B.C. Biobank Registration Program - Registration Questions

Biobank Information

Biobank Name
(Enter the name of the research project/biobank. The name should match or relate to the name on your ethics application.)

Principal Investigator(s)
(If your biobank does not have a PI then enter the name of whoever is ultimately responsible.)

Biobank leader or primary contact person
(Other biobank leader or primary contact person, if applicable (e.g., active co-PI, biobank coordinator))

Email of primary contact
(This email address will be used for all future correspondence between us and your team.)

Location of Biobank And Biospecimens
(Please select at least one organization or institution representing where the biobank is held from the three categories below.)

Health Authorities
Universities
Research Institute

Brief Description

Brief description of biobank/research project
(Provide a brief description of your research project or biobank. This information will appear on the biobank register if you choose to publicly list your collection.)

Key words to describe your biobank
(Add three key words to describe your biobank (separated by commas))
**Biobank/Collection focus and size**

*What is the research focus on your biobank?*
Aboriginal People's Health
Aging
Cancer Research
Circulatory and Respiratory Health
Gender and Health
Genetics
Health Services and Policy Research
Human Development, Child and Youth Health
Infection and Immunity
Other, please specify
*(Please choose the most appropriate category based on the CIHR’s categorization of research areas.)*

**Estimated case accrual target**
Small (<200 cases)
Medium (200-1000 cases)
Large (>1000 cases)

**Estimated case accrual to date**
<50
<200
<1000
<5000
>=5000

**Biospecimens**

*What types of biospecimens will be or have already been collected for your research project/biobank?*
Formalin fixed paraffin embedded tissue
Frozen tissue
Isolated cells
Blood
Urine
Saliva
Other
Ethics

Name of ethics review board
(Please name the ethics review board you have or will apply to)

Do you currently have approval from the above ethics review board?
Yes
No

Confirmation

Do you authorise us to include your submission in anonymized statistics?
Yes
No
(We will analyze the data for the purpose of compiling anonymized statistics and to facilitate review of this program.)

Do you give permission to have your biobank listed in the locator?
Yes
No

By ticking this box you confirm that all the registration information for this biobank is true