryovials.
- Store whole blood aliquots upright at -80°C until shipment to NCRAD.

Important Note: Ensure all tubes are not expired prior to collection and processing of samples.

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Incomplete or Difficult Blood Draws and Redraws

National Centralized Repository for
Alzheimer's Disease and Related Dementias

Situations may arise that prevent study coordinators from obtaining the total amount scheduled for biofluids. In these situations, please follow the below steps:

1. If the biofluids at a scheduled visit **are partially** collected:
    a. Attempt to process and submit any samples that were able to be collected during the visit.
    b. Document difficulties on the 'Biological Sample and Shipment Notification Form' prior to submission to NCRAD.
        i. Indicate blood draw difficulties at the bottom of the 'Biological Sample and Shipment Notification Form' within the "Notes" section.
        ii. Complete the 'Biological Sample and Shipment Notification Form' with tube volume approximations and number of aliquots created.
    c. Contact a NCRAD coordinator and alert them of the challenging blood draw.

2. If the biofluids at a scheduled visit **are not** collected:
    a. Inform your team and contact the NCRAD coordinator to alert them of the challenging blood draw or circumstances as to why biofluids were not collected.
    b. Schedule participant for a re-draw visit as quickly as possible.

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Packaging Sample Shipments

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National Centralized Repository for
Alzheimer's Disease and Related Dementias

Sample Shipment Summary

Sample Type	Tube Type / Aliquot Volume	# Aliquots Shipped to NCRAD	# Aliquots Stored at Rutgers	Ship/Store
Whole blood for isolation of serum	Serum Determination (Red-Top) Collection Tube (10 mL)	N/A	N/A	N/A
	0.5 mL serum aliquot per 0.5 mL cryovial	0	3	Frozen
	0.2 mL serum aliquot per 0.5 mL cryovial	7	0	
	1.5 mL serum aliquot per 2.0 mL cryovial	1	0	
Whole blood for isolation of plasma & buffy coat (for DNA extraction)	EDTA (Purple-Top) Blood Collection Tube (10 mL)	N/A	N/A	N/A
	0.5 mL plasma aliquot per 0.5 mL cryovial	0	3	Frozen
	0.2 mL plasma aliquot per 0.5 mL cryovial	7	0	
	1.5 mL plasma aliquot per 2.0 mL cryovial	6	0	
	~1.0 mL buffy coat aliquot per 2.0 mL cryovial	3	0	
Whole Blood	EDTA (Purple-Top) Blood Collection Tube (6 mL)	N/A	N/A	N/A
	1.0 mL whole blood aliquot per 2.0 mL cryovial	5	0	Frozen

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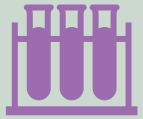
Frozen Shipment Packaging

All samples shipped frozen to NCRAD **Monday-Wednesday ONLY**

On the day of scheduled UPS pick-up, begin packaging specimens on dry ice **at least 1 hour before UPS arrives**. Hold samples in -80°C freezer until it is time to package the specimens on dry ice for shipment to NCRAD.

Include copy of Blood Sample Shipment and Notification Form



Batch shipping should be performed every (3) three months or when specimens from 4 participants accumulate, whichever is sooner.

Large Frozen Shipper:

** 45 lbs of dry ice pellets

AND

Fits up to 4 x 81-slot cryoboxes

Small Frozen Shipper:

**10 lbs of dry ice pellets

AND

Fits up to 1 x 81-slot cryoboxes

- The most important issue for shipping is to maintain the temperature of the samples. The frozen samples must never thaw; not even the outside of the tubes should be allowed to defrost. This is best accomplished by making sure the Styrofoam container is filled completely with pelleted dry ice.

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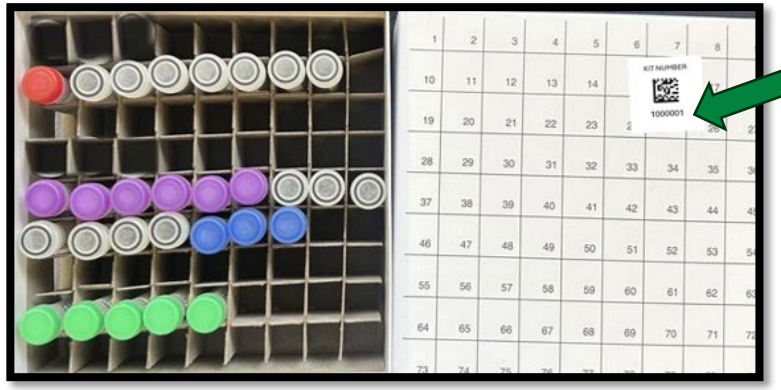
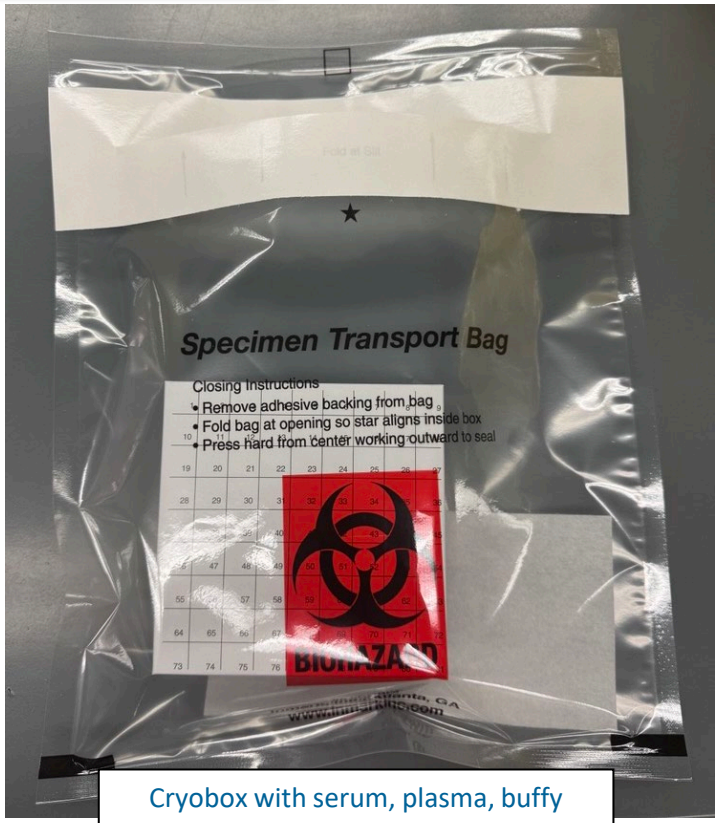
Frozen Shipment Packaging

- Place all frozen labeled aliquots of serum, plasma, buffy coat, and whole blood from the same participant in the 81-slot cryobox.
- Place cryobox from the same subject into the large biohazard bag with absorbent sheet.
- Seal biohazard bag according to the instructions on the bag.



Place kit number label on lid of 81-slot cryobox



Cryobox with serum, plasma, buffy coat, and whole blood aliquots in biohazard bag with absorbent sheet.

NCRAD

Frozen Shipment Packaging

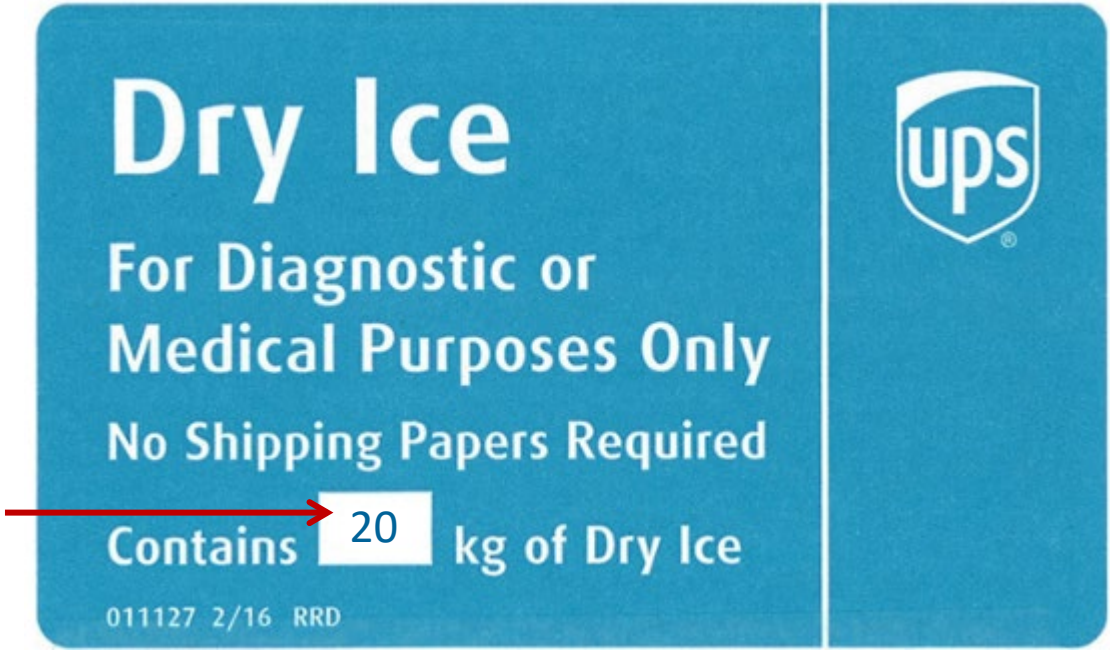
- Place 2-3 inches of dry ice in the bottom of the Styrofoam shipping container, then insert the cryoboxes laying upright.
- Fully cover the cryoboxes with about 2 inches of dry ice in the provided shipper.
- Each Styrofoam shipper must contain about 45 lbs (20 kg) of dry ice.
- Fill shipper to the top with dry ice!

NCRAD

Frozen Shipping – Dry Ice Requirements

Dry Ice label should not be covered with other stickers and must be completed or the shipping carrier will reject/return your package!

Net weight of dry ice in **kg**



NCRAD

Creating Airbills/Scheduling Pickups

National Centralized Repository for
Alzheimer's Disease and Related Dementias

UPS ShipExec™ Thin Client Website

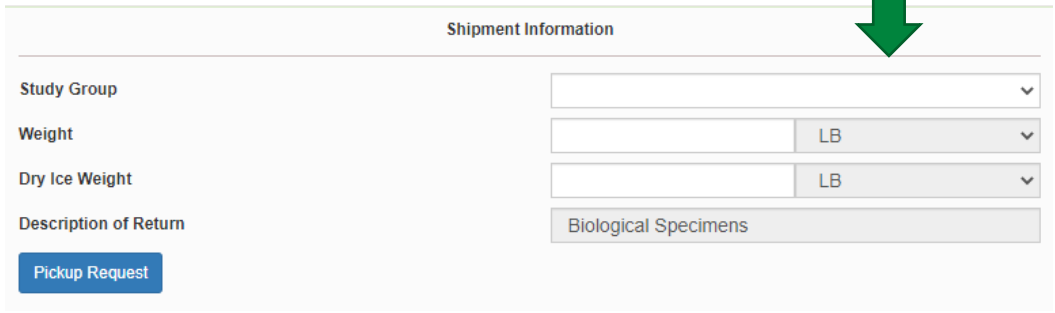
Log into the ShipExec Thin Client: https://kits.iu.edu/UPS

Click on the “Shipping” dropdown and click on “Shipping and Rating”

