

The Centre for Applied Genomics (TCAG) DNA Biobanking Requisition



THE HOSPITAL FOR SICK CHILDREN
Molecular Genetics Laboratory
555 University Ave., Roy C. Hill Rm 3-421
Toronto, Ontario
Canada, M5G 1X8
Tel: (416) 813-8140 Fax: (416) 813-8319
www.sickkids.ca/molecular
 CLIA ID No.: 99D1014032

Referring Scientist:

Address: _____

Tel () _____ Fax () _____

contact name: _____

email/phone: _____

Project name: _____

Patient Name: (last) _____ (first) _____

Date of Birth: _____

Gender: Male Female

Research Family No.: _____ **Research ID No.:** _____

Relationship to Proband: _____

Your reference No.: _____

Date of sample collection: _____

Specimen type: Blood Saliva DNA RNA Other _____

Service requested:

- DNA extraction** (EDTA blood tube, 5-10 mls, or saliva)
- DNA Banking**
- RNA Extraction** (PAXgene blood RNA tube: - 2 x 2.5 ml tubes)
- First strand cDNA synthesis** (RNA - please consult laboratory)
- Whole Genome Amplification** (DNA)
- Other:** _____

Shipping instructions:

Specimens should be packaged in compliance with IATA P.I. 650 shipping standards. The outside of the package should have a label indicating 'Non-biohazardous, Non toxic material' and of no commercial value.

Blood specimens should be shipped (preferably at 4°C) so that they arrive at the Molecular Genetics Laboratory, Monday to Thursday, and within 24-48 hours after collection. DNA can be shipped either at room temperature or 4°C. RNA must be shipped on dry ice.

Call the laboratory if there is a delay.

Billing information:

Cost Centre: _____

For Laboratory use: