

Sample Request Form

Sample requests can be submitted by e-mail to <u>tarja.lamminen@tyks.fi</u>. Fill out the following to submit your request:

Contact person (name, affiliation, address):

<u>Sample type</u> (e.g. serum, plasma (from EDTA or heparin sample), urine, whole blood (EDTA), whole blood (Paxgene Blood for RNA), tissue (frozen or formalin fixed):

Sample volume ul/sample (serum, plasmas and urine samples are divided to 500 ul aliquots) :

Number of samples:

Short description of planned use of the samples. Include study plan as attachment to the request form:

By signing the form I agree the following terms:

- 1) Samples are not passed to any other persons than request person's study group members in Finland. Samples are not allowed to be delivered outside Finland.
- 2) When the results of the project that TPCC samples have been used in are published, TPCC must be mentioned in the acknowledgements, this means that active consortium members must be connected as persons e.g. in PubMed to consortium.
- 3) If samples are not used, they must be returned to TPCC study nurse (pauliina.toivonen@utu.fi).

Date and place:

Signature: