Thank you for your interest in this important survey.

This survey includes detailed questions about cost and pricing considerations relevant to operating and managing a biobank. Your time and thoughtfulness in completing the survey is greatly appreciated. Please note that your name and any other identifying information that you enter regarding your biobank will be removed from the aggregated data used to develop the online Biobank Economic Modeling Tool.

It is important that we receive your survey responses no later than "date pending." Please note that one of the project team members may contact you after your completion of the survey In order to clarify some aspects of your responses.

On behalf of the entire BBRB and BEMT project team, we thank you in advance for your participation in this survey. Your thoughtful and complete responses will enable the building of a knowledge base in biobanking economics from which the entire biobanking community will benefit. Please feel free to contact Lisa Miranda by email at lisabmiranda@provialabs.com with any questions.

Sincerely,

Helen M. Moore, Ph.D.

Acting Branch Chief, Biorepositories and Biospecimen Research Branch Cancer Diagnosis Program, Division of Cancer Treatment and Diagnosis United States National Institutes of Health, National Cancer Institute

PRIVACY ACT NOTIFICATION STATEMENT

Collection of this information is authorized by The Public Health Service Act, Section 412 (42 USC 285 a-1). Rights of study participants are protected by The Privacy Act of 1974. Participation is voluntary, and there are no penalties for not participating or withdrawing from the study at any time. The information collected in this study will be kept in private under the Privacy Act. Names and other identifiers will be separated from information provided and will not appear in any report of the study. Information provided will be combined for all study participants and reported as summaries. You are being contacted initially by email to complete a survey so that we can clarify any responses to refine the features and functionality of the Biobank Economic Modeling Tool (BEMT). You may also be contacted by telephone to participate in brief follow-up to clarify your responses.

NOTIFICATION TO RESPONDENT OF ESTIMATED BURDEN

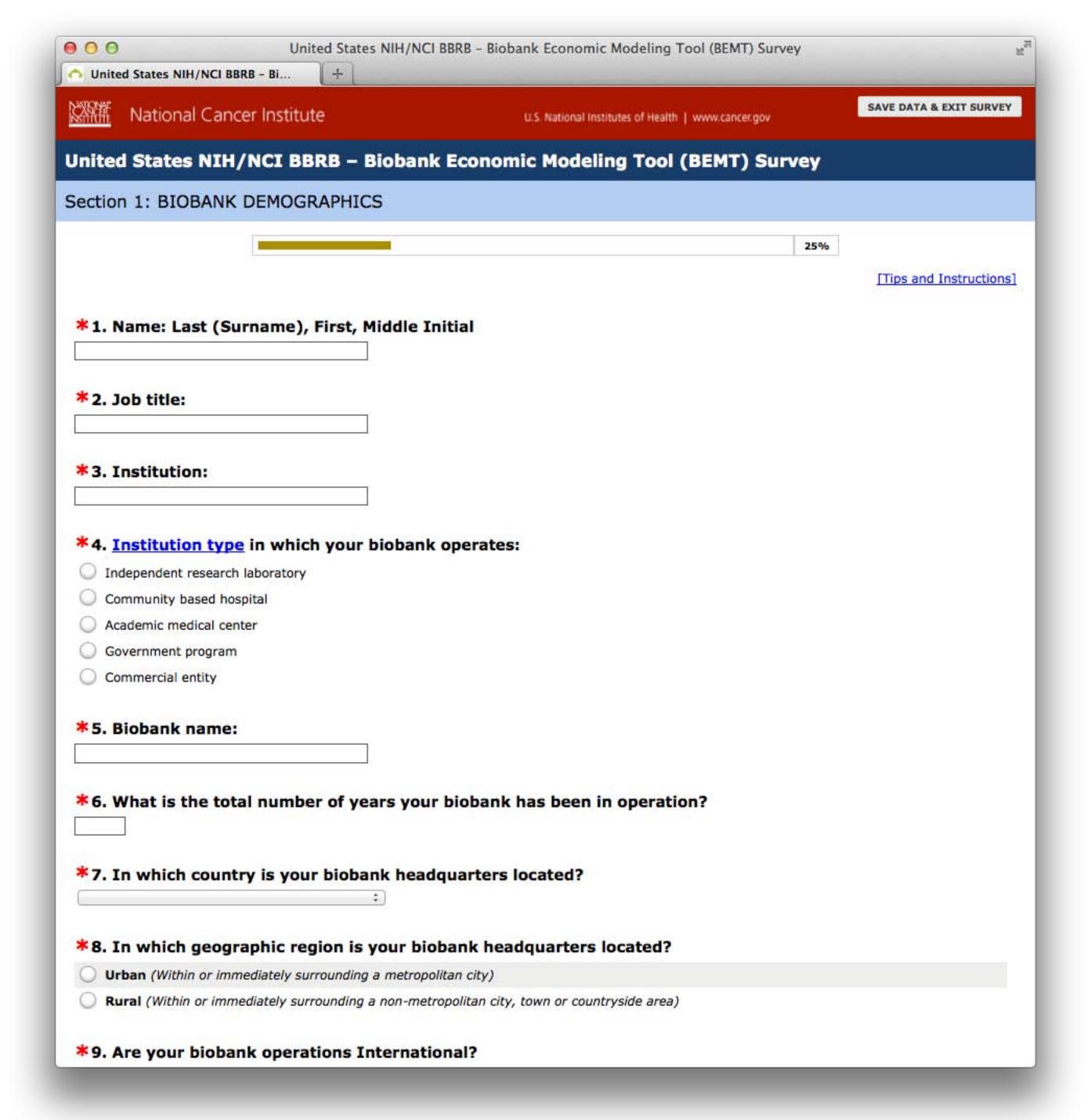
Public reporting burden for this collection of information is estimated to vary from one to two (1-2) hours per respondent, including the time for reviewed instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions to reducing this burden to: NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN: PRA (0925-0589). Do not return the completed form to this address.

SAVING & SUBMITTING YOUR DATA: You will need to disable your pop-up blockers and enable cookies BEFORE you BEGIN the survey if you want to:

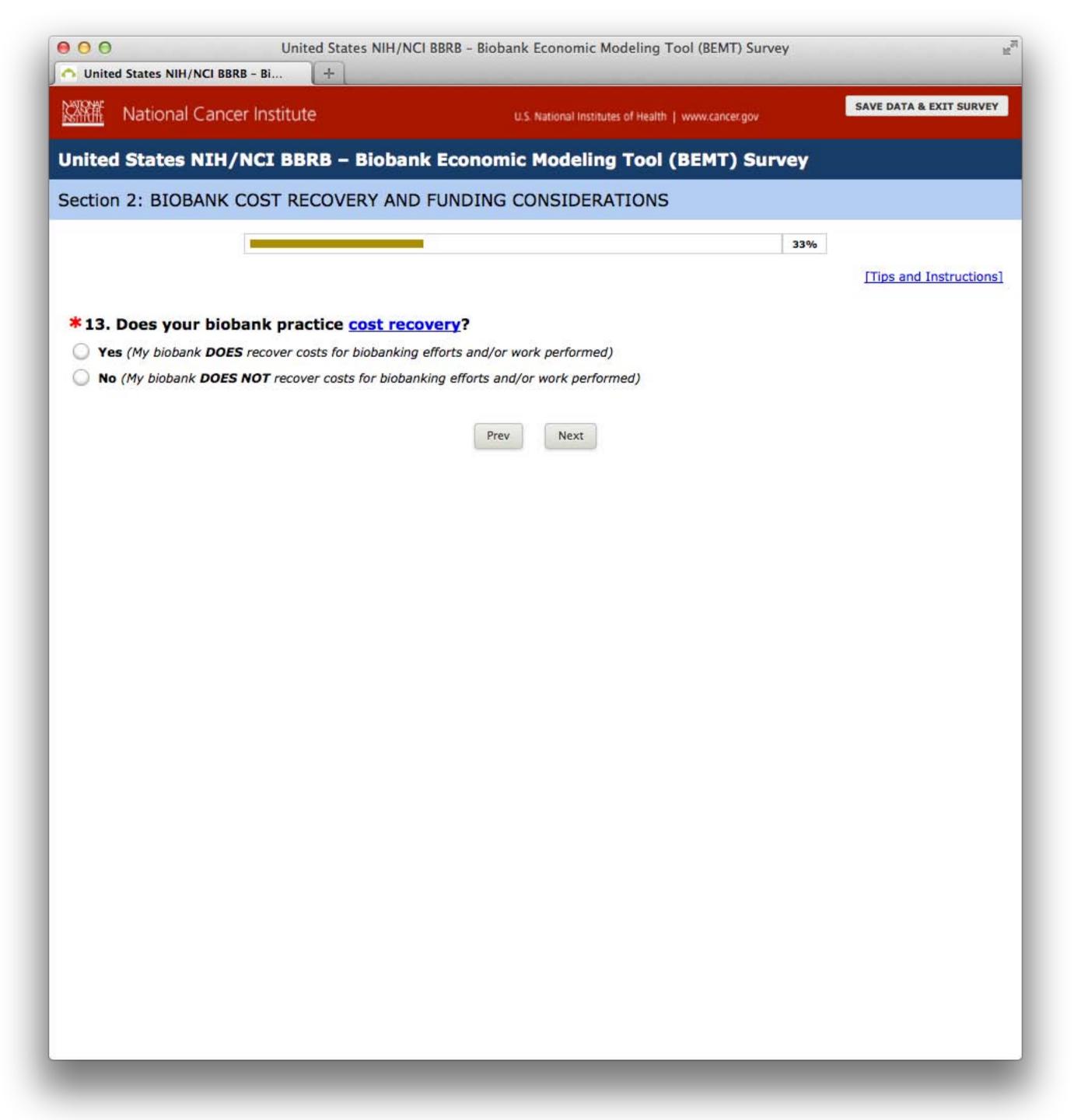
- Exit the survey and come back at a later time to finish your responses in order to save your work. Click the SAVE AND EXIT SURVEY
 BUTTON. In order to avoid starting over, you will need to use the same browser (e.g. Firefox OR Internet Explorer, etc., NOT both) AND
 computer (e.g. work OR home computer, etc., NOT both) for the entire survey.
- 2. Ensure you are able to use the help dialog boxes (links in blue).

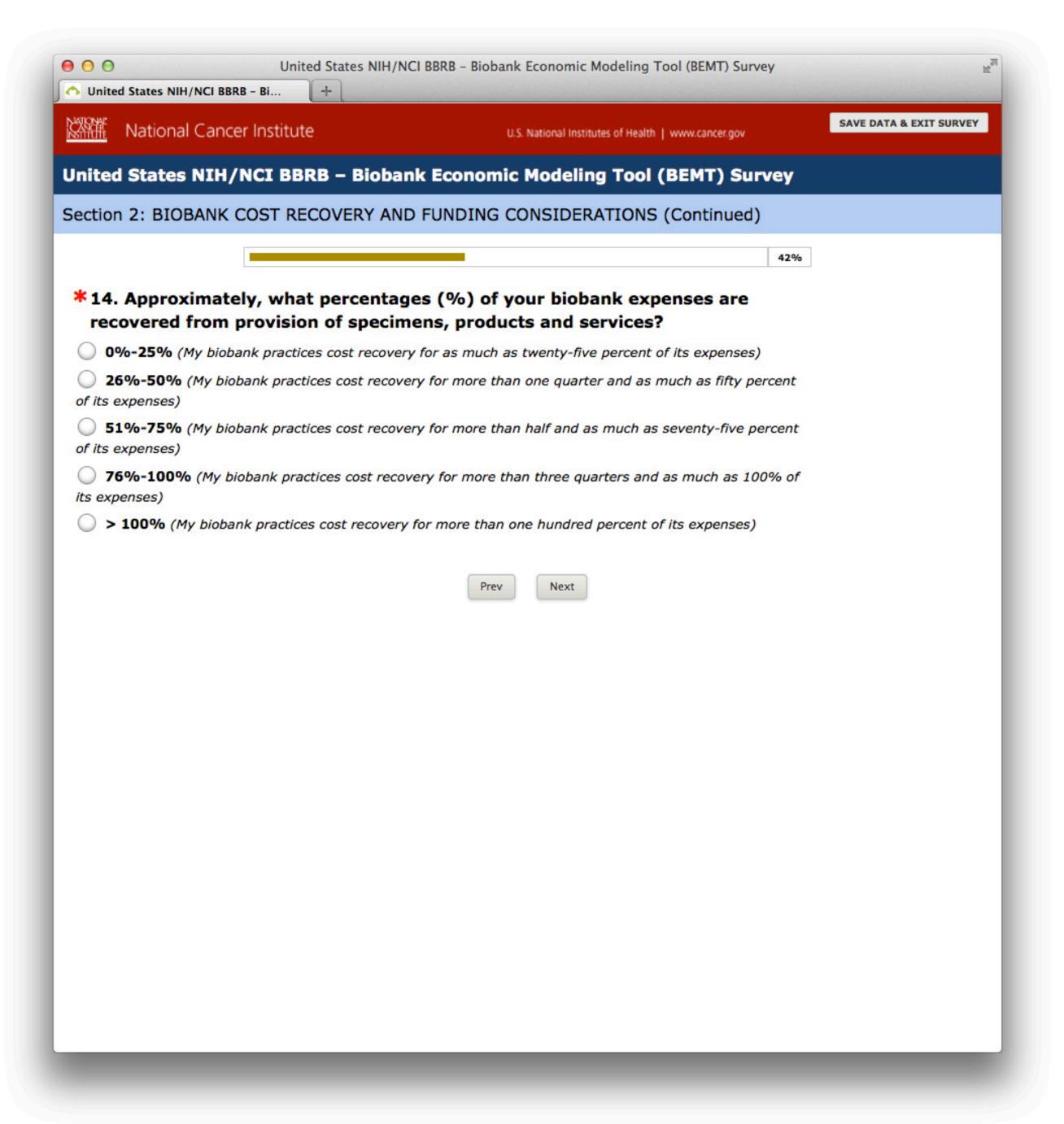
TECHNICAL ASSISTANCE: If you have any questions about or with taking the survey and/or need technical assistance, please contact Lisa Miranda at lisabmiranda@provialabs.com.

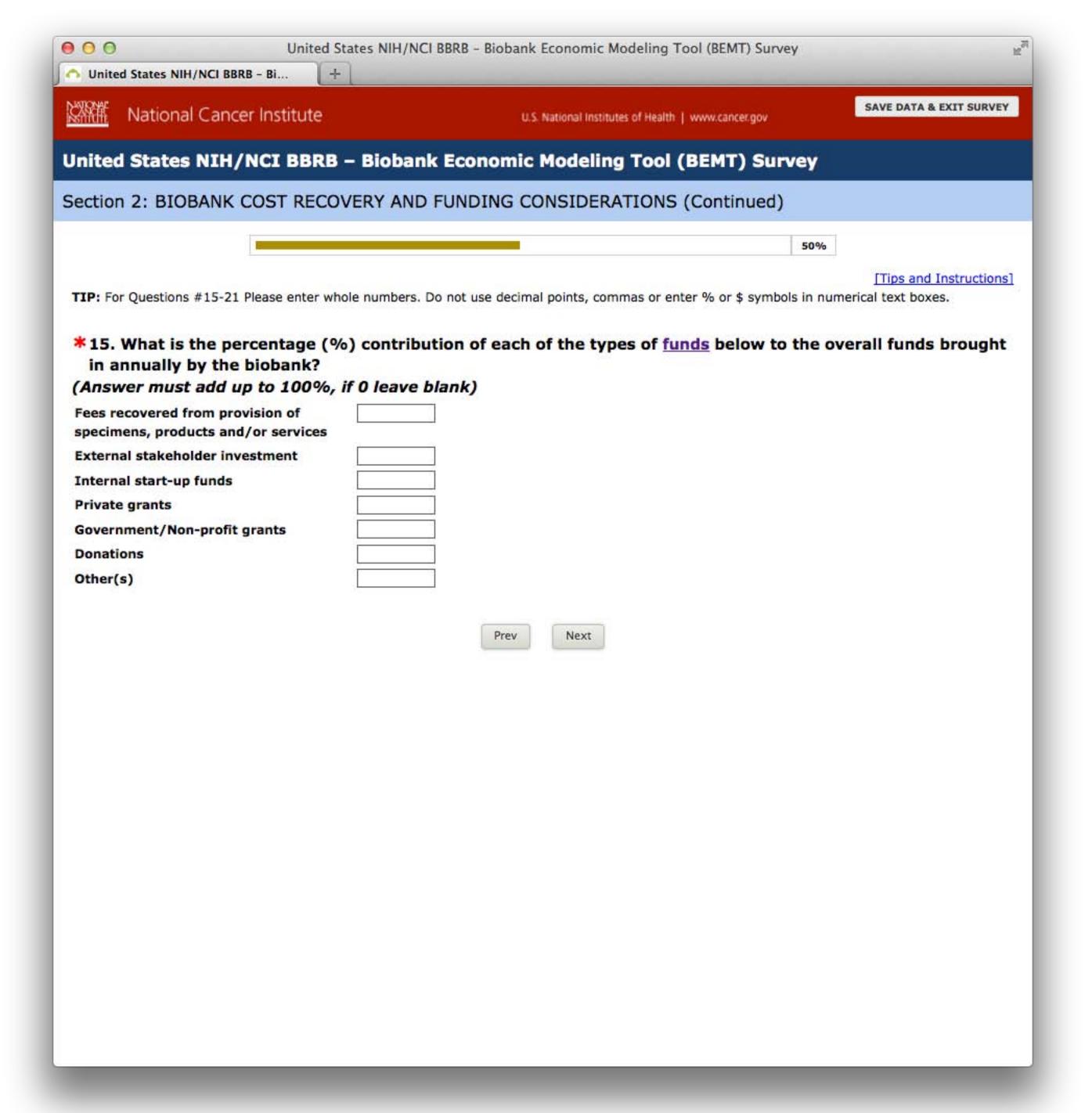
Prev Next



000	United States NIH/NCI BBRB - Biobank Economic Modeling Tool (BEMT) Survey
O United States NIH/NCI BBRB	B - Bi +
*7. In which country	y is your biobank headquarters located?
*8. In which geograp	phic region is your biobank headquarters located?
Urban (Within or immed	diately surrounding a metropolitan city)
Rural (Within or immed.)	diately surrounding a non-metropolitan city, town or countryside area)
*9. Are your biobank	k operations International?
No (My biobank operate	es solely within the country in which my headquarters is located)
Yes (My biobank operation	tes BOTH within and outside of the country in which my headquarters is located)
*10. What is your bid	obank's operating model?
Independent Individua	al specimen collection stored outside of a centralized repository.
Centralized Central phy as other physical locations.	ysical repository in which specimen collections are stored for use by multiple investigators collecting from central as well
Networked Several phy coordinated by a central office	ysical repositories encompassing multiple biobank collections across different institutions where access may or may not be ice.
Federated Network of a	decentralized sites where specimens and data across multiple sites can be virtually accessed as if they are a single site.
*11. How many oper	rating sites does your biobank have?
	dered to be any dedicated infrastructure over 250 square feet obank related collections and/or specimen related services.
*12. What is the total	al estimated size of your biobank facility?
<2000 ft ²	
2,001 to 5,000 ft ²	
5,001 to 15,000 ft ²	
15,001 to 50,000 ft ²	
50,001 to 100,000 ft ²	
>100,000 ft ²	
	Prev Next







● ● ● United S	tates NIH/NCI BBRB - Biobank Economic Modeling Tool (BEMT) Survey	M _M		
United States NIH/NCI BBRB - Bi				
National Cancer Institute	U.S. National Institutes of Health www.cancer.gov	SAVE DATA & EXIT SURVEY		
United States NIH/NCI BBRB	- Biobank Economic Modeling Tool (BEMT) Survey			
Section 2: BIOBANK COST RECO	VERY AND FUNDING CONSIDERATIONS (Continued)			
Section 2. BIODAIN COST NECO	VERT AND FORDING CONSIDERATIONS (CONTINUCA)			
	58%			
		[Tips and Instructions]		
		,		
*16. Of fees recovered annually	by the biobank, what percentage (%) is contributed by each	of the entity		
types below?				
(Answer must add up to 100%,	if 0 leave blank)			
Internal end users and projects				
Academic institutions				
Government institutions				
Pharmaceutical companies				
Biotech companies				
Private research laboratories				
Clinical research organizations				
Non-profit organizations				
Other(s)				
equipment, informatics system,	JSD) in total did your biobank spend on big-ticket item expense space planning & construction, furniture and furnishings) at (USD) did your biobank spend on each of the following big-ti	start-up?		
expenditures at start-up?				
Initial equipment (capital and non)				
Inventory management				
system/Informatics and computers				
Space planning and/or construction				
Furniture and furnishings				
Other (s)				
	total annual budget for operational expenditures (USD)? does your biobank spend annually (USD) on the operational	expenditures		
listed below?				
Employee payroll				
Staff/Management education and				
Vendors and consultants				
Additional equipment purchases				
(<u>capital</u> and non)				
Equipment maintenance and				
replacement				
Informatics, computers and electronics additions/upgrades				
Consumables				
Office supplies				
Rentals and leasing				
Off-site storage				
Certification and accreditation				
Travel and transportation				
Marketing and sales				
Vendors and consultants				
Other(s)				
*21. Approximately, what percentage (%) of your time do you allocate annually to performing the following activities for your biobank? (Answer must add up to 100%, if 0 leave blank) Specimen & service provision				
Building biobank inventory (specimens				
and/or data)				
Providing external education and				
training services				
Quality management & proficiency testing				
Facility operations & maintenance				
Biobank promotion, marketing and/or				
business development				
Administrative time				
Other(s)				
	Prev Next			

United States NILL/NGI BBBB 5			
United States NIH/NCI BBRB - E	Si +		
National Cancer Ir	stitute	U.S. National Institutes of Health www.cancer.	GOV SAVE DATA & EXIT SURVE
ited States NIH/NC	I BBRB – Biobank Economi	ic Modeling Tool (BEMT)	Survey
ction 3: BIOBANK COS	ST AND PRICE CONSIDERATION	ONS	
7			67%
			[Tips and Instruction
ease fill out the information	provided in the tables below and or	the following pages.	This and Instruction
	o guide other biobankers in their resource	e planning and to learn more about co	osts involved in running a biobank.
our time and effort is greatly a	opreciated.		
22. Estimated average	e annualized salary range (US	D), fringe benefit percentag	je (%) and number of FTE's fo
employees your bioba	nk budget supports:		
	Annualized estimated salary range (USD)	Estimated average annual fringe benefit %	Total full time equivalents (FTE)
ab technician	÷	‡	‡
isto-technician	÷	÷	÷
athology assistant	÷	;	÷
linical research coordinator	÷	÷	†
ata manager	÷	÷	÷
esearch assistant	÷	÷	‡
linical research associate	÷	· ;	÷
esearch/Study nurse	:	:	;
ab manager/supervisor	· ;	;	÷
epository manager	÷	÷	†
epository coordinator	÷	÷	÷
lead/Group/Team leader	÷	÷	÷
echnical/Executive director	;	;	÷)
ssociate/Scientific director	;	;	÷)
athologist	;	;	÷
ndividual researcher/scientist	;	;	;
linical resident/fellow	;	;	÷
lioinformatics professional	÷	÷	÷
liostatistician	÷	÷	÷
Susiness manager Deputy technical coordinator	;	:	•
thief operating officer (COO)			
thief technology officer (CTO)	÷	;	÷
thief financial officer (CFO)	÷	;	÷
thief commercial officer	;	;	÷
CCO)			
General manager	;	;	†
rogram/Project manager	÷	÷	‡
roduct manager	:	:	÷
Customer product/service	÷	÷	÷
epresentative Quality manager	÷)	:	÷
dvisor	÷	;	÷
dministrative/Executive	÷	;	÷
ssistant			
ther #1	÷	÷	÷
ther #2	÷	÷	*
ther #3	· ;	;	· ;
ther #4	÷	÷	÷
ther #5	:	:	÷
ther #6	÷	÷	÷
ther #7	;	;	;
other #8	÷	;	÷)
ther #9	;	;	;
Other #10	÷	:	‡
lease specify additional titles/r	oles for: Other #1, Other #2, Other #3	etc.	

The next three questions ask you about your biobank's capital equipment costs. Please note the questions are divided into three equipment categories: specimen collection and processing, sample management and storage, and specimen quality control and sample analysis. When selecting choices for "other", for each question please take care to list these choices in reference to the category of equipment being queried.

O United States NIH/NCI BBRB - Bi...

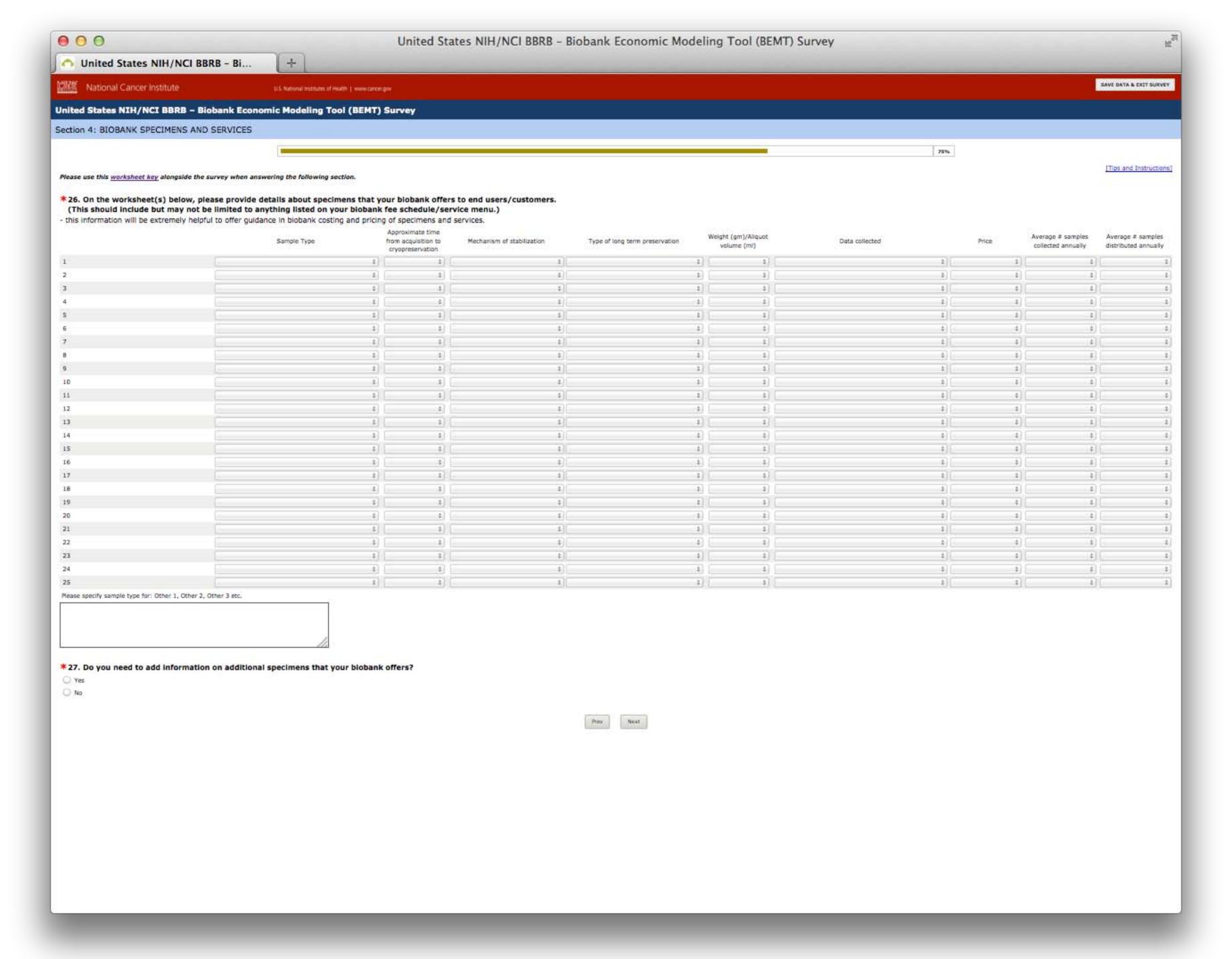
*24. What type of <u>capital equipment</u> do you currently have to support sample management and specimen storage?

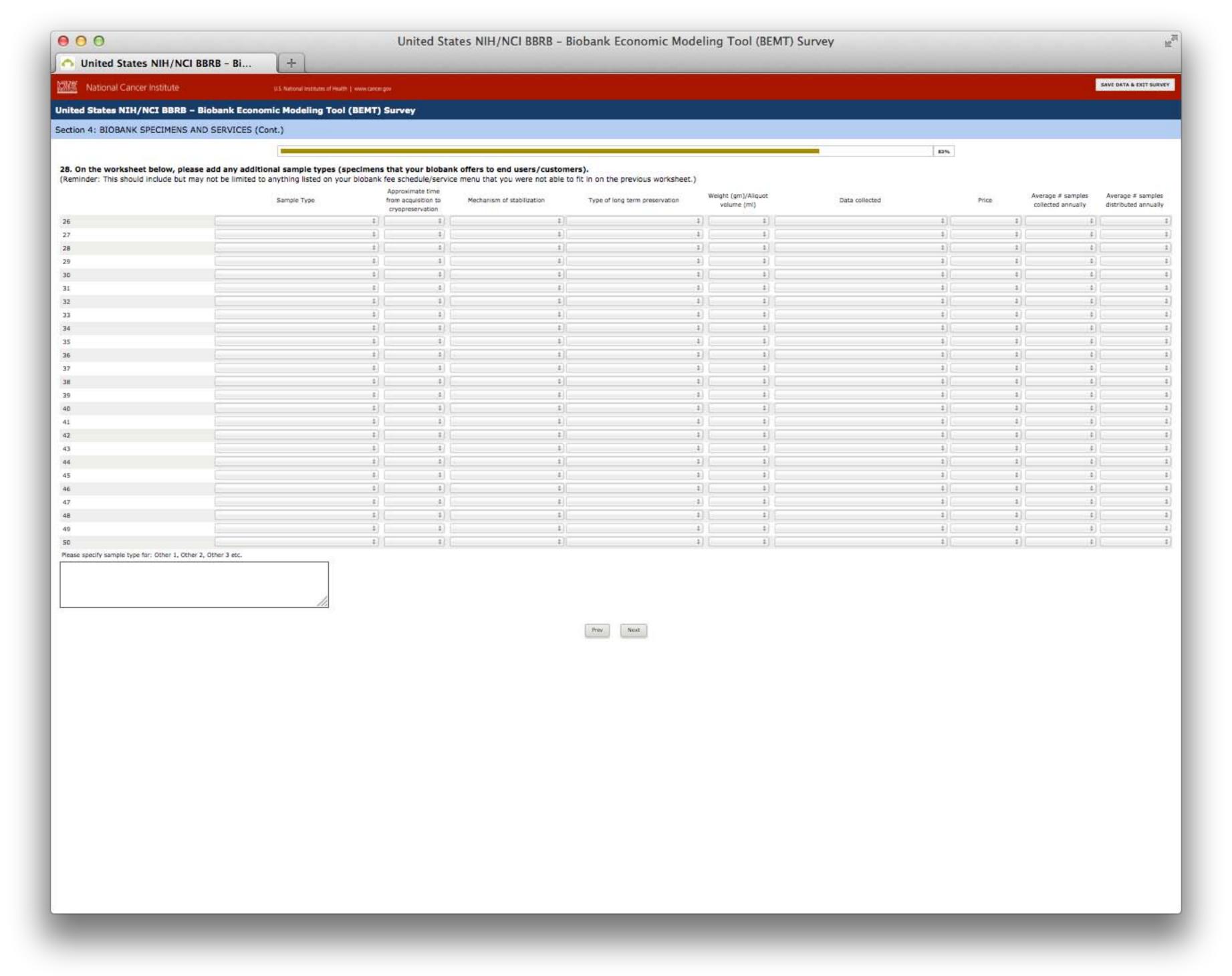
Select all that apply. If your biobank uses equipment which is not listed here, please list under "other".

	How many do you have of each?	Do you primarily buy or lease this equipment?	Estimated average purchase/annual lease price (USD)	How many years do you plan to keep equipment prior to replacing it? (usable life years)	Estimated annual service contract price (USD) per unit
Bulk label printer, bench-top	÷	÷	*	:	
Automated tissue cassette labeler, bench-top	‡	‡	÷)	÷	÷
Bulk sample labeler, bench-top	÷	;	;	:	÷
RFID flat scanner, multi-tray	÷	‡	;	÷	
Bar-code flat scanner, multi-tray	÷	÷	‡	;	*
Sample/tube picking & sorting station, bench-top	:	:	:	÷	÷
Sample/tube picking & sorting station, stand-alone	÷	÷	÷	÷	÷
Sample volume tube/plate auditor checking station, bench-top	:	:	:	÷	÷
Sample volume tube/plate auditor checking station, stand-alone	÷	÷	÷	÷	÷
Automated sample capper-de-capper, bench-top	÷	:	:	÷	:
Automated plate/ tube sealer module, bench-top	÷	*	*	•	÷
Automated plate piercer	‡	÷	÷	÷	
Automated microplate dispenser/sample processor, benchtop	‡	*	÷	÷	÷
Automated microplate washer, bench-top	÷	÷	‡	÷	:
Tube puncher and selecting module, bench-top	‡	‡	÷	÷	÷
Cryo-cart		‡	;	:	÷
Dry vapor shippers, large	÷	‡	;	‡	‡
Protective shipping carton, industrial	÷	‡	‡	÷	:
Large cryogenic aluminum Dewar's	:	÷	;	;	:
-20°C to -40°C Refrigerator	÷	÷	:	;	;
-80°C Manual vertical freezer	:	÷	;	;	:
-80°C Manual chest freezer	÷	\$;	:	:
-148°C Manual vertical freezer	÷	‡	;	÷	÷
-148°C Manual chest freezer	‡	‡	‡	;	÷
-20°C to -148°C LN2 cryotank	÷	÷	;	;	:
-149°C to 190°C LN2 cryotank	;	÷	÷	;	÷
-20°C Automated biostore	:	÷	÷	:	÷
-20°C to -40°C Automated biostore	÷	‡	;	;	÷
-20°C to -80°C Automated biostore	‡	•	‡	‡	:
-80°C Automated biostore	‡	†	;	‡	÷
Cryogenic cabinet freezer	÷	÷	;	÷	:
Cold room/walk-in	‡	‡	‡	÷	÷
Other #1	÷	÷	;	:	:
Other #2	:	‡	÷	:	÷
Other #3	÷	÷	:	:	:
Other #4	:	‡	÷	÷	:
Other #5	÷	÷	÷	:	:
Other #6	÷	÷	÷	:	:
Other #7	÷	÷	:	:	:
Other #8	÷	÷	:	:	:
Other #9	÷	÷	‡	÷)	:
Other #10	:	:	‡	:	:
Please specify what equipment you referer	ced in Other #1 Other	er #2, other #3 etc			120

United States NIH/NCI BBRB - Biobank Economic Modeling Tool (BEMT) Survey United States NIH/NCI BBRB - Bi + *25. What type of capital equipment do you currently have to support specimen quality control and sample analysis? Select all that apply. If your biobank uses equipment which is not listed here, please list under "other".					
	How many do you have of each?	Do you primarily buy or lease this equipment?	Estimated average purchase/annual lease price (USD)	How many years do you plan to keep equipment prior to replacing it? (usable life years)	Estimated annual service contract pri (USD) per unit
icroscope	÷	;	;	;	
ansmission electron microscope	‡	÷	÷	÷	
ene array scanner workstation	÷	:	÷	÷	
ow cytometer	\$	‡	‡	÷	
utomated blood fractionation system	÷	÷	÷	:	
gh through-put screening instrument	÷	÷	;	:	
eal time PCR system	÷	:	;	:	
CR thermal cycler	‡	÷	÷	:	
asmid processing station	÷	÷	;	÷	
estern blot transfer system	÷	÷	:	÷	
ot hybridization system	÷	;	;	÷	
ass spectrometer	‡	‡	:	÷	
NA/RNA sequencing system/analyzer	÷	÷	;	÷	
rbital bath shaker, bench-top	÷	;	:	:	
eagent dispenser	÷	÷	;	÷	
utoclave	÷	‡	;	÷	
afety cabinet	÷	‡	‡	÷	
ean room	÷	†	‡	÷	
ser Capture Microdissection System	÷	*	†	(;)	
ther #1	÷	÷	÷	:	
ther #2	÷	†	†	(;)	
ther #3	÷	÷	;	:	
ther #4	÷	÷)	;	:	
ther #5	:	:	:	:	
ther #6	÷	:	÷)	:	
ther #7	÷	÷	‡	÷	
ther #8	÷	‡	†	÷	
ther #9	÷	÷	÷)	:	
	;	:	;)	:	

Next





● ○ ○ United States NIH/NCI BBRB - Biobank	Economic Modeling Tool (BEMT) Survey
Onited States NIH/NCI BBRB - Bi	
National Cancer Institute	
AATT National Cancer Institute	U.S. National Institutes of Health www.cancer.gov
	SAVE DATA & EXIT SURVEY
United States NIH/NCI BBRB - Biobank Econ	omic Modeling Tool (BEMT) Survey
Section 4: BIOBANK SPECIMENS AND SERVICES (Cont)
Section 4: BIOBANK SPECIMENS AND SERVICES (cont.)
	92%
	[Tips and Instructions]
	[Tips and Instructions]
*20 Approximately what do you shares (USD) p	or enceimon for each of the cample testing related
services below?	er specimen for each of the sample testing related
	(USD) for the service
Specimen collection kit assembly and shipping	the service
Specimen transport	•
Immunohistochemistry (IHC) testing	•
In-situ hybridization (ISH) testing	÷
RNA Integrity number (RIN) testing	•
Biospecimen proficiency testing	•
Genetic testing	•
SNP genotyping	•
DNA sequencing	•
RNA sequencing	•
Gene expression profiling (DNA, RNA, protein)	•
Mass spectrometry 2-D protein profiling	÷
Mass spectrometry protein profiling, isotope tagging method	÷)
Protein microarrays ("Protein chip")	±
Pathology case review for clinical diagnosis and morphological confi	irmation ‡
Pathology external consult, case review	•
Copy of pathology report	•
Specimen biosketch report	÷
Other #1	÷
Other #2	÷
Other #3	÷
Other #4	÷)
Other #5	÷
Other #6	÷)
Other #7	÷
Other #8	÷
Other #9	÷
Other #10	÷)
Please specify Service for: Other #1, Other #2, Other #3 etc.	

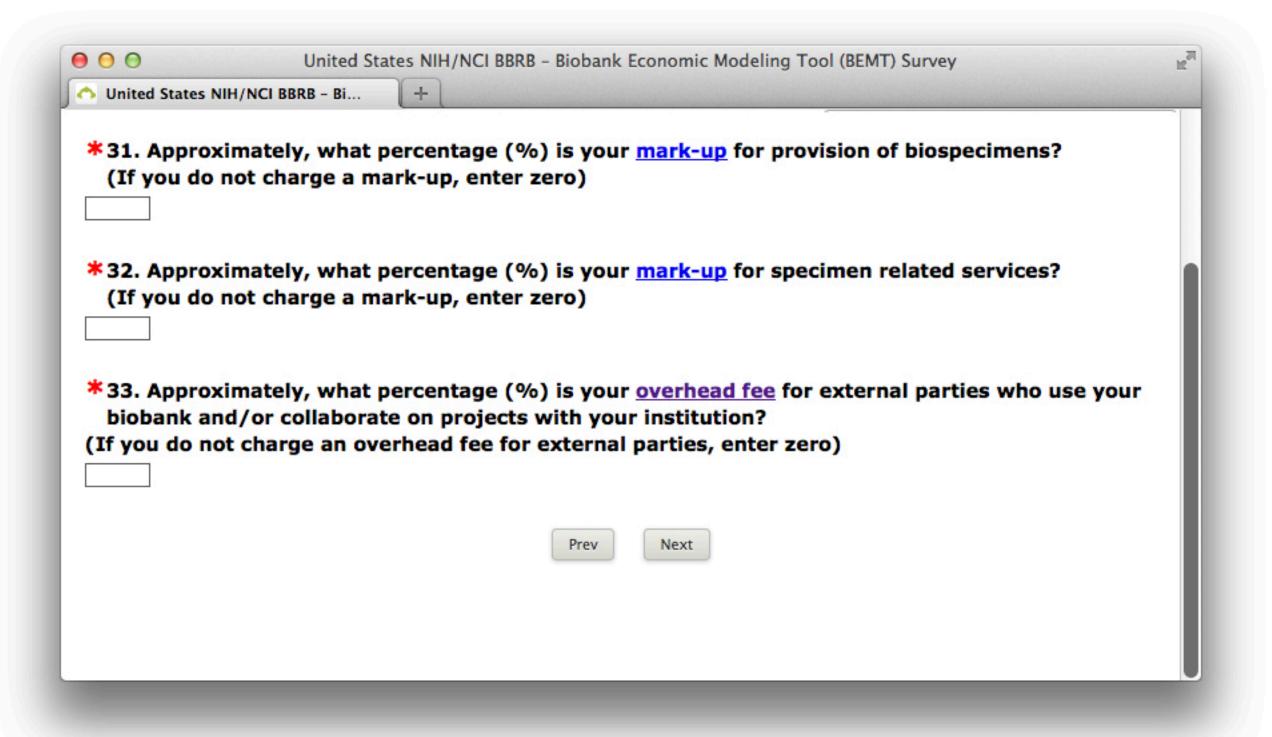
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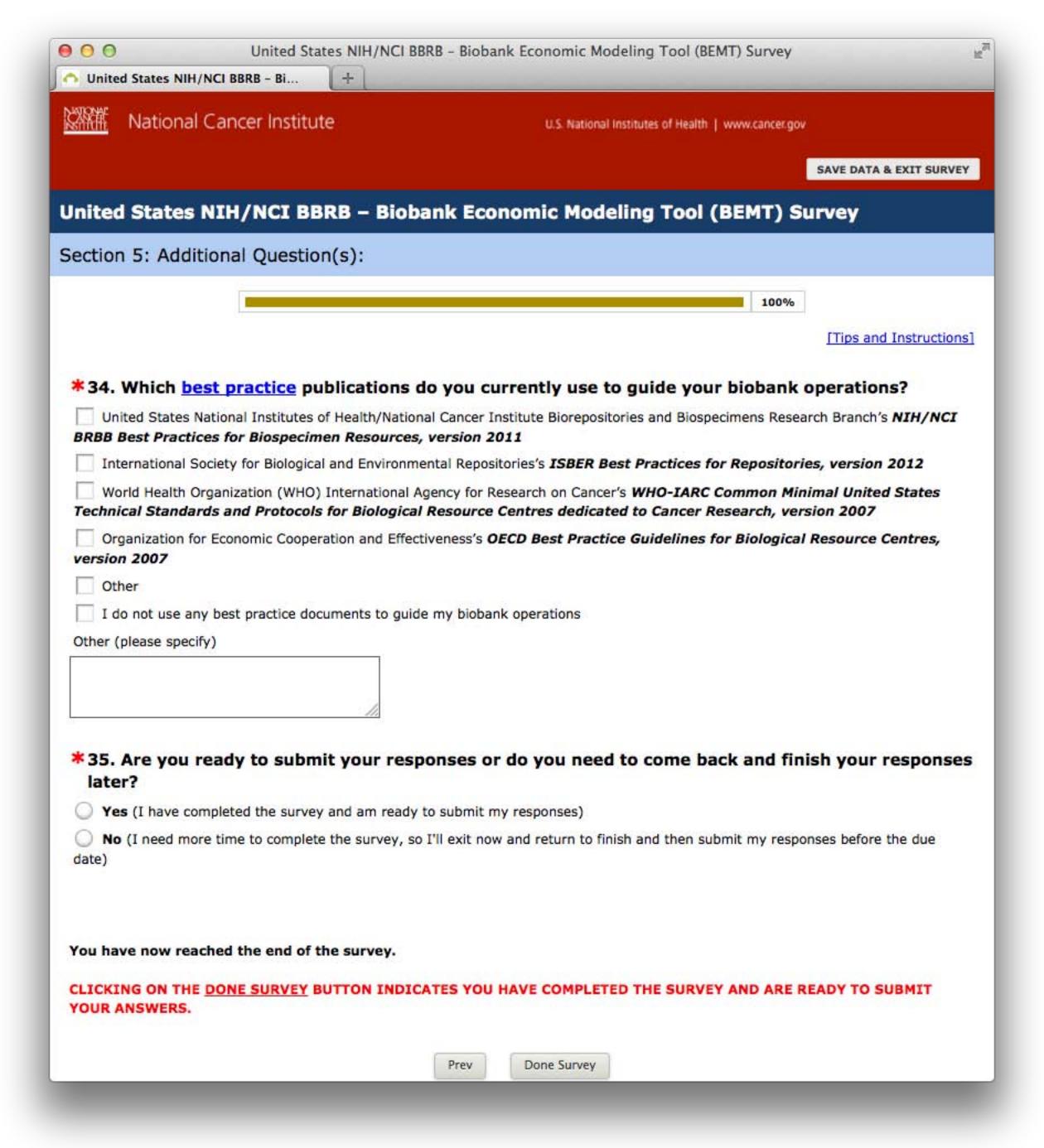
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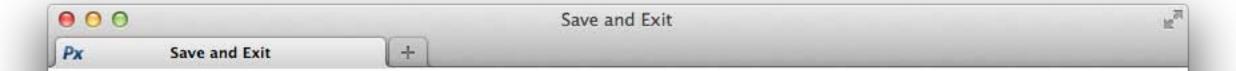
*30. Approximately, what do you charge (USD) per project for each of the biobanking project related services below?

(USD) for the service

	(ODD) for the service
Biobanking project/protocol consultation	‡
Biospecimen protocol and/or consent writing	÷
Biospecimen protocol regulatory submission	÷
Biospecimen procedure/SOP writing	÷
Biospecimen inventory management database consultation	‡
Biobank technical support, in- or out-sourced	‡
Evaluating and/or consenting donors for specimen and/or data collection	÷
Return of biospecimen research results to study participants and/or specimen donors	‡
Sample collection inventory management	‡
Sample storage and monitoring	÷
Biobank inventory management database quality/best practice review audit	‡
Sample collection inventory management quality/best practice/regulatory review audit	÷
Sample collection inventory management, transfer and/or relocation	‡
Sample collection inventory management, culling	‡
Sample collection inventory management, disaster recovery	‡
Biobank consumable/supply ordering support	‡
Specimen collection kit assembly and shipping	‡
Specimen transport	‡
Annual biospecimen/project collection report	‡
Education and training	÷
Study cohort selection	‡
Biospecimen proficiency testing (sample set)	‡
Other #1	‡
Other #2	÷
Other #3	<u>+</u>
Other #4	÷
Other #5	÷
Other #6	‡
Other #7	‡
Other #8	÷
Other #9	÷
Other #10	†
Please specify Service for: Other #1, Other #2, Other #3 etc.	







If you indicated you ARE DONE with your survey submission, please read:

You have noted that you have completed the BEMT survey. If we have any questions, we will contact you by email and/or phone.

If you decided to Save and Exit and you are NOT DONE with your survey submission, please read:

You have exited the survey, noting that you'll return to complete your answers. You will be able to return to the survey before "date pending" to enter remaining data and edit any answers. We look forward to completion of your survey and its submission. Please remember that all responses need to be received by "X". Please note that you may receive reminder emails every 2 weeks until the survey submission is complete or the submission period expires.

All please read:

If you have any questions, please contact Lisa Miranda at lisabmiranda@provialabs.com.

Thank you; we greatly appreciate the generosity of sharing your time and expertise.

Sincerely,

Helen M. Moore Ph.D, Jeff McLean, Howard Greenman and Lisa Miranda on behalf of the entire BEMT Project Team.