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# CDC MVB Mesothelioma Survey Questions

Thank you for participating. This is a survey for **mesothelioma researchers** to determine their requirements for a well characterized and annotated tissue resource. The results of the survey will guide development of the biospecimen repository and related information services supported by the Centers for Disease Control and Prevention's Mesothelioma Virtual Bank (MVB) infrastructure. Please follow the instructions and answer these questions carefully. There are 21 questions and a section for comments; it should take less than 15 minutes to complete. All responses will be kept confidential. Thank you for your cooperation.

(Note: Please try to use only text)  
E-mail the [webmaster](#) if you experience any errors.

**Please Enter your name and/or E-mail (\*required):**

\* Name:

\* E-mail Address:

## A. Researcher information

**1.) What disease(s) are you normally interested in (other than mesothelioma)?**  
(Note: please specify disease names: multiple answers are allowed, if applicable)

**2.) Indicate the discipline in which your degree(s) was (were) earned.**  
(Note: Check all that apply)

- a. Basic life sciences (e.g. biology, zoology etc.)
- b. Basic physical sciences (e.g. physics, chemistry etc.)
- c. Medical sciences
- d. Statistics or Biostatistics
- e. Biochemistry
- f. Genetics
- g. Epidemiology
- h. Other (Please Specify) \_\_\_\_\_

**3.) Please indicate your research or clinical specialty, if any.**  
(Note: multiple answers are allowed, if applicable)

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**4.) Indicate your affiliation.**

- a. Academic/non-profit
- b. Corporate/for profit
- c. Community/non-profit
- d. Government

**5.) Please indicate the percentage of your work time spent in the following activities.**

- % a. Patient care
- % b. Teaching (Didactic)
- % c. Administration
- % d. Research
- % e. Marketing (commercial sector)
- % f. Patient advocacy (patient focused mesothelioma group)
- % g. Other please specify

**6.) Please mark the category that best describes you with the number 1. If more than one category is applicable, mark the next most appropriate with the number 2, and so on.**

- a. Clinical researcher
- b. Morphological researcher
- c. Public health researcher
- d. Epidemiologist
- e. Molecular biology researcher
- f. Basic science researcher

## B. Tissue Requirements

**7.) Do you use human mesothelioma related tissue in your research?**

Yes

**8.) How many mesothelioma specimens might you require this year?**

**9.) From what sources do you normally obtain mesothelioma tissue?**

- Normal Clinical Activities
- Specific Research Procedures
- Other (Please Specify)

**10.) From what tissue bank(s) or archives(s) do you normally obtain mesothelioma tissues?**

Specify the name of tissue bank(s) \_\_\_\_\_

If not applicable, check here

**11.) How do you specify your tissue requirement(s)?**

(Note: Please rate your need for each of the following requirements by writing an appropriate number in each underline.)

- 1. Not needed
- 2. Would be likely needed
- 3. Essential

- a. By anatomic site(s)
- b. By normal or pathological
- c. By specific disease(s)
- d. By primary or metastatic

- e. By matched normal tissue from the same patient
- f. By specific treatment(s) performed on patient (eg. radiation or chemotherapy etc.)
- g. By tissue sources (eg. surgical or autopsy etc.)
- h. By patient limitations (eg. age, race, gender or other limiting characteristics)
- i. By amount of tissue(s) (minimum to maximum size or dimension)
- j. By total number of specimens needed
- k. By specimen preparation and preservation methods (fresh, frozen, or paraffin fixed archival tissue, etc.)
- l. Other please specify

**12.) What types of samples do you normally require?  
(Note: Check all that apply)**

- Benign Tissue
- Normal Lung Tissue
- Primary Tumor (Benign)
- Primary Tumor (Malignant)
- Metastatic Tumor
- Other (Please Specify)

**13.) What are the methods of preservation or tissue status you normally require?  
(Note: Check all that apply)**

- a. Formalin-fixed paraffin Tissue
- b. Fresh
- c. Snap frozen (OCT)
- d. Snap frozen (without OCT)
- e. Other fixed tissue(s)
- f. Bulk snap frozen
- g. Paraffin Tissue Microarray
- h. Other (Please Specify)

**14.) Do you require any other biological specimen?  
(Note: Check all that apply)**

- a. Blood
- b. Urine
- c. Sputum
- d. Buffy Coat
- e. Red Cells
- f. Other (Please Specify)

## C. Tissue associated data requirements

**15.) What information about tissue do you normally require?  
(Note: Please rate your need for each of the following requirements by writing an appropriate number in each underline.)**

1. Not needed
2. Would likely to be useful
3. Essential

- a. Patient's Demographic Information
- b. Patient's Epidemiologic Information
- c. Patient's (specimen) Pathology Information
- d. Patient's Vital Status
- e. Patient Clinical Summary
- f. Patient Family History Data
- g. Patient's other Laboratory Data
- h. Patient Progression or Outcomes Data
- i. Protein or Gene Expression Data
- j. Tissue Processing Protocols
- k. Other (Please Specify)

**16.) Do you use any types of biomedical databases in connection with your tissue related research?  
(Note: Check all that apply)**

- a. Literature databases (e.g PubMed etc.)
- b. Genetic databases (e.g.. GenBank, OMIM, Unigene etc.)
- c. Medical Record (e.g. In-house patient medical record)
- d. Microarray analysis tools (e.g. Affymetrix etc.)
- e. Other (please specify)

**17.) What clinical data is essential to your ongoing research?**

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## D. Tissue Microarray requirements

**18.) Do you use TMA in your research?**

Yes

**19.) Do you plan to use TMA in your research?**

Yes

**20.) How often do you require TMA?**

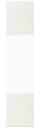
**21.) From what sources do you normally obtain TMA?  
(Note: Check all that apply)**

- Archival Mesothelioma Primary tumor tissue TMA slide set
- Ethnicity TMA slide set
- Metastatic TMA slide set
- Outcome TMA slide set
- Exposure (asbestos) TMA slide set

## D. General Comments

Please provide any additional comments

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Submit Survey

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