

NORTHWESTERN COGNITIVE NEUROLOGY & ALZHEIMER'S DISEASE CENTER (CNADC)
Eileen H. Bigio, MD, Neuropathology Core Director
320 E. Superior St., Searle 11-544, Chicago, Illinois 60611
Phone: (312) 926-9543 Fax: 312-926-9830

Collaborative Research Request – CNADC Neuropathology Core

Included in this packet:

- 1) Northwestern ADC policy for authorship and acknowledgements. All requirements must be met so please make sure that you can be in full compliance with our policy prior to submitting your request.**
- 2) Form to be completed by the PI (faculty member). A students or postdoc can be the study lead but the study will be listed for our records under the supervising PI.
- 3) Statement of agreement to be signed by the PI and returned to us.
- 4) Sample Tracking Form we require collaborators to complete annually so that we can track biospecimen utilization and the research that has developed from the use of our specimens. This is a requirement for our own NIA progress reports.

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Phone: (312) 926-9543 Fax: 312-926-9830

Collaborative Research Request – CNADC Neuropathology Core

NOTE: Please submit completed form to:

Changiz Geula, Ph.D., Director, Tissue Distribution, Northwestern University CNADC, 320 East Superior Street, Searle 11-465, Chicago, IL 60611; phone: 312-503-7210; fax: 312-908-8789; email: c-geula@northwestern.edu. Your request will be considered by the ADC Executive Committee and you will be notified of the committee's action by Dr. Geula.

Title of Study:

Principal Investigator Name:

Telephone:

PI Title:

Name of Institution:

NADC Investigator/Phone/Fax/e-mail:

Other Investigators and Institutions:

Study Dates: Start _____ End _____

Funding Agency:

Brief Abstract describing the project; **be specific about what the tissue/specimen(s) will be used for** (no more than 200 words):

Tissue needed (brain region & type):

(amount):

Circle one: PARAFORMALDEHYDE-FIXED

FROZEN

Number of samples needed:

Is this study likely to lead to publication? YES NO

Is this study likely to lead to the manufacture of a new chemical or procedure? YES NO

Circle types of information that will be required from the Clinical Core Database:

Demographics Neurological Exam Neuropsychological Scores APOE Status

Medical History Risk Factors Caregiver Data Other (specify)

NADC Executive Committee Decision (to be signed by Eileen H. Bigio, MD, Neuropathology Core Director)

Approved

Denied

Eileen H Bigio MD

Date

NORTHWESTERN COGNITIVE NEUROLOGY & ALZHEIMER'S DISEASE CENTER (CNADC)
Neuropathology Core

**POLICY FOR AUTHORSHIP, ACKNOWLEDGEMENT, AND DATA SHARING
ON COLLABORATIVE PROJECTS**

The work that goes into establishing a research-quality diagnosis, and maintaining a resource such as ours, is considerable and we provide the highest level of quality control to support research investigators. The following is our policy regarding collaboration and access to our resources:

1. A copy of any manuscripts and publishable abstracts must be submitted for review by our center Executive Committee prior to submission so that we may determine what Center authorship and attribution is appropriate. We will respond within a week of receipt of the manuscript.

2. We require that you acknowledge the Neuropathology Core in all publications, abstracts and presentations as follows (NIH requires that the grant number be listed):

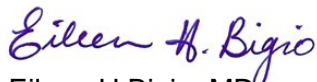
This study was supported in part by an Alzheimer's Disease Core Center grant (P30 AG013854) from the National Institute on Aging to Northwestern University, Chicago Illinois. We gratefully acknowledge the assistance of the Neuropathology Core.

3. We require that you complete an annual progress report on your project (sample attached), including a list of all abstracts, publications, and grants that have emanated from the use of Neuropathology Core resources.

4. We request that you provide us with the data from your study on our participants so that we may supplement existing data with relevant information obtained on our cohort. For example, if you are performing immunostains, we will ask for the results of those immunostains on our tissues; if you are performing genetic analysis we will ask for the genotypes or other results.