NCRAD

Finding Your Contact Information

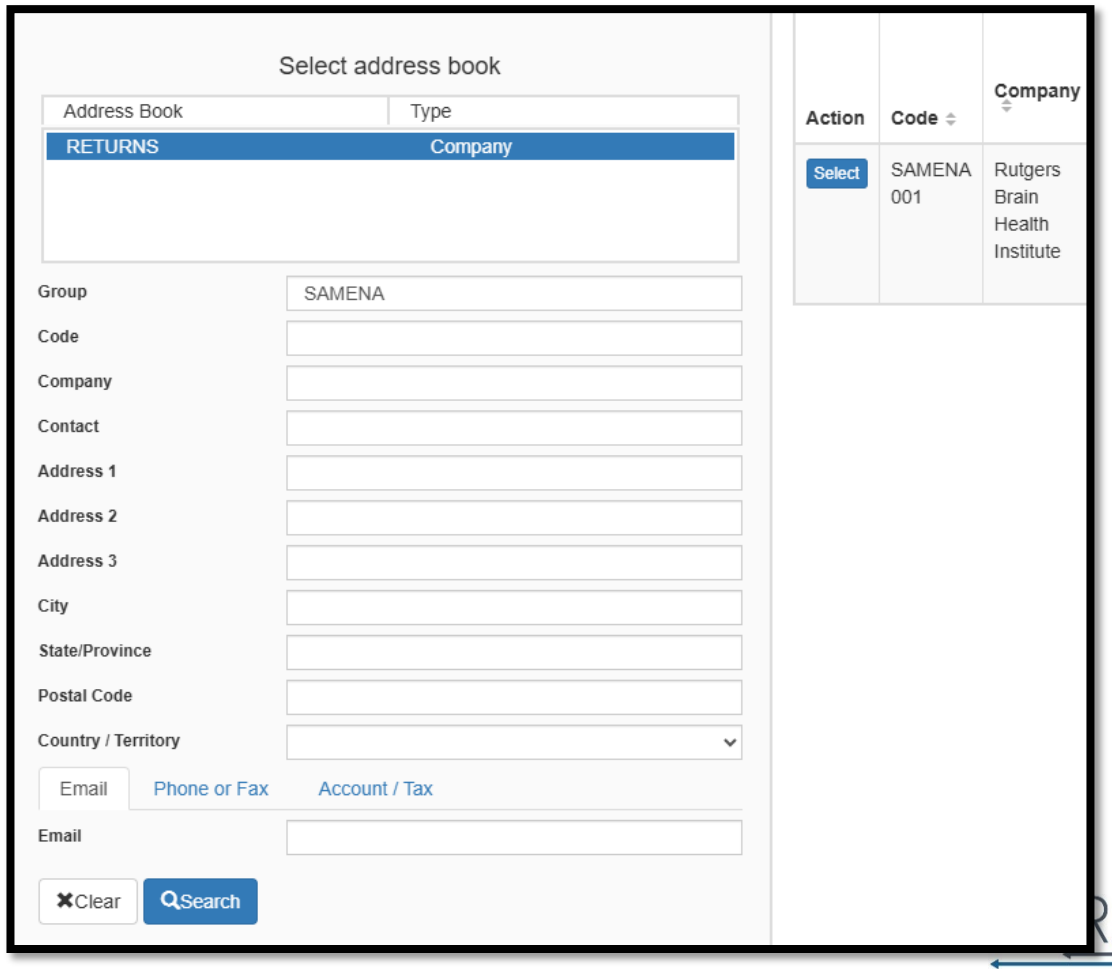
- On the right side of the screen, choose the name of your study from the “Study Group” drop down menu
  - *This step must be done 1st*



- On the left side of the screen, Click on the magnifying glass icon

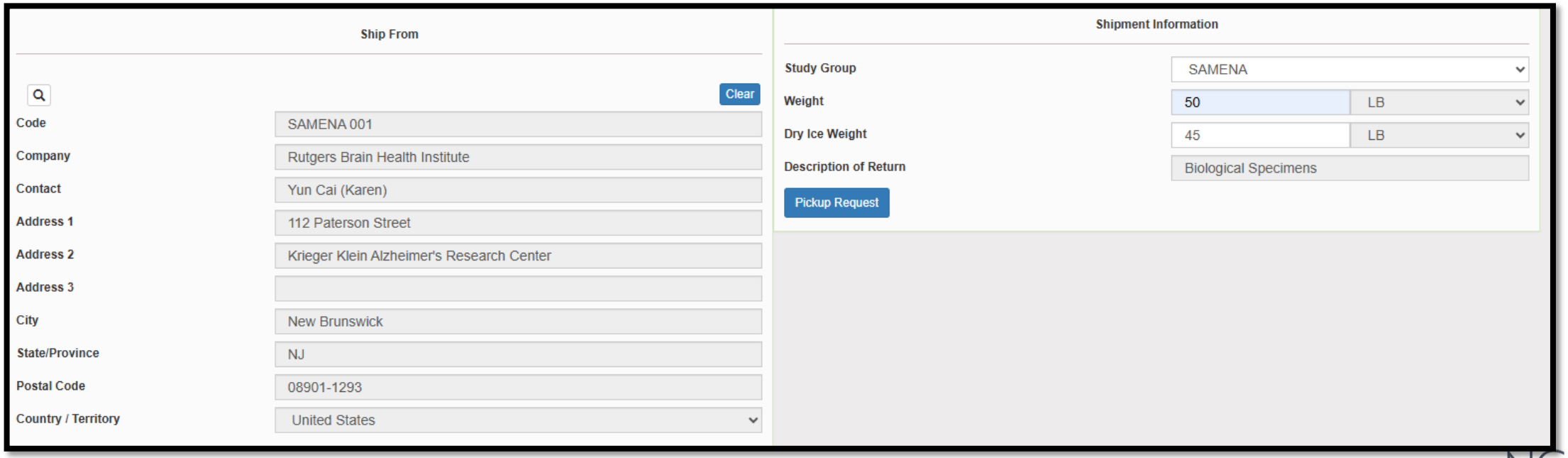
Finding Your Contact Information

- On the right side of the screen, a list of all the site addresses within the study you selected should populate
- User can filter the search for their address further by filling in the “Company”, “Contact”, or “Address 1” fields
- Hit “Search” when ready.
- Once you have found your site address, click on the “Select” button to the left of the address
- If any information needs to be updated, please reach out to the NCRAD Coordinator of your study



