

## Precision Medicine in Nephrology Program's Biobank for the Molecular Classification of Kidney Disease

### Research Application Form

The Biobank for the Molecular Classification of Kidney Disease (BMCKD) facilitates the epidemiological, molecular, and genetic testing of kidney disease and kidney disease risk factors.

The BMCKD contains urine, blood serum, blood plasma, DNA/RNA, fixed tissue samples, digital histopathology slides from previous kidney biopsies, and de-identified patient data from individuals with various kidney diseases and healthy controls available for research projects. Our facility and staff are also equipped to provide research services including the collection, processing, and storage of samples for your prospective research project.

Projects will be subject to applicable fees, including coordinator time, any services provided, laboratory supplies and storage. If the Principal Investigator is a staff member of the Division of Nephrology at the University of Calgary, storage and other fees may be provided in-kind at the discretion of the BMCKD.

SERVICE OR SUPPLIED PRODUCT	DESCRIPTION	PRICE	PER UNIT
<b>Research Coordination Services</b>	Coordinator time (Consenting, completing study visits, sample processing, etc.)	\$55.00	hour
<b>Blood Collection Services</b>	Serum - single blood draw (procedure, needle, tube)	\$7.00	collection
	Hematology - single blood draw (procedure, needle, EDTA tube)	\$7.00	collection
	DNA/RNA - single blood draw (procedure, needle, PAXgene tube)	\$18.00	tube
<b>Urine Collection Services</b>	Urine - single 90mL midstream collection (container, processing)	\$6.00	collection
<b>Sample Storage Equipment (1mL tubes - urine, urine pellet, plasma, serum)</b>	1.4ml tube (includes tube, lid, box)	\$1.00	tube
<b>Sample Storage Equipment (6mL tubes - urine, plasma, serum)</b>	6ml tube (includes tube, lid, box)	\$2.50	tube
<b>Sample Storage Fee</b>	Storage space within the BMCKD freezers  <i>*sample storage fees calculated by the following: \$10,000 freezer x percentage of space required x length of storage time (years) x 20% maintenance fee</i>	<i>Dependent on # of samples*</i>  <i>*minimum storage fee = \$200</i>	# of racks/year
<b>Laboratory Procedure: DNA/RNA Isolation</b>	DNA/RNA isolation (procedure, equipment, technician fees)	\$150.00	tube

Please complete the following Research Application Form and return it, along with all required attachments, to the Program Manager:

**Graciela Andonegui**, 3280 Hospital Drive NW, HRIC Building, Room 4A06, Calgary, Alberta, T2N 4Z6. Email: andonegu@ucalgary.ca; Telephone: (403) 210-7097.

## Project Information

Principal Investigator(s)  
*Please attach proof of Tri-Council Ethical Guidelines for Research Involving Humans (TCPS-2) certification*

E-mail(s)

Department/Institution(s)

Project Title

Study Personnel (including Co-investigators, Research Coordinators, Laboratory Staff, etc)

Does this project already have ethics approval?

- Yes  
 No  
 Currently under review

If so, please provide the ethics ID:

Please select the applicable requirements for this project:

- Biospecimen access (urine, blood, tissue samples)  
 Digitized biopsy histopathology slide images access  
 De-identified data from research participants  
 De-identified data from biopsy patients  
 Research services: collection, processing, and storage  
 Other (please specify):

Project start date

Project end date

## **Research Project Summary**

### **Introduction**

*Please provide background of the research topic as well as a clear outline as to how the BMCKD will be involved in the project.*

### **Rationale and Objectives**

*Provide rationale for the study and outline the objectives.*

### **Participants**

*Describe the study population and inclusion/exclusion criteria. Indicate whether you require samples from renal patients alone or renal patients and normal controls.*

### **Data Request**

*If applicable, please outline the data variables you wish to collect from patients.*

**Recruitment**

*If applicable, indicate how participants will be identified and enrolled in the study. Indicate who will identify and consent participants. Include a consent form template to your application if required for your project.*

**Biospecimen Acquisition, Processing, and Storage**

*Please specify the type of biospecimen being collected or requested (if applicable):*

- Urine (whole)
- Urine (pellet)
- Blood (serum)
- Blood (plasma)
- Blood (buffy coat)
- Blood (DNA)
- Blood (RNA)
- Frozen or fixed tissue samples
- Digital biopsy images Other:
- please specify:

*If you requested biospecimens above, please verify the following where relevant:*

- *The way in which the biospecimens will be processed and/or tested*
- *If biospecimens will be discarded, how this will occur (\*note, upon completion of the project any remaining samples should be returned to the BMCKD if possible)*

**Clinical Significance**

*Briefly describe the clinical significance of this project.*

**Confidentiality**

*Include procedures for maintaining subject confidentiality. Please note you must abide by the Health Information Act and conduct all research activities under terms and conditions outlined in applicable Research and Confidentiality Agreements.*

**Additional Requests**

*Please provide us with any further information or special requests regarding this project:*

**Budget Outline**

*Please describe funding sources, project costs, and fees to be applied by the BMCKD (for projects with PI external to the Division of Nephrology, refer to pricing list on page 1):*

By signing this Research Application Form, I agree to the conditions and terms outline in the agreement. The data and/or biospecimens collected or utilized by this project will not be shared with personnel who are not listed on this Application Form.

All manuscripts which are written as a result of this project must be provided to the Precision Medicine in Nephrology's Program Manager at least 30 days prior to submitting for publication. The following disclaimer must be included in each manuscript:

*"This study was made possible based in part on data and materials provided by Calgary Lab Services and the Biobank for the Molecular Classification of Kidney Disease at the University of Calgary. The interpretations and conclusions contained herein are those of the researchers and do not necessarily represent the views or opinions of the Government of Alberta, Alberta Health Services, Calgary Lab Services, or the University of Calgary."*

Principal Investigator (please print)

Principal Investigator (signature)

Date

Biobank Delegate (please print)

Biobank Delegate (signature)

Date

*Please note that this Application Form and all other required documentation will be circulated to the BMCKD Management Committee for formal approval. You will be notified of the status of your request and provided with relevant further instruction within no more than 90 days after submission.*