

REQUESTED BIOLOGICAL RESOURCES:

Pathological:

Tissues (if muscle, please specify which one) / Fluids (please specify which) / Cells (please specify which one).....

Age:

Child or young adult < 20 years old: –required number of pathological samples:

Adult: required number of pathological samples:

Approximate weight or volume required for a sample:

Control:

Tissues (if muscle, please specify which one) / Fluids (please specify which one) / Cells (please specify which one).....

Age: Child or young adult < 20 years old : required number of control samples:

Adult: required number of control samples:

Approximate weight or volume required for a sample:

Conditioning of samples:

Tissues at 4°C Dry Culture medium
Other conditioning medium:

Frozen Tissues Liquid nitrogen
Isopentane cooled with liquid nitrogen
Cryoconservation cell for cell culture
RNA Later for specific studies of RNA

Primary cultures Myoblasts Fibroblasts
Flasks Frozen
Quantity

Fluids : Serum Plasma Other

Techniques that you are going to use with the tissue samples (your answers will guide the sampling, storage and shipping conditions)

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Comments:.....

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Note: to find out what biological resources are available, please contact Myobank-AFM of the Institute of Myology: myobank-afm@institut-myologie.org

COLLABORATION AGREEMENT

I have read the “Charte de la Myobank-AFM de l’Institut de Myologie”.

I agree

to respect the French and European legislation in force for the use of biological samples within the framework of scientific research,

to use the tissue only for the scientific research purposes listed in my request,

to neither give nor loan the samples obtained from the Myobank-AFM to any third party for a research purpose which is different from that listed in my request,

not to use the tissues obtained or their derivatives for profit,

to respond to the questionnaire sent annually by Myobank-AFM concerning the progress of your work, your published articles and web-quality satisfaction index,

to inform the Myobank-AFM at the end of the research project in order to organize the return of the samples or their destruction,

to inform the Myobank-AFM of all publications that include samples obtained from the Myobank-AFM

to quote the Myobank-AFM of the Institut de Myologie and, as the case may be, the associated collaborators, in the acknowledgements section of the relevant publications.

I understand that the Myobank-AFM cannot guarantee the sanitary and safety conditions of the samples, and that it is necessary to follow good laboratory practice in the manipulation of biological resources.

I am informed that, unless I indicate otherwise, some personal data (such as my name, my contact information...) will be entered into a computer file. I understand that I have an access right to this information at all times upon request to the Myobank-AFM, as well as the rights of communication and rectification, in conformity with the Law of 6 January 1978 relating to Information Technology, Files and Civil Liberties in its last version and in accordance with the General Regulations on Data Protection (GRDP) by contacting MYOBANK-AFM.

Name

Date

Signature



MYOBANK - AFM

Institut de Myologie

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PROJECT OUTLINE

Principal investigator :.....

Date :

Summary of research program

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Name:

Key Words

Subjects

Pathologies

Organs

Cells

Molecules

Others :

List of principal publications of the research group