



Genox File No: _____

OXIDATIVE STRESS BIOMARKERS
FOR THE ADVANCEMENT OF BASIC AND
APPLIED RESEARCH RELATED TO AGING

Analytical Testing Service Undertaking

Please complete this form and return to Genox at least TWO WEEKS before the samples are shipped to us. Genox requires this information to assure compliance with CMS, COMAR, and FDA regulations.

Do not ship samples until you receive from Genox by FAX or E-mail written confirmation and authorization for sample shipment.

Date: ___/___/___

Name of the Principal Investigator: _____

Name of the Academic Institution/Government Agency:

Address: _____

Phone: (____) _____

Fax: (____) _____

E-Mail Address: _____

Internet: _____

Title of the Research Project: _____

Brief Description of the Research Project: *(Please attach additional sheet if necessary)*

Funding Agency: _____

Project Start Date: _____ Project End Date: _____

Sample Source: Human/Animal/PlantProducts

Number of Samples to be Analyzed:

Human Urine: _____ Human Serum/Plasma: _____

Animal Urine: _____ Animal Serum/Plasma: _____

Plant Products: _____

Oxidative Stress Biomarkers to be Analyzed: _____

Nature of Samples to be Analyzed: Already Collected and Stored Frozen/Currently Being Collected/To Be Collected

Age of Samples Already Collected and Stored: _____ Years/Months

Mode of Storage: Refrigerator/Deep Freezer/other: _____

Does the Academic Institution/Government Agency Have Documented Proof of “Informed Consent” from all Subjects/Volunteers whose Samples are to be Analyzed: Yes/No

Note about “**INFORMED CONSENT**”

- i. By submitting samples to Genox, Principal Investigator affirms that he/she has obtained the legally effective informed consent of each subject or each subject’s legally authorized representative and that the informed consent complies with the conditions provided herein.
- ii. Principal Investigator affirms that he/she maintains signed copies of all subjects’ informed consent in one of the following manners: (1) a written consent document that embodies the elements of informed consent required by § 46.116; or (2) a short form written consent document stating that the elements of informed consent required by § 46.116 have been presented orally to the subject or the subject’s legally authorized representative.
- iii. In obtaining informed consent, Principal Investigator has provided the subjects or subjects’ legally authorized representatives with the opportunity to consider whether or not to participate and has minimized the possibility of coercion or undue influence.

- iv. Principal Investigator affirms that the information given to the subject or the representative shall be in the language understandable to the subject or the representative.
- v. Principal Investigator affirms that no informed consent, whether oral or written, may include any exculpatory language through which the subject or representative is made to waive or appear to waive any of the subject's legal rights or release or appear to release the submitting entity from liability for negligence. (see 45 C.F.R. §§ 46.116-46.117).

RESTRICTIONS ON USE OF ASSAY REPORTS:

- i. By submitting samples to Genox, Principal Investigator affirms that the use of individual assay reports generated by Genox Corporation will be restricted to research use only.
- ii. By submitting samples to Genox, Principal Investigator affirms that the provision of these reports to individuals or to treating physicians for the diagnosis, prevention, treatment and control of any human disease or impairment of, or the assessment of the health, nutritional, or medical condition of individuals is expressly prohibited by law. 42 U.S.C. § 263a (2006); 42 C.F.R. § 493.3 (2006); COMAR 10.10.01.02 (2006).
- iii. Principal Investigator has been advised and acknowledges that Genox is not a CLIA certified laboratory.

I, as the Principal Investigator, for the above research project, hereby certify that the information provided by me is complete and accurate.

(Signature of the Principal Investigator)

(Name of the Academic Institution/Government Agency)

Title/Position Held	Place, Date
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 (To be Completed by Genox Corporation)

Analytical Testing Service Request Accepted/Declined Date Accepted/Declined: _____

(Signature of Director, Genox Corporation)