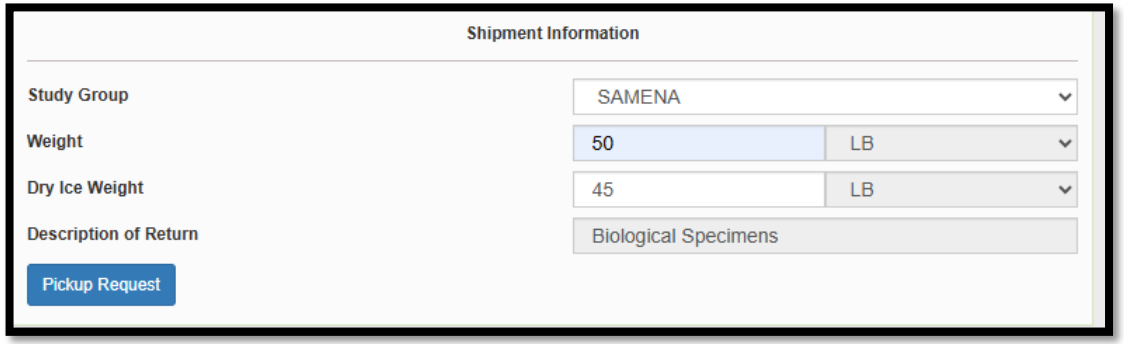
Verify Information

- Please verify that both the shipping information AND study reference are correct for this shipment



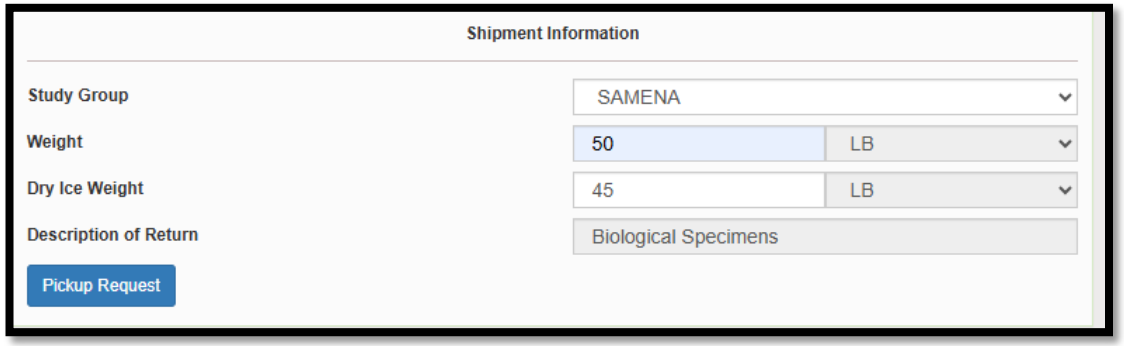
Entering Shipment Information

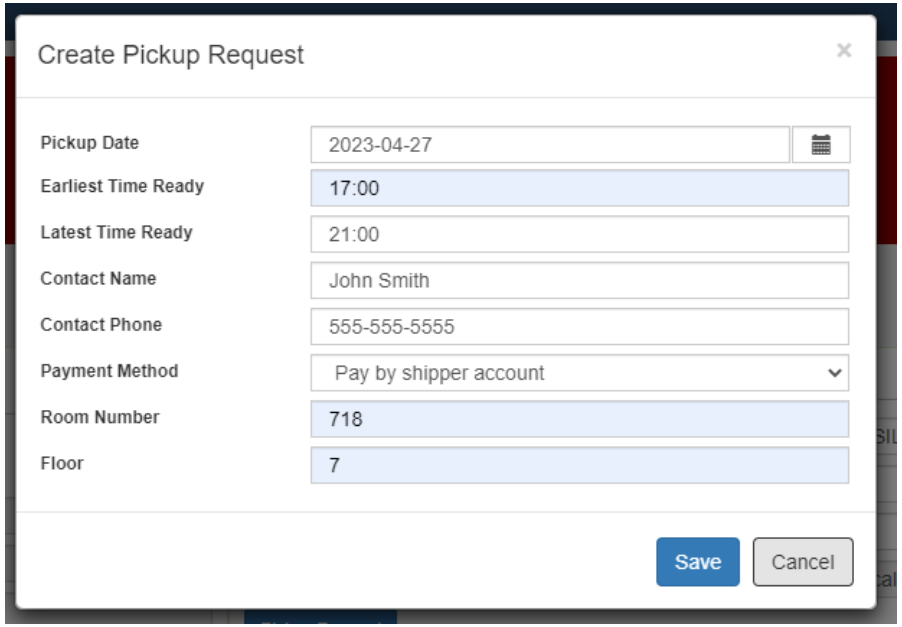
- Frozen shipments
  - Enter the total weight of your package in the “Weight” field
  - Enter the dry ice weight in the “Dry Ice Weight” field
    - The “Dry Ice Weight” field cannot be higher than the “Weight” field (will receive an error message)



Need to request UPS Pickup?

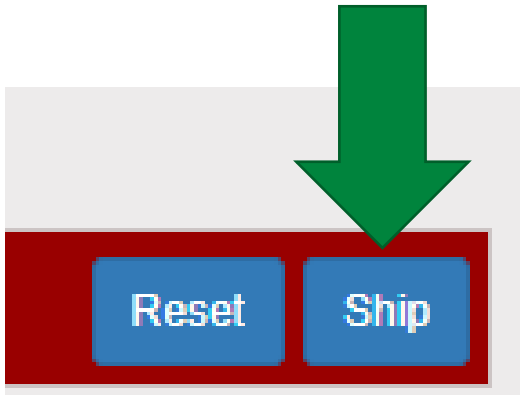
- Click on the “Pickup Request” button
- Fill out all fields for the pickup request
- Enter in the “Earliest Time Ready” and “Latest Time Ready” in 24-hour format
  - Users must schedule pickup minimum 1 hour before “Earliest Time Ready”
- Choose a name and number that is the best to contact if the UPS driver has questions related to picking up your package
- Entering the Room Number and Floor will help the UPS driver locate your package
  - Room number field is free text
  - Floor field is numerical only
- Hit “Save” when done





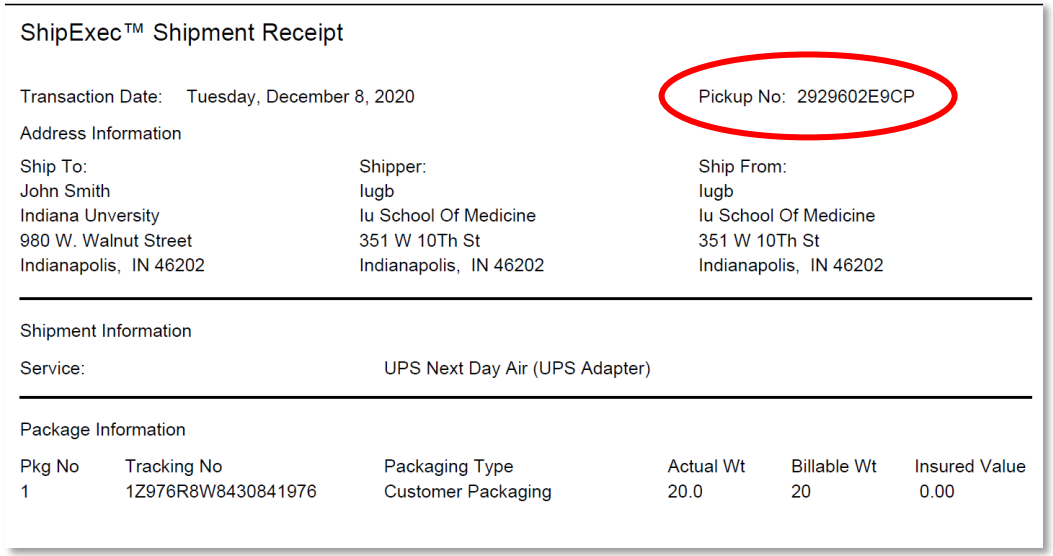
Shipping Packages

- If all fields in “Ship From” and “Shipment Information” fields are completed, and pickup request is completed (if necessary), click Ship in the bottom right corner of the page



Accessing Airbill

Shipment Receipt



ShipExec™ Shipment Receipt

Transaction Date: Tuesday, December 8, 2020

Pickup No: 2929602E9CP

Address Information

Ship To:	Shipper:	Ship From:
John Smith	Iugb	Iu School Of Medicine
Indiana Unversity	Iu School Of Medicine	351 W 10Th St
980 W. Walnut Street	351 W 10Th St	Indianapolis, IN 46202
Indianapolis, IN 46202	Indianapolis, IN 46202	

Shipment Information

Service: UPS Next Day Air (UPS Adapter)

Package Information

Pkg No	Tracking No	Packaging Type	Actual Wt	Billable Wt	Insured Value
1	1Z976R8W8430841976	Customer Packaging	20.0	20	0.00

- Check on progress of pickup by going to UPS.com, click on the Shipping, select Schedule a Pickup, and look on the right side of screen to click on “Pickup Request Status”. Enter in the Pickup No. listed on receipt into PRN field and submit

Airbill

JOHN SMITH
317-555-1234
INDIANA UNIVERSITY
980 W. WALNUT STREET
INDIANAPOLIS IN 46202

20 LBS

1 OF 1

RS

SHIP TO:
IUGB
317-278-6158
IU SCHOOL OF MEDICINE
TK 217
351 W 10TH ST
INDIANAPOLIS IN 46202

IN 461 9-01

UPS NEXT DAY AIR 1

TRACKING #: 1Z 976 R8W 84 3084 1976

SAMPLE

BILLING: P/P
DESC: Biological Specimens
RETURN SERVICE
UN1845, DRY ICE, CLASS 9, 1 x 4.5 KG
AUDIT REQUIRED

Reference No.1: 6683830

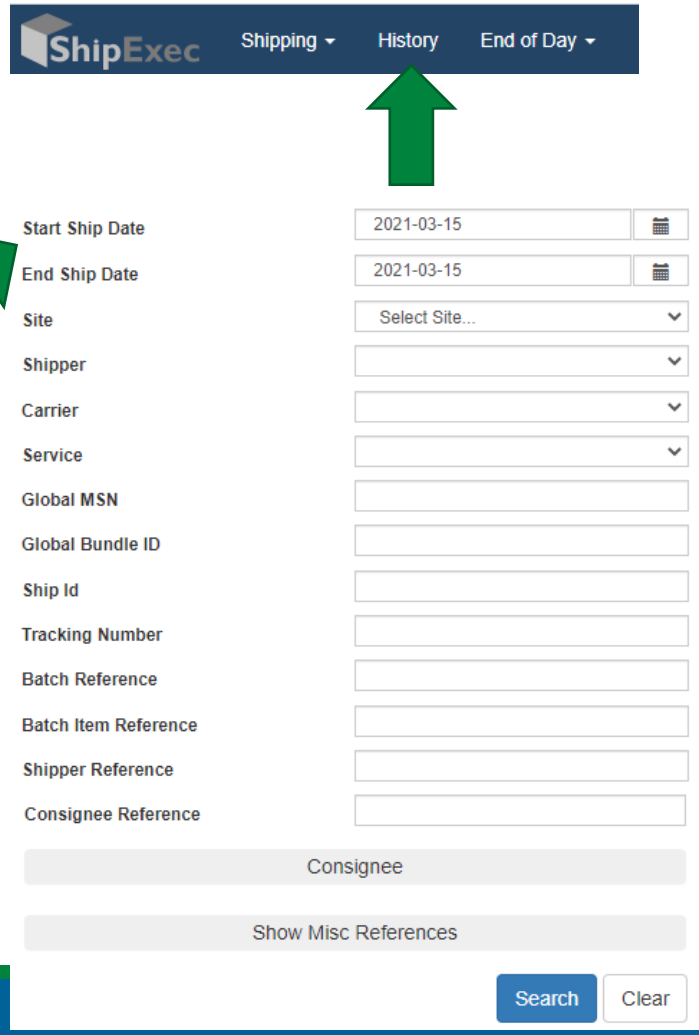
NCRAD

Accessing Airbill

- Print out the UPS air waybill
- Fold the UPS air waybill and slide it inside the plastic UPS sleeve (NCRAD will provide these in kit requests)
- Peel the back off the plastic UPS sleeve and stick the sleeve to your package, making sure it is laying as flat as possible along the surface of the package.

