

NIA AGED RODENT TISSUE BANK REQUEST FORM

Check this box to acknowledge agreement with the following: ☐

Publications such as peer reviewed manuscripts, pre-publications (e.g. BioRxiv), conference abstracts, conference posters, and conference presentations that use materials from the NIA Aged Rodent Tissue Bank are required to include the following language in the acknowledgments section:

“This research was made possible in part using biomaterials from the NIA Aged Rodent Tissue Bank ([Aged Rodent Tissue Bank | National Institute on Aging \(nih.gov\)](#)) at the University of Washington, Seattle under contractual agreement with the National Institute on Aging (NIA).”

IMPORTANT NOTES:

- Aged animals are prone to age-related physical decline. NIA provides health information in the Vital Statistics Information Sheet. Concerns about the specific health status of donor animals should be indicated on this Request Form.
- Biomaterials listed as tumor tissue or frozen tissues listed as containing tumors are based on gross observation of tissue enlargement/masses and should be taken to mean that they are potential tumors (neoplasms) or contain potential tumor (neoplastic) tissue. No pathological analysis or testing has been done to verify tumor status. All potential tumors are identified on an animal's Vital Statistics Information Sheet. If you do not wish to receive any tissues from an animal which had a potential tumor or any tissues which contain a potential tumor, please indicate this on this Request Form.
- Once you submit the Request Form, you will receive an email within 2 business days. If you do not receive an email, contact rodents@nia.nih.gov.
- *If there is a problem with the tissue(s) you receive, you must contact NIA within **24 hours** rodents@nia.nih.gov. NIA will only replace orders if they were not filled correctly by the distribution center or if they were lost during shipping.*

Fill-in entirely and email this Request Form (pages 1-3) to rodents@nia.nih.gov for review. Requests will then be forwarded to the University of Washington Aged Rodent Tissue Bank (UW ARTB) to be filled. ARTB may contact you to finalize the order.

Note: *Required fields are indicated with an asterisk (*)*

*Principal Investigator: _____ *Email: _____

*Institution: _____

*Title of project: _____

*Funding agency and grant number: _____

*Contact Person: _____

*Phone: _____ *Email: _____

*Brief description of the scope of the project/
experiment:

*Shipping Address (include building/room number):

[illegible]

Special Instructions:

TRB Office Use Only

NIA Confirmation Number:

DELIVERY DAY:

Tissues to be sent by UW ARTB (filled by NIA)

[illegible]