



Tissue Consent

Exotic Genome Project • Ostrander Lab • National Institutes of Health

Research Statement:

Our genomics laboratory would like to obtain a sample of cells from your exotic’s tissue. DNA/RNA extracted from the sample will help us better understand genetic issues related to health, including patterns of genetic diversity between individuals, populations, subspecies and species, disease susceptibility, as well as genetic correlation with other observable characteristics.

What are the risks involved with tissue collection?

This letter of understanding is to clarify the circumstances under which blood and tissue samples from your organization will be provided to my laboratory for the preparation of DNA. This laboratory will not determine or direct which of your animals will be sampled, nor will we direct or determine the timing of the sampling from your animals. Samples needed for this study are collected from the tissues normally discarded by you or your veterinarian after a routine surgery. Your veterinarian will inform you of the risks associated with the tissue collection procedure. However, there will be no additional risk posed to your pet by the collection of samples from the discarded tissue. Tissues include, but are not limited to: whole blood, tumors and metastases, or gonads in the event of spay or neuter.

NIH and its employees will not be liable for any damage or injury sustained by any person or persons or property as a result of the collection process.

Who will have access to the information and specimen?

Only the Ostrander lab staff and their direct collaborators will have access to the information you provide and the DNA/RNA sample from your exotic animal. These data will not be used to direct mating or distribution of your animals. No information or DNA/RNA will be shared with other members of the exotic husbandry or any other community, unless specifically approved in writing. Your contribution will be identified in talks and published studies only by a unique study ID number. Your animal's pedigree, microchip number, and any other personally identifiable data, including your contact information, will be kept strictly confidential. It is understood that no unused DNA/RNA will be returned to you, no individual-specific results will be provided, and that study participants have no claim on intellectual property or patents resulting from the use of DNA/RNA samples.

We would like to be able to contact you for follow up information about your feline or progress on our research. If you do not wish to be recontacted, please check here:

No, I do not wish to be contacted regarding my sample donation.

Owner’s Statement:

I have read the information provided above and have had an opportunity to ask questions regarding the procedures involved. I am the owner or the agent for the owner of the animal(s) described below or attached pages and I have the authority to execute this release. My signature below indicates I voluntarily agree to give my feline’s tissue specimen for this study.

Owner’s Signature _____

Date _____

Please Print Your Name _____

Email Address _____

Phone _____

Street Address _____

City _____ State _____ Zip _____

Is a 3rd generation pedigree available: YES NO If so, please include a copy if possible.

Thank you for donating to research in to medical genomics!

For EACH animal sampled, please print and fill out this form:

Owner Name		Animal Name	
Date of Birth	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Date of sample collection
Species	Sample Collector's Name		
Subspecies (if known)	AVID microchip # (if available)	Sample Tissue (skin, gonad, tumor, etc.)	
Sire name	Dam name	Sample blood volume (# vials, # mL)	
Health information, including coat color , known ailments , cancer , and behavioral data.			
Additional comments; including original source of animal (rescue location, born on-site, etc.), sibling identities, or other information specific to this individual.			

PLEASE INCLUDE A PHOTO (DIGITAL OR PRINT) IF AVAILABLE