

**UNIVERSITY OF CALIFORNIA, SAN FRANCISCO
AUTHORIZATION TO TRANSFER OUTSIDE TISSUE SAMPLES**

Neurosurgery Tissue Bank

PURPOSE AND BACKGROUND:

The clinicians of the Neurological Surgery Department at the University of California, San Francisco, have requested that I, as a patient at UCSF Medical Center, allow transfer of my tumor tissue samples (preserved in paraffin blocks and or mounted on microscopic glass slides) removed during prior surgical procedure(s).

PROCEDURES:

If I agree, the hospital where I had my previous surgical procedure(s) will be asked to send my paraffin tissue blocks (or microscopic glass slides prepared from the tissue blocks), along with a copy of the corresponding pathology report, to the UCSF Neurosurgery Brain Tumor Research Tissue Core. The Tissue Core will prepare a number of tissue sections and tissue “roll-ups” from the paraffin tissue blocks and store them for the following intended uses:

- in-house pathology review at UCSF
- comparison of pathology from past and present surgeries
- tests that may predict treatment effect
- developing techniques that may become available in the future
- research that might lead to new and more effective treatments for brain tumors, epilepsy, developmental disorders or vascular malformations.

The paraffin tissue blocks will be returned to the originating hospital. The tissue sections and tissue “roll-ups” prepared from the blocks will be kept until it is used up or destroyed.

We will also collect and save information from your medical record, including things like age, sex, diagnosis, and treatments received. We do not know for sure if information from your medical record will be used, but it might be used in research about brain tumors, epilepsy, developmental disorders or vascular malformations. In the future, someone may contact you to ask questions about your general health.

We may transfer tissue sections or tissue “roll-ups” along with certain medical information about you (for example, diagnosis, blood pressure, age) to other scientists at UCSF and outside institutions, but we will not give them your name or any other information that would identify you. The research will not change the care you receive. It may be used to develop new drugs, tests, treatments or products. In some instances these may have potential commercial value. Your personal health information cannot be used for additional research without additional approval from either you or a review committee.

If you decide later that you do not want your sample and information to be used for future research, you can contact Dr. Anny Shai, Neurosurgery Tissue Bank Manager, at 415-502-7796 to inform her of your decision, and we will destroy any remaining identifiable sample and information if it is no longer needed for your care.

RISKS/DISCOMFORTS:

Tissue removal: There will be no additional risk since tissue has already been removed.

Confidentiality: Confidentiality will be preserved as far as is possible. All records will be coded and maintained in a secured database. Only the sample number code will be used in any reports or publication resulting from use of my tissue.

BENEFITS:

Paraffin tissue blocks/slides from my past surgical procedure(s) will help UCSF clinicians better understand the problems associated with my disease and help them make decisions about my treatment. Should my tissues be used for research, I may not personally receive any direct benefit, but others may be helped. If any new products, tests or discoveries that result from this research have potential commercial value, I will not share in any financial benefits.

ALTERNATIVES:

I can refuse to allow my outside paraffin tissue blocks/slides to be transferred without jeopardizing any other care I might receive at the University of California, San Francisco.

Costs/reimbursements:

It will not cost me anything to have my paraffin tissue blocks/slides transferred to UCSF, nor will I be paid in any way.

Authorization for release of paraffin tissue blocks/slides from:

(originating hospital or other institution)

Patient name: _____

Social Security: _____

DOB: _____

I hereby authorize the release of my paraffin tissue blocks to the following:

University of California, San Francisco
Department of Neurological Surgery
Brain Tumor Research Tissue Core
Dr. Anny Shai, Supervisor
1450 3rd Street, HD 436
San Francisco, CA 94158-9001
415-502-7796
415-514-9792 (FAX)

Patient's Signature for Authorization Date

Person Obtaining Authorization Date

AND/OR:

Parent or Legal Guardian Date

Translator Date