

## Newcastle Brain Tissue Resource Tissue Application Form

Please complete all boxes. They will expand as you type. For diagnostics only asterisked boxes are required

### 1. Applicant\*

**i** To be completed by applicant. Please include details of PI(s) if applicant is a student and the email address of the person to whom correspondence should be addressed.

Name(s):\*  
E-mail address:\*  
Supervising PI:  
Address:  
Phone number:  
Local collaborators:

### 2. Project\*

**i** As well as the project title and outline (max 1000 words), please include a summary (100-200 words) in terms understandable by someone from a non-scientific background (for the benefit of the lay members on the approval committee). The project outline may be supplied as a separate document if you prefer and should cover scientific justification, aims and objectives and methodology.

Project Title:\*  
Lay Summary:  
  
Project Outline: \*

### 3. Details of cases requested \*

**i** Please specify numbers of cases required in each diagnostic group, and any criteria to be used in selection. Additional rows can be added as necessary. Please include controls as a separate group if these are required.

Diagnosis	Number required	Criteria
e.g DLB	12	LB Braak >5, age<75, no AD pathology

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**4. Details of Tissue requested**

**i** Please specify type of tissue requested, and area required ideally describing brain area(s) by Brodmann Area and coronal level. See Brain Maps on [nbtr.ncl.ac.uk](http://nbtr.ncl.ac.uk) ( Ref Perry 1993 "Coronal Map of Brodmann Areas in the Human Brain" in Roberts CLP(Ed) Neuropsychiatric Disorders, Wolfe , London pp1-10). Add other tissue types if required.

Fixed tissue	Brain Area(s) (or Block ID if known)	Amount (specify number & thickness of sections or weight of blocks)
Fixed sections		
Wet tissue in formalin (g)		

Frozen Tissue	Brain Area(s)	Amount (specify number & thickness of sections or weight of blocks)
Frozen tissue block (g)		
CSF (tube)		
DNA/RNA		
Frozen sections		

**5. Additional information**

**i** Please let us know of any special requirements (age, gender, pH, fixation time, PM delay etc), specialized slides etc. If you know which cases you require please enter IDs here

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### 6. Funding

**i** Please describe how this work will be funded (including name of funder and duration of funding).

### 7. Ethical approval

**i** NBTR has ethical approval which can cover approved projects using our samples in the UK. Please state whether you are requesting samples under this approval or whether you have your own (please give reference number and supply copy of approval). If you are outside the UK you will need your own approval or IRB exemption.

### 8. Additional questions for those using NBTR ethical approval

**i** In order to supply samples under NBTR approval we need to be confident that there are no ethical issues and that we are happy to cover your project. Please answer the questions below and add any extra information which may be relevant. If you have your own approval please go straight to Section 9.

What is the primary purpose of this project?(*delete as necessary*) Scientific investigation / commercial product development / educational project / other (please specify)

Has an ethics committee previously rejected this application?

Will the project take place in the UK?

Where and by whom will analysis of data and samples take place?

Has the study been peer reviewed?

Has the study been statistically reviewed?

Do you think this project raises any ethical concerns?

Are there any implications for donor families?

### 9. Acknowledgement

**i** It is very important for continued funding of the resource that NBTR is acknowledged in any resulting publications. Failure to do so may impact on future applications. A specific form of words will be supplied as part of the Material Transfer Agreement. If you have received samples in the past please enter details of publications or forward these separately

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Have you received samples from NBTR in the past?

### 10. Cost Recovery

**i** All brain banks are now required by funders to recover some of the costs of supplying samples. These will be calculated according to the MRC tariff which can be found at: <https://mrc.ukri.org/research/facilities-and-resources-for-researchers/brain-banks/tariffs-for-brain-tissue/> or in the accompanying information sheet. Please indicate how much you are expecting the sample costs to be. Charges for shipping and packaging will be advised separately and may vary.

I am expecting the charges to be approximately £

Signed:

Date

*Thank you. This application will be circulated to the NBTR committee for approval.*