# PART A: Preliminary application for access to the QUOD biobank

Thank you for your interest in the QUOD Biobank. This PART A form is a preliminary application to establish whether the samples you require for your study are available in the bio-resource.

If you have any queries regarding any aspect of the application please contact the National Management Team on [quod-research@nds.ox.ac.uk](mailto:quod-research@nds.ox.ac.uk) . More information about sample types and collection time points and basic donor data set is available on our website [www.quod.org.uk](http://www.quod.org.uk).

Please send completed applications to [quod-research@nds.ox.ac.uk](mailto:quod-research@nds.ox.ac.uk).

### RESEARCH

|  |  |
| --- | --- |
| Project Title |  |
| Research objective/aims |  |

### APPLICANT

|  |  |
| --- | --- |
| Name of Applicant |  |
| Department/Institution |  |
| Phone |  |
| Email |  |

### PRINCIPAL INVESTIGATOR

|  |  |
| --- | --- |
| Title |  |
| First name |  |
| Last name |  |
| Position |  |
| Department/Institution |  |

### NAMES AND INSTITUTION OF ALL OTHER COLLABORATORS

Please list the names and contact information of all collaborators on the research project

|  |  |  |
| --- | --- | --- |
| Name | Institution and department | Email address |
|  |  |  |
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|  |  |  |

### SAMPLE REQUIREMENTS

Please read the Guidelines for Applicants for full details of which sample types are available.

Please indicate:

* How many distinct groups of donors will be in this study, e.g. two groups of donors?
* How many donors in each group, e.g. 10 donors in each group?
* On which criteria will donors be selected into the study group(s), e.g. 10 DBD and 10 DCD donors with no history of hypertension?
* Which sample types and quantities per donor are required, e.g. for each donor 1 blood aliquot of 0.5 ml collected as DB3 plasma EDTA sample?
* Any other comments.

### ETHICS

Samples can only be released to projects with REC approval. Ethical approval may be applicable as part of the QUOD Research Tissue Bank ethics for the use of samples for projects concerning improving quality in organ donation and transplantation. This will be subject to evaluation in the full application (PART B) submitted to the Steering Committee.

|  |  |  |  |
| --- | --- | --- | --- |
| Has your project received separate REC approval? | Yes  No  Using QUOD ethics | If yes, REC approval number |  |

### WHAT HAPPENS NEXT

Your application will be reviewed by the National Data Manager and National Operational Coordinator to see if the sample types required are available. If the samples/data are available you will be invited to submit a full application (PART B) to the QUOD Steering Committee.