We have been very successful in working with collaborators since our inception in 1996. We wish to continue providing valuable resources in a way that strengthens collaboration and also allows us to benefit from the combination of resources. Please do not hesitate to call me (312-926-9543) if you have any questions. I and the Northwestern CNADC look forward to working with you.

Sincerely,



Eileen H Bigio, MD
Professor of Pathology
Neuropathology Medical Director
Northwestern CNADC Neuropathology Core Leader
Northwestern University Feinberg School of Medicine
710 N Fairbanks Ct, Olson 2-458
Chicago, IL 60611
phone: 312-926-9543
fax: 312-926-9830
email: e-bigio@northwestern.edu

Please read and sign the following statement:

I understand that human tissues may harbor disease-causing pathogens (e.g., viral hepatitis, HIV) that may remain undetected even after routine pathological evaluation, and that all human tissues must therefore be considered biohazardous and potentially dangerous. As Principal Investigator on this project, I acknowledge full responsibility to train any of my laboratory staff who might be exposed to this tissue in its proper handling, use, and disposal, and will provide documentation of such training to the NADC upon request. Further, I will not transfer tissue provided to me through the NADC to other investigators without the express permission of the NADC after completion of a Tissue Request Form. I will assume responsibility for any special shipping charges incurred in providing these specimens (e.g., Federal Express). I agree to complete annual requests for progress.

Principal Investigator

Date

Please send documentation of the following for this project:

Copy of IRB letter stating that the project is not under IRB purview (see below) OR signed MTA agreement (for industry).

Please sign and return a copy of this tissue request

IRB

IRBs in most cases will provide a letter to project PIs stating that the IRB does not require applications for approval or exemption for projects using de-identified biospecimens from the CNADC Brain Bank. PIs need to send the following information to the IRB:

- 1) PI name, department and address
- 2) Short title and summary of what is being proposed

This can be done by email.

NORTHWESTERN ALZHEIMER'S DISEASE CENTER (NADC)

Eileen H. Bigio, MD, Neuropathology Core Leader

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Brain / Tissue Bank Distribution Annual Tracking Report

We are enthusiastic about collaborating with you on your research. To meet the needs of our collaborators and align them with our resources, we request each March that investigators utilizing tissue from the NADC Neuropathology Core complete this form to update us on the project's last year's progress, particularly any resulting publications or grants, and other outcomes of your project(s). Please provide the following information and return by March 15 as an email attachment to: e-bigio@northwestern.edu **and in addition** as a hard copy (signed) along with reprints / preprints / manuscripts by email, campus mail, or regular mail to address below.

Title of Study:

Principal Investigator Name:

Telephone:

Email:

Project Start Date:

Anticipated End Date:

1) List the cases acquired from the Tissue Bank (autopsy number), dates received, & indicate brain region(s) received.

2) Circle types of information received from the Database:

Demographics	Neurologic Exam	Neuropsychological Scores	APOE Status
Medical History	Risk Factors	Caregiver Data	Other (specify)

3) Did this study lead to any publications, presentations or published abstracts? YES NO

If Yes, then:

Please list citations below or attach a separate sheet, and send a copy of reprint, preprint, manuscript, etc by email (e-bigio@northwestern.edu) or campus / regular mail to Eileen H. Bigio M.D., Northwestern University Feinberg School of Medicine, Dept. of Pathology, 710 N. Fairbanks Ct., Olson 2-458, Chicago, IL 60611.

4) Did this study lead to any new grants? YES NO

If yes, please list PI/Project Director, Grant Title and Number, Source & Amount, Project Period, and role of the CNADC Neuropathology Core.

Notice: Where the contribution of the NADC is significant, a member of the NADC must be included as a coauthor in any publications emanating from this study. The NIH requires ALL publications related to ADC tissue use acknowledge the Northwestern Alzheimer's Disease Center (NADC) grant (AG13854) and the NADC Neuropathology Core Tissue Bank.

Please read and sign the following statement:

I will not transfer tissue or data related to the tissue provided to me through the NADC to other investigators without the express permission of the NADC after completion of a new Collaborative Request Form.

Principal Investigator

Date