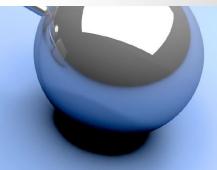


BBMRI.at

Biobanking and BioMolecular resources Research Infrastructure Austria



Defining and Capturing Process Quality in RD-Connect Heimo Müller, Robert Reihs Berlin, 19 February 2015

catalogue.rd-connect.eu www.bbmri.at

Objectives

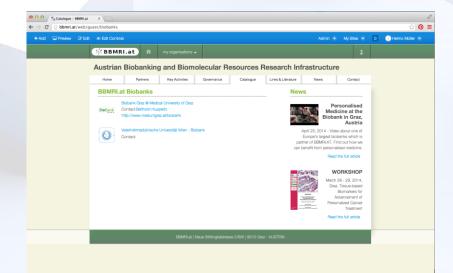


- To build a map of RD biobanks starting from European biobank networks already established with EU support and large networks outside Europe
- **To provide a common portal (ID card) for biobanks and registries**
- Motivate biobanks and registries to self-maintain their ID card
- Analyse questionares
- Provide an interface (human and machine readable) to the database



Software Components from different projects

RD-Connect, BBMRI.at, BBMRI-LPC, BioMedBridges, BibBoX



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Mapping of RD-Connect

Mapping of 2074 registries and 608 biobanks from several sources done

EuroBioBank, BBMRI, Orphanet,, Neuromics, Epirare, Eurocat, SCNIR, hqip, cordis, treat nmd, edfs,

- Remove duplicates and review unified list:
 981 registries / 506 biobanks
- ID Card System with a Core Implementation Group (CIG)
- Roll-Out started end of October 2014 with first Biobanks and Registreis
 - **94 Registries Invited**
 - Biobank Panel Assessment established



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	BBMRI	.at 🏦 🖷	ny organisations 🚽		*
	ID # 138502	Date of Inclusion: 13/	05/2014 L	ast Activities: 30/06/2014	
	Bic	Bank	Biobank G University	raz @ Medical of Graz ∡	http://www.medunigraz.at/biobank
	University	ion of the Biobank Graz y of Graz, is to support n opment of improvement	esearch on the cau	use of diseases and	Neue Stiftingtalstraße 2 Tel.+43-316-385-72716 8010 Graz Austria
	Home	Collections	SOPs	Documents	Main contact A Karine Sargsyan karine.sargsyan@medunigraz.at
	Overview				People
	Biobank Gr Acronym: BB-M	raz @ Medical Uni	versity of Gra	az	Your request completed successfully.
	Source of fundi Year of establis	hment: 2001			Berthold Huppertz / Director
		Prphanet, BBMRI			editor bbmri.at /
		ogy for phenotypic data o ogies used: Human Phe	notype Ontology		Robert Primschitz / Information Technology
	Biomaterial avai	le: Not applicable			

RD-Connect ID-Card

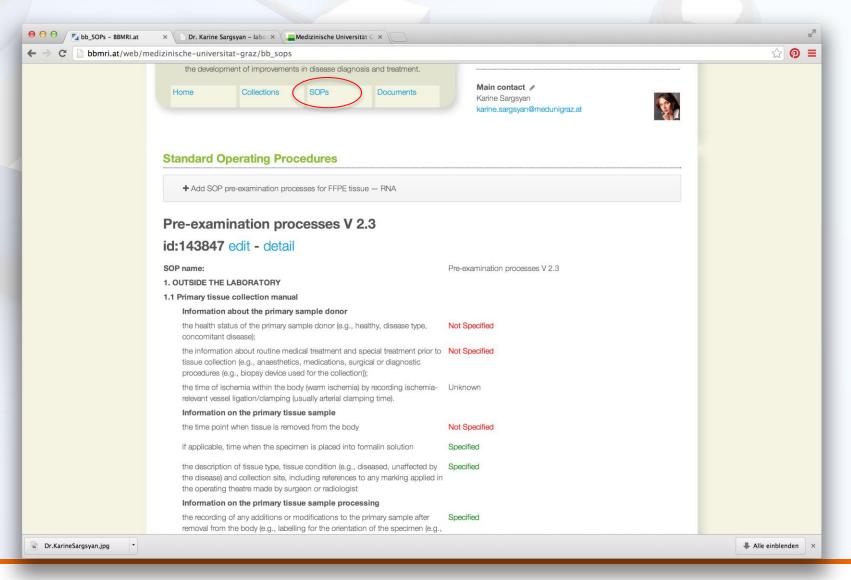


- Overview of all Registries/Biobanks in the Catalogue
- Recent activities of Registries/Biobanks
- Search for Disease codes
 - **ORPHA52**
 - Dent disease



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	The mission of the Biobank University of Graz, is to sup the development of improve	port research on the caus	se of diseases and	Neue Stiftingtalstraße 2 8010 Graz Austria	Tel.+43-316-385-72716	
	Home Collections	s SOPs	Documents	Main contact 🖋 Karine Sargsyan karine.sargsyan@medunigraz.at		
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	accronym:		TC.patho			
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CEN Standards

