

SAFETY SURVEY
(ADC Neuropathology Core)

If you have questions regarding the information requested, please contact Chris Hulette, Chair of the NP Core Steering Committee, at hulet001@mc.duke.edu or (919) 684-0057, ext. 3801.

Please return your completed form as an email attachment or forward to:

Erin Pfeiffer/NP Surveys
National Alzheimer's Coordinating Center
4311 11th Avenue NE #300
Seattle, WA 98105
fax: (206) 616-5927

Deadline for submission: Friday, September 5, 2003

Center name: _____ Date completed: _____

Completed by (NP Core Leader): _____

1A. Are the specimens in your NP Core routinely screened for any infectious or transmissible diseases?

- Yes
- No

1B. If 'yes', please indicate which diseases are screened. (*Check all that apply*)

- 1) Hepatitis B
- 2) Hepatitis C
- 3) HIV
- 4) Prion disease
- 5) Other (*please specify*)

2A. When tissue is shipped or released to investigators for research, is a disclaimer included describing the risks associated with handling of human tissue?

- Yes
- No

2B. If 'yes', do you require that the investigator sign the disclaimer and return it to you?

- Yes
- No