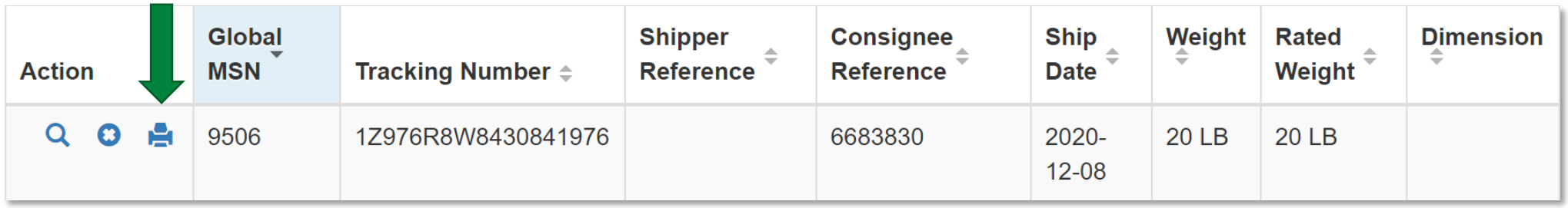
Reprint Airbills/Voiding Shipments

- To reprint airbill or void a shipment, click “History” at the top of the ShipExec Thin Client portal
- If your shipment doesn’t automatically pop up, enter in the date of shipment and then click “Search”



Reprint Airbill

- Click the print icon to reprint airbill



Action	Global MSN	Tracking Number	Shipper Reference	Consignee Reference	Ship Date	Weight	Rated Weight	Dimension
	9506	1Z976R8W8430841976		6683830	2020-12-08	20 LB	20 LB	

Void Shipment

- To void a shipment, click on the "X" symbol

Action	Global MSN	Tracking Number	Shipper Reference	Consignee Reference	Ship Date	Weight	Rated Weight	Dimension
	9506	1Z976R8W8430841976		6683830	2020-12-08	20 LB	20 LB	

Creating a ShipExec Account

- Please email the NCRAD Coordinator if you do not have a ShipExec Account:
  - Zoë McManus - zdpotter@iu.edu
- Once your ShipExec account is created, you will get an email from noreply@shipexec.com. This email will have a temporary password in the body of the email. Login using this password.
- You will then be prompted to reset your password.
- *Look in your junk folder in case the email is being incorrectly flagged.*

NCRAD

Blood Sample and Shipment Notification Form

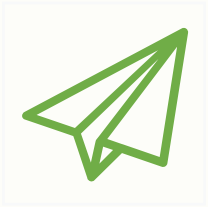
NCRAD

National Centralized Repository for
Alzheimer's Disease and Related Dementias

Blood Sample and Shipment Notification Form

A copy of the sample form *must* be emailed to NCRAD prior to the date of sample arrival.

Please include sample forms in all shipments of frozen samples.



Email: alzstudy@iu.edu

It is critical that the tube be centrifuged at the appropriate speed to ensure proper serum and plasma separation. Use Rate of Centrifugation Worksheet to calculate RPM.

Appendix A: Rate of Centrifuge Worksheet

Please complete and return this form by email to the NCRAD Project Manager if you have any questions regarding sample processing. The correct RPM will be sent back to you. You can also use online calculators like this one - https://www.sigmaaldrich.com/CA/en/support/calculators-and-apps/g-force-calculator

For this, you will need:
RPM
Radius of rotor – Distance from center to middle of bucket

Submitter Information

Name: Site:
Submitter e-mail:

Centrifuge Information
Please answer the following questions about your centrifuge.

Centrifuge Type
Fixed Angle Rotor: ☐ Swing Bucket Rotor: ☐

Radius of Rotation (mm):

Determine the centrifuge's radius of rotation (in mm) by measuring distance from the center of the centrifuge spindle to the bottom of the device when inserted into the rotor (if measuring a swing bucket rotor, measure to the middle of the bucket).

Calculating RPM from G-Force:

$$RCF = \left(\frac{RPM}{1{,}000}\right)^2 \times r \times 1.118 \quad \Rightarrow \quad RPM = \sqrt{\frac{RCF}{r \times 1.118}} \times 1{,}000$$

RCF = Relative Centrifugal Force (G-Force)
RPM = Rotational Speed (revolutions per minute)
R= Centrifugal radius in mm = distance from the center of the turning axis to the bottom of centrifuge

Comments:

Please send this form to NCRAD Study Coordinator
alzstudy@iu.edu

Appendix B: Biological Sample and Shipment Notification Form

NCRAD

Appendix B

Participant ID - SAMARTH_____

Blood Sample and Shipment Notification Form

Please email this form prior to the date of shipment.

To: Kelley Faber Email: alzstudy@iu.edu Phone: 1-800-526-2839	
General Information: _____	**UPS tracking #:** _____
From: _____	**Date:** _____
Phone: _____	**Email:** _____
Study: SAMENA Sex: M F Year of Birth: _____ Visit (circle number): BL Y1 Y2	Kit Label
Blood Collection:	
1.Date Drawn: _____ [MMDDYY]	2.Time of Draw: _____ [HHMM]
3.Last date subject ate: _____ [MMDDYY]	4.Last time subject ate: _____ [HHMM]

Blood Processing:

