

Biospecimen Pre-Analytical Variables (BPV) Candidate Consent and Enrollment Form

ER-0007-F1

VER. 03.00

Effective Date: 03/11/2013

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Form	Comp	leted	Bv:
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Date Completed:

MM/DD/YYYY

1. BPV Case ID:

Affix BPV Case ID Barcode Label

2. Kit ID's Used:

Enter ID's From Kit Components Used for This Case:

N/A

- 3. Site Protocol Number:
- 4. Tissue Bank ID:

General

5. Primary Tissue Type:

Select one:

Colon

Kidney

Lung

Ovary

6. Candidate's Date of Birth:

MM/YYYY

Gender, Race and Ethnicity

7. Candidate's Gender:

Select one:

Male

Female

Other, specify:

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8. Candidate's Race:

Select one:

American Indian or Alaska Native: a person having origins in any of the original peoples of North/South America (including Central America) and maintains tribal affiliation or community attachment

Asian: a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent; for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, Vietnam

White: a person having origins in any of the original peoples of Europe, the Middle East, or North Africa

Black or African American: a person having origins in any of the black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black" or "African American"

Native Hawaiian or other Pacific Islander: a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands

Not reported: not provided or available

Unknown: could not be determined or unsure

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9. Candidate's Ethnicity:

Select one:

Not Hispanic or Latino: a person not meeting the definition for Hispanic or Latino

Hispanic or Latino: a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish cultures or origin, regardless of race

Not reported: not provided or unavailable

Unknown: could not be determined or unsure

10. Is Candidate of Sephardic or Ashkenazi Jewish Heritage?

Select one:

No

Ashkenazi Jewish

Sephardic Jewish

Unknown

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11. Candidate's Ethnic Background (geographic):

Select all that apply:

Africa

Central African

North African

South African

Americas

African American

North American

Latin American

Caribbean

South American

Asia

Southeast Asian

South Asian

Central Asian

Chinese

Japanese

Indian

Australia/New Zealand

Australian

New Zealander

Europe

Eastern European

Icelandic

Mediterranean

Scandinavian

Western European

Intercontinental

Middle Eastern

Hispanic

Other, specify:

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Consent Information

12. Consent Form Was Signed and Dated:

Select one:

Yes

No

13. Date of Candidate's Consent:

Indicate the date on which the candidate's consent was obtained.

MM/DD/YYYY

14. Age of Candidate as of Consent Date:

years and months

15. Does the Candidate Meet the Age of Majority for Your State/Institute?

Select one:

Yes

No

16. Date of Witness of Consent:

Indicate the date on which the candidate's consent was witnessed.

17. Date of Consent Verification:

Indicate the date on which the candidate's consent was verified

18. Version of Consent Form Signed by Candidate:

Indicate the version of the consent form signed by the candidate.

19. Consent Obtained By:

Indicate the name of the person who obtained the candidate's consent.

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20. Relationship of Consent Signer to Donor:

Select one:

Self

Other, specify:

IRB Approval

21. IRB Approval Date:

MM/DD/YYYY

22. IRB Expiration Date:

MM/DD/YYYY

General Comments

23. Specify Limitations/Additions, if Any: