

Requests to MGH Pathology via the BWH Pathology Cores [DF/HCC]

Supplemental Information Form

Thank you for your request for patient materials from the MGH tissue archives. This form is required in addition to submitting a BPC service request in the [MGB Core Management System](#).

No requests will be considered until both have been submitted.

(Note: If you are requesting tissue from multiple specimens, only one (1) form per patient needs to be completed.)

Service request # [e.g., BPC-25-XX-0123]: _____

Name: of Requester: _____ Email: _____

	Case Accession # [e.g., S19-12345]	Patient Name	D.O.B.
1.			
2.			
3.			

IRB Protocol Number: _____ Study Title: _____

Principle Investigator (PI): _____ Email Address: _____

Collaborating Pathologist(s): _____

Is MGH a participating site on this protocol? ☐ YES ☐ NO

If YES, MGH Site PI: _____

Provide a brief description of the research study, including type of tissue being requested and its intended use:

☐ Tissue to be mounted on Charged Slides OR ☐ Tissue to be mounted on Uncharged Slides

Categorize the research study into one of the following four (4) categories:

Group A:

- ☐ Patient treatment in the context of a clinical trial*
☐ Clinical trial correlative studies

Group B:

- ☐ Ongoing retrospective study/case series
☐ Tissue collection for banking/repository

Is >50 microns total tissue per case being requested? ☐ YES ☐ NO

If YES, please provide a justification below:

Return the completed form to spolo@bwh.harvard.edu with the subject line containing your service request # [e.g., BPC-25-XX-0123]. Please include copies of **IRB approval/continuing review form (listing expiration date)** and **signed patient consent(s) for use of tissue**, if applicable. If the protocol was approved with waiver of patient consent, please check this box: ☐

If you have any questions, please contact Teri Bowman at tbowman@mgb.org.

**Please provide an alternate block in the event your first choice is unavailable. This will keep any delay to a minimum.*

For MGH Pathology use only: ☐ Approved ☐ Denied Reviewed by: _____ Date: _____

Updated on April 16, 2025; L. Wyner