Serum (Red-Top) Tube (10 mL) x 1		Plasma & Buffy Coat (Purple-Top) Tubes (10 mL) x 3	
Time spin started:	_____ [HHMM]	Time spin started:	_____ [HHMM]
Duration of centrifuge:	_____ Minutes	Duration of centrifuge:	_____ Minutes
Temp of Centrifuge: _____ °C		Temp of Centrifuge: _____ °C	
Rate of centrifuge: _____ x g		Rate of centrifuge: _____ x g	
Time aliquoted:	_____ [HHMM]	Time aliquoted:	_____ [HHMM]
Number of 0.5 mL serum aliquots created (clear-cap) ***(Store at Rutgers site):***	_____	Number of 0.5 mL plasma aliquots created (clear-cap) ***(Store at Rutgers site):***	_____
Number of 1.5 mL serum aliquots created (red-cap):	_____	Number of 1.5 mL plasma aliquots created (purple-cap):	_____
Number of 0.2 mL serum aliquots created (clear-cap):	_____	Number of 0.2 mL plasma aliquots created (clear-cap):	_____
If applicable, volume of residual serum aliquot (less than 0.2 mL in clear cap):	_____ mL	If applicable, volume of residual plasma aliquot (less than 0.2 mL in clear-cap):	_____ mL
If applicable, specimen number of residual serum aliquot **(last four digits):**	_ _ _ _	If applicable, specimen number of residual plasma aliquot **(last four digits):**	_ _ _ _
Original blood volume drawn (1 x 10 mL Serum collection tube):	_____ mL	Original blood volume drawn (3 x 10 mL EDTA collection tube):	EDTA #1: _____ mL EDTA #2: _____ mL EDTA #3: _____ mL
Time aliquots placed in freezer:	_____ [HHMM]	Buffy coat aliquot specimen numbers **(last four digits):**	Buffy Coat #1: _ _ _ _ Buffy Coat #2: _ _ _ _ Buffy Coat #3: _ _ _ _
Storage temperature in freezer:	_____ °C		
Whole Blood (Purple-Top) Tube (6 mL) x 1		Buffy coat volumes (~1.0 mL in blue-cap):	Buffy Coat #1: _____ mL Buffy Coat #2: _____ mL Buffy Coat #3: _____ mL
Time aliquoted:	_____ [HHMM]		
Number of 1.0 mL whole blood aliquots created (green-cap):	_____	Time aliquots placed in freezer:	_____ [HHMM]
Original blood volume drawn (1 x 6 mL EDTA collection tube):	_____ mL	Storage temperature in freezer:	_____ °C
Time aliquots placed in freezer:	_____ [HHMM]		
Storage temperature in freezer:	_____ °C		

Notes: _____

E.g., hemolysis, blood is coagulated, issues with blood collection - please specify, etc.

Version (7.2025)

Place kit number label on the sample form

Complete this form during the participant visit to ensure it is as complete and accurate as possible.

Noncomformance Issues

National Centralized Repository for
Alzheimer's Disease and Related Dementias

Nonconformance Issues

Sample aliquots and collection tubes frozen at an angle/inverted

Recommendation:
Place aliquots in cryoboxes/tube rack in freezer *upright* until shipment

Fields left blank on Blood Sample and Shipment Notification Form

Last time subject ate often left blank/unknown

Incorrect data reported on Sample and Shipment Notification Forms

Recommendation: Complete Sample Notification forms during the participant study visit as samples are processed.

NCRAD

Nonconformance Issues

All frozen samples for a participant not sent within one shipment box (plasma and buffy coat aliquots should be kept together)

Aliquots arriving to NCRAD without labels

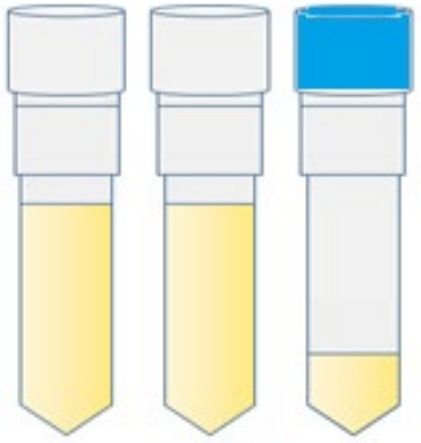
Sample forms not scanned to NCRAD the day before shipment

Recommendation:
Ship Samples to NCRAD utilizing the Notification Form, by PTID. Do not throw away labels until samples are packed and shipped.

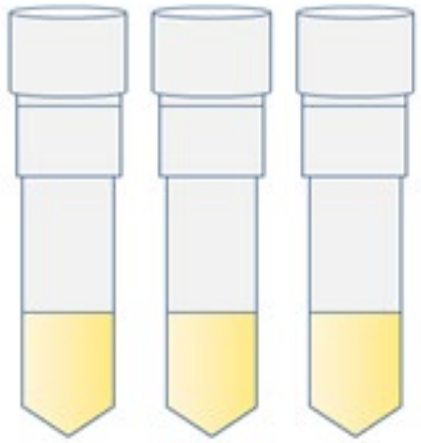
Nonconformance Issues

Multiple low volume aliquots

Recommendation:
Lay out cryovials in a row and aliquot in order until sample is depleted



