

Request for Tissue Sample Access

Cardiovascular Registry

The Cardiovascular Registry is committed to supporting cardiovascular research. Every effort will be made to provide researchers with requested tissue samples following the demonstration of ethics approval by the applicable UBC Research Ethics Board. After internal Registry review of the request for its scientific justification, all bio-specimens must be considered precious, and as such, both ethics and scientific reviews are necessary.

Tissue Sample Request Approval

Allow a minimum of seven days between the tissue sample request and approval process.

Please submit the following to Cardiovascular Registry Coordinator:

- Completed "Request for Tissue Sample Access" form (see next page)
- Ethics Certificate
- Study Protocol or Short Summary

Once the request is reviewed and approved, the form will be signed off by Registry Coordinator. A copy of the approval will be forwarded to the researcher. Follow-up feedback on publications, grants and awards or other advancements would be appreciated.

Return completed form to: Cardiovascular Registry Coordinator, Rm. M201 Email: Gurpreet.Singhera@hli.ubc.ca Phone: 604-682-2344 ext 63544 Fax: 604-806-8351



REQUEST FOR CARDIOVASCULAR TISSUE ACCESS

Date:	e: Principal Investigator:				
Researcher:		F	Phone:	Email:	
Study Title:					
Sponsor Type:	□ Pu	blic Fundi	ing / Grant	☐ Private Funding	
Sponsor Name: _				Ethics #:	
Type of Tissue Re	equired (ch	eck all tha	at apply):		
Paraffin Blocks □	Slides □	OCT 🗖	Flash Frozen □	RNA Later Other:	
Description/Criter	ia:				
CR/CRS #s (if kno	own):				
Tissue Return Date:			Sig	nature:	
Below is for Registry Us	e Only:				
Request Approv					
Registry Coordi	nator Signa	iture:			
Completion date):				

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