Middle School - Human and Vertebrate Animal Tissue Form (6B) This form is required for ALL projects involving fresh/frozen tissue, blood, blood products and body fluids. Form 6A MUST also be completed. If the research also involves living organisms (human or vertebrate animals), please ensure that the proper forms are completed.

This form is to be completed by the Student Researcher/Team Leader in collaboration with the Qualified Scientist/Mentor. All questions MUST be answered and additional pages may be attached.

Student's Name(s):_____

Project Title:

- 1. What type of tissue will be used in this study? Check ALL that apply.
 - □ Fresh or Frozen Tissue Sample
 - \Box Fresh Organ or Other Body Part(s)
 - \Box Blood
 - \Box Body Fluids
 - □ Primary Cell/Tissue Cultures
 - □ Human or Other Primate Established Cell Lines
- 2. From where will you obtain the above tissue(s)? Established cell lines must be identified by the source and catalog number.

If the tissue will be obtained from a vertebrate animal study conducted at a research institution, attach a copy of the IACUC certification with the name of the research institution, the title of the study, the IACUC approval number and the date of IACUC approval included.

Qualified Scientist/Mentor:

 \Box I verify that the student will work solely with organs, tissues, cultures or cells that will be supplied to him/her/them by myself or qualified personnel from the laboratory; and that if vertebrate animals were euthanized, they were euthanized for a purpose other than the Student Researcher's project.

AND/OR

 \Box I certify that the blood, blood products, tissues, or body fluids in this project will be handled in accordance with the standards and guidance set forth in Occupational Safety and Health Act, 29CFR, Subpart Z, 1910.1030 – <u>Blood</u> <u>Borne Pathogens</u>.

| Printed Name | Signature | Date of Review (mm/dd/yy) (MUST be PRIOR to experimentation) |
|--------------|-------------|---|
| Title | | Email |
| | Institution | |