YES



NO

NCRAD Website

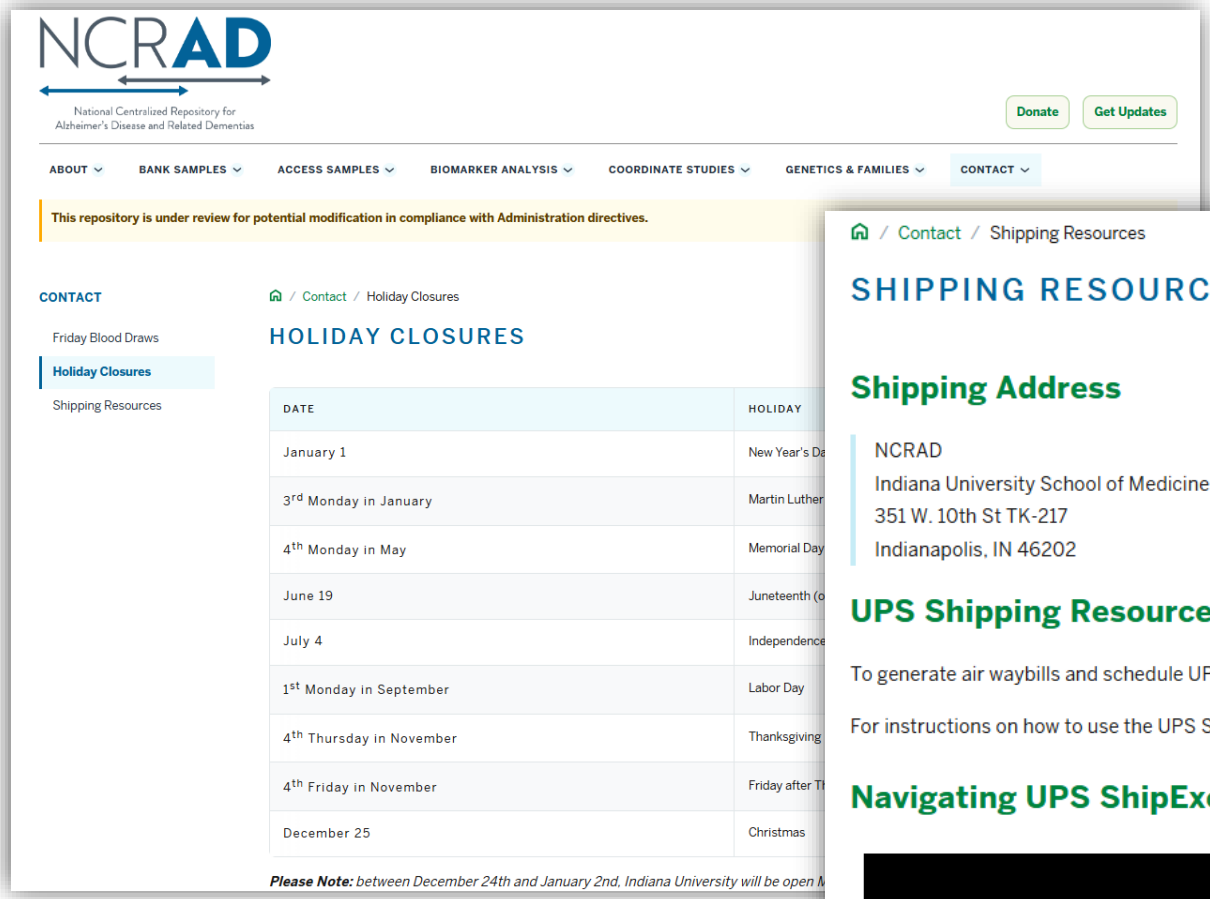
National Centralized Repository for
Alzheimer's Disease and Related Dementias

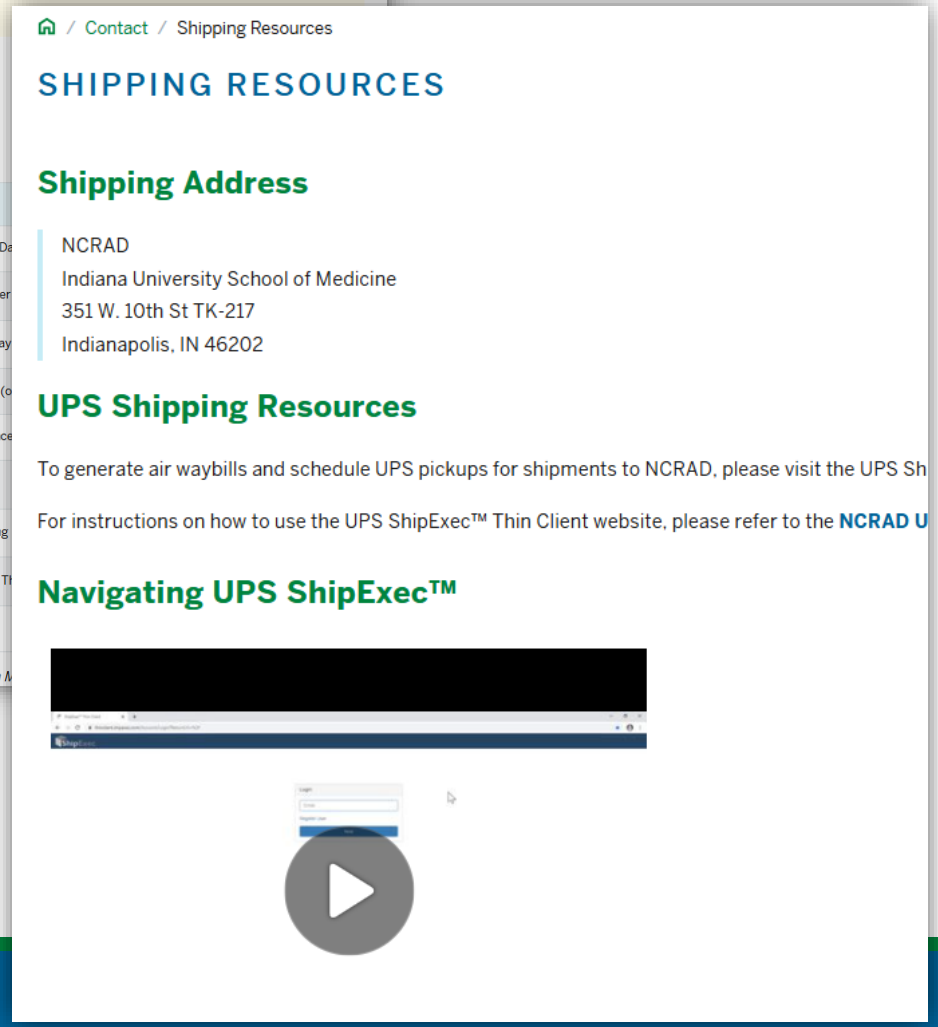
NCRAD Website: Helpful Pages

NCRAD - SAMENA Active Study Page

NCRAD - Holiday Closures

NCRAD - Shipping Address





Questions?

Zoë McManus, BA, CCRP, Study Coordinator

Phone: (317) 278-9086

Email: zdpotter@iu.edu

General NCRAD Contact Information

Phone: 1-800-526-2839

Alt. Phone: (317)-278-8413

Email: alzstudy@iu.edu

Website: www.ncrad.org

SAMENA Study Specific Webpage: NCRAD - SAMENA Active Study Page