



Cummings School of Veterinary Medicine

# Stomach Cancer Study Enrollment Instructions Tufts Harrington Oncology Program

- **Formalin fixed samples**
  - Tumor or “abnormal Looking” stomach
  - “Normal Looking” stomach (if there is any)
  - Healthy liver or spleen
- **Fresh sample** (*place in red top or centrifuge tube*)
  - Tumor or “abnormal Looking” stomach
  - “Normal Looking” stomach (if there is any)
  - Healthy liver or spleen

*Please freeze immediately and ship on ice packs. Keep in freezer until ready to ship.*
- **Blood Sample**
  - 6mls in an EDTA tube
- **FedEx the samples**
  - Please ship samples on an ice pack
  - Ship to:  
Dr. Elizabeth McNiel, DVM, PhD  
Tufts Medical Center  
75 Kneeland Street  
14<sup>th</sup> Floor Room #14047  
Boston, MA 02111  
Phone: 617-636-4715  
[Elizabeth.McNiel@tufts.edu](mailto:Elizabeth.McNiel@tufts.edu)
  - Please fill in the total weight of the package on the Fed Ex form
  - Please call for FedEx account information and with any questions you may have.

**If samples are taken on a Friday:** please refrigerate blood. Ship out on Monday.

-----Return Below Portion with Shipment-----

**Owner Information**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Dog Information**

Call Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Registered Name: \_\_\_\_\_ Breed: \_\_\_\_\_

AKC (or Other) Registration #: \_\_\_\_\_ *Please attach pedigree if available*

Sex: Male  Male Neutered  Female  Female Spayed

**Affected participants:** (*Please include biopsy report if available*)

Date of Diagnosis \_\_\_\_\_ Biopsy Diagnosis \_\_\_\_\_

Biopsy Location \_\_\_\_\_ Other Disease \_\_\_\_\_

### Please Acknowledge and Sign:

I give Dr. Elizabeth McNiel and her direct collaborators permission to use this sample for research purposes. I understand that any pedigree information or data specific to my dog will be kept confidential and any publications resulting from these studies will not include any information that will make it possible to identify a subject. In addition, I understand that I will not receive individual results regarding my dog as a result of these studies.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_