

Biosamples/tissue/data requested in a table: In a table, briefly outline the number, type, and amount of biospecimens/tissue requested, including subject type (e.g. PD, control, any specific clinical parameters), visit number (if applicable), volume of sample required, and the cohort or biorepository through which the biosamples are currently available. In addition, the applicant should determine if the samples required are available through the repository prior to submitting an application. For applicants requesting access to data outside of the PDBP DMR (with funding for analyses), briefly outline what data is required and how the data will be used.

Line #	Name of Cohort Sample and Data Set	Disease Category	Number of Samples	Biosample Type	Volume or concentration (in # of aliquots, e.g. 2x 200 µL, see Table A)	Any other criteria to be considered e.g. quality control data	Longitudinal samples, visit types and number of samples per visit	Sample availability (See Table B)
<i>Example 1</i>	<i>PREDICT-HD</i>	<i>Prodromal HD</i>	<i>50</i>	<i>Plasma</i>	<i>2 x 200 µL</i>	<i>Hemoglobin < 0.2</i>	<i>Visit 1 -50 samples Visit 2 - 50 samples</i>	<i>yes; 32 samples at as of 12/25/2015</i>
<i>Example 2</i>	<i>PREDICT-HD</i>	<i>Manifest HD</i>	<i>50</i>	<i>CSF</i>	<i>2 x 200 µL</i>	<i>Hemoglobin < 0.2</i>	<i>Visit 1 -50 samples Visit 2 - 50 samples</i>	<i>No, but additional stock is available per biosample catalog as of 12/30/2015</i>

A. Standard aliquots

Study	DNA	RNA	Plasma	Serum	CSF	Whole Blood*	Whole Blood Pellet	Urine
2-CARE	1 µg	N/A	200 µl	N/A	N/A	N/A	N/A	N/A
PREDICT-HD	1 µg	1 µg	200 µl	N/A	200 µl	N/A	250 µl	1.5 ml
*available from serum tube								

B. Staff to contact regarding sample availability

Cohort	Contact Name	Email
2-CARE and PREDICT-HD	Scott Kaiser (BioSEND Biorepository Project Manager)	biosend@iu.edu