This document provides guidance on the types of specifications that should be documented in the protocol if the study involves collection of Solid Tissue. As the majority of the items that follow will be dictated on the protocol level and NOT collected for each and every specimen, CDEs are not associated with these guidelines.

## Muscle Biopsy

1. Muscle biopsy done?

[ ]  Yes [ ] No (skip to Skin Biopsy)[ ]  Unknown (skip to Skin Biopsy)

1. Date and time of muscle biopsy: // (m m/dd/yyyy) : (hh:mm, 24 hour clock)
2. Muscle biopsy site: [ ]  Right [ ]  Left
3. How was the biopsy completed? [ ]  Surgically [ ]  Needle
4. Number of muscle biopsy samples/aliquots stored:
5. Aliquot type: [ ]  Frozen [ ]  Fixed [ ]  Homogenized [ ]  Other, specify:
6. How was the muscle biopsy prepared for storage? [ ]  Snap frozen [ ]  Fixed formalin [ ]  Other, specify:
7. Long term biopsy storage temperature: [ ]  -800C [ ]  -20 0C [ ]  4 0C [ ]  Other, specify 0C

## Skin Biopsy

1. Skin biopsy done?

[ ]  Yes [ ] No (skip to Nerve Biopsy) [ ]  Unknown (skip to Nerve Biopsy)

1. Date and time of skin biopsy: // (m m/dd/yyyy) : (hh:mm, 24 hour clock)
2. Skin biopsy site: [ ]  Right [ ]  Left
3. How was the biopsy completed? [ ]  Surgically [ ]  Needle
4. Number of skin biopsy samples/aliquots stored:
5. Aliquot type: [ ]  Frozen [ ]  Fixed [ ]  Homogenized [ ]  Other, specify:
6. How was the skin biopsy prepared for storage? [ ]  Snap frozen [ ]  Fixed formalin [ ]  Other, specify:
7. Long term biopsy storage temperature: [ ]  -800C [ ]  -20 0C [ ]  4 0C [ ]  Other, specify 0C

## Nerve Biopsy

1. Nerve biopsy done?

[ ]  Yes [ ] No (skip to Brain Biopsy)[ ]  Unknown (skip to Brain Biopsy)

1. Date and time of nerve biopsy: // (m m/dd/yyyy) : (hh:mm, 24 hour clock)
2. Nerve biopsy site: [ ]  Right [ ]  Left
3. How was the biopsy completed? [ ]  Surgically [ ]  Needle
4. Number of never biopsy samples/aliquots stored:
5. Aliquot type: [ ]  Frozen [ ]  Fixed [ ]  Homogenized [ ]  Other, specify:
6. How was the nerve biopsy prepared for storage? [ ]  Snap frozen [ ]  Fixed formalin [ ]  Other, specify:
7. Long term biopsy storage temperature: [ ]  -800C [ ]  -20 0C [ ]  4 0C [ ]  Other, specify 0C

## Brain Biopsy

1. Brain biopsy done?

[ ]  Yes [ ] No (End Form)[ ]  Unknown (End Form)

1. Date and time of brain biopsy: // (m m/dd/yyyy) : (hh:mm, 24 hour clock)
2. Brain biopsy site: [ ]  Right [ ]  Left
3. How was the biopsy completed? [ ]  Surgically [ ]  Needle
4. Number of brain biopsy samples/aliquots stored:
5. Aliquot type: [ ]  Frozen [ ]  Fixed [ ]  Homogenized [ ]  Other, specify:
6. How was the brain biopsy prepared for storage? [ ]  Snap frozen [ ]  Fixed formalin [ ]  Other, specify:
7. Long term biopsy storage temperature: [ ]  -800C [ ]  -20 0C [ ]  4 0C [ ]  Other, specify 0C