- CENTC_140_tissue_FFPE-protein_LL_20140408.doc CENTC_140_tissue_protein-cryo_20140408.doc
- CENTC_140_WG 3_blood_cellular RNA_20140206.doc
- CENTC_140_WG 3_blood_genomic DNA_20140206.doc
 - CENTC_140_WG 3_tissue_FFPE_DNA_20140206.doc
- CENTC_140_WG 3_tissue_FFPE_RNA_20140408.doc
- CENTC_140_WG 3_tissue_frozen_RNA_20140



Q. Im Dokument si

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It may not always be possible to maintain a standardized out and semi schemia times temperature of the laseus apacement below freezing, depending e.g., on the modual te underlying disease. Therefore, the line until the apaciman is fearer and the ambient freezing shall be concentrated at the primary sample collection facility. Where the approximation of the standard standard standard standard and the ambient is connected) product is not used in accordance with the manufactures' instructions, and and professional is with the user.	Specimens should be RNA profile changes temperatures in offer should be classified a NOTE Accidentally degradation when the to
on transport and handling shall be considered (see EN ISO 15189:2012, 5.4.5 and	5.2 Transport requi
laboratory	The laboratory in parts procedure of the speci
e collection manual	The primary taske an minimize the RNA pro-
about the primary sample donor	The required condition
should include, but is not limited to:	any deviations therein
status of the primary sample donor (e.g., healthy, disease type, concomitant disease);	NOTE The transport
tion about rousine medical treatment and special treatment prior to tissue collection (e.g., is, medications, surgical or diagnostic procedures (e.g., biopsy device used for the	6 Inside the lab
	6.1 Information on I

Ab 2 Seiten: 7 von 14 Wörter: 1288 von 3972

- b) 3pa. Information about routive medical treatment and special treatment prior to lissue collection (e.g., anaesthetics, medications, surgical or dispositic procedures (e.g., tipopy device used for the collection));;
 c) 3pa. time of ischemia within the body (warm ischemia) by recording ischemia-relevant vessel [sglonciteming/usualy strate] clarong time).
- 5.1.2 Information on the primary tissue sample
- documentation shall include, but is not limited to: a) dag time point when tissue is removed from the body
- b) tigs time of freezing the tissue sample (to determine the lag time; time period between removal the body until freezing of the sample);
- c) Dat description of Sasue type, Issue condition (e.g., diseased, unaffected by the disease) and collection site, including references to any marking applied in the operating theater made by surgeon or radiologist.
- 5.1.3 Information on the primary tissue sample proof The following steps shall be done:
 - Gas recording of any additions or motifications to the primary sample after removal from the body (e.g., labeling for the orientation of the specimen (e.g., int-marking, stitches), indision(s));
 Bas election and use of transport containers and packages (e.g., cooling lox, box for storing and transportation, valuum packages);

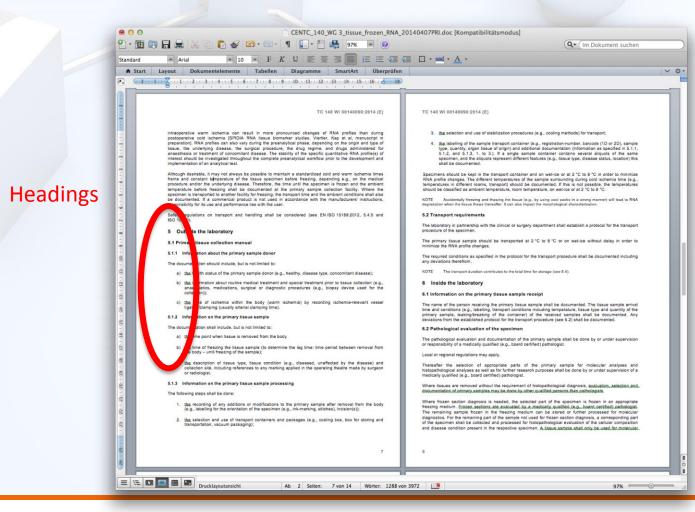
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ENTC_140_WG 3_tissue_frozen_RNA_





Heading / Structure of the CEN Standard

Table 1 – SOP information categories: pre-examination processes for frozen tissue to RNA $\textcircled{\label{eq:result}}$

D	ocumentation /Information Category	Attribute Category
In	formation about the primary sample donor	NS/GPS/GS
•	the health status of the primary sample donor (e.g., healthy, disease type, concomitant disease);	NS/DFS
•	the information about routine medical treatment and special treatment prior to tissue collection (e.g., anaesthetics, medications, surgical or diagnostic procedures (e.g., biopsy	NS/DFS
	device used for the collection)); the time of ischemia within the body (warm ischemia) by	NS/DFS
	recording ischemia-relevant vessel ligation/clamping (usually	Narbra
n	arterial clamping time). formation on the primary tissue sample	NS/GPS/GS
	the time point when tissue is removed from the body	NS/DFS/GS
	the time of freezing the tissue sample (to determine the lag time: time of freezing the tissue sample (to determine the lag time: time period between removal from the body – until freezing of the sample):	NS/DFS
	the description of tissue type, tissue condition (e.g., diseased, unaffected by the disease) and collection site, including references to any marking applied in the operating theatre made by surgeon or radiologist.	NS/DFS
n	formation on the primary tissue sample processing	NS/GPS/GS
•	the recording of any additions or modifications to the primary sample after removal from the body (e.g., labelling for the orientation of the specimen (e.g., ink-marking, stitches), incision(s));	
•	the selection and use of transport containers and packages (e.g., cooling box, box for storing and transportation, vacuum packaging);	NS/DFS
•	the selection and use of stabilization procedures (e.g., cooling methods) for transport;	NS/DFS
•	the labelling of the sample transport container (e.g., registration number, barcode (1D or 2D), sample type, quantity, organ tissue of origin) and additional documentation	NS/DFS
•	If a single sample container contains several aliquots of the same specimen, and the aliquots represent different features (e.g., tissue type, disease status, location) this shall be documented.	NS/DFS
Γr	ansport requirements	NS/GPS/GS
	The laboratory in partnership with the clinical or surgery department shall establish a protocol for the transport procedure of the specimen.	NS/DFS
•	The primary tissue sample should be transported at 2 °C to 8 °C or on wet-ice without delay in order to minimize the RNA	NS/DFS/VS
•	profile changes. The required conditions as specified in the protocol for the transport procedure shall be documented including any deviations therefrom	NS/DFS
In	formation on the primary tissue sample receipt	NS/GPS/GS
•	The name of the person receiving the primary tissue sample shall be documented.	NS/DFS
•	The tissue sample arrival time and conditions (e.g., labelling, transport conditions including temperature, tissue type and	NS/DFS

•	quantity of the primary sample, leaking/breaking of the container) of the received samples shall be documented. Any deviations from the established protocol for the transport procedure shall be documented.	NS/DFS
Pa	thological evaluation of the specimen	NS/GPS/GS
•	The pathological evaluation and documentation of the primary sample shall be done by or under supervision or responsibility of a medically qualified (e.g., board certified) pathologist. Thereafter the selection of appropriate parts of the primary	NS/DFS
	sample for molecular analyses and histopathological analyses as well as for further research purposes shall be done by or under supervision of a medically qualified (e.g., board certified) pathologist.	NS/DFS
•	Where tissues are removed without the requirement of	
	bistopathological diagnosis, evaluation, selection, and, documentation of primary samples may be done by other, qualified persons than pathologists.	NS/DFS
•	Where frozen section diagnosis is needed, the selected part of	100.000.000
	the specimen is frozen in an appropriate freezing medium. Erozen sections are evaluated by a medically qualified (e.g., board certified) nathologist. The remaining sample frozen in the	NS/DFS
	freezing medium can be stored or further processed for molecular diagnostics. For the remaining part of the sample not	
	used for frozen section diagnosis, a corresponding part of the specimen shall be collected and processed for histopathological.	
	evaluation of the cellular composition and disease condition present in the respective specimen.	
•	A tissue sample shall only be used for molecular testing after, bistopathological characterization of its cellular composition, disease condition and preservation status by a medically.	NS/DFS
	qualified (e.g., board.certified).pathologist	· · · · · · · · · · · · · · · · · · ·
Cr	yo-preservation of the specimen	NS/GPS/GS
•	the recording of freezing procedure (e.g., freezing in liquid nitrogen, snap-freezing in isopertance cooled by liquid nitrogen or dry ice, freezing in an appropriate freezing medium, freezing with controlled cooling rate);	NS/DFS
•	the recording of freezing time point:	NS/DFS
•	the tissue size determines the size of the container and the sample should not exceed 1 cm in one dimension;	NS/DFS/VS
•	the selection of the sample container for croo-storage the labelling shall be suitable for the respective frozen storage conditions	NS/DFS
•	the labelling of the ergo-storage container shall contain the minimum information of (a) the patient ID, which can	NS/DFS
•	be in the form of a code; the basic information on e.g., the tissue type, tissue and disease condition such as affected (e.g., tumor) or unaffected, unless a	NS/DFS
	sample tracking system can supply this information coupled to the identification of the sample used in	
Ste	orage requirements	NS/GPS/GS
•	The constant temperature shall be below -70 °C. Systems monitoring the temperature should be used.	NS/DFS/VS

Description of groups of attributes (sections)

÷

NS=non specified

GPS=group partialy, specified

GS=group specified.

Description of items within groups

NS= non specified DFS=data field given

VS=value specified

Table 1 - SOP information categories: pre-examination processes for frozen tissue to RNA

Documentation /Information Category	Attribute Category
Information about the primary sample donor	NS/GPS/GS
 the health status of the primary sample donor (e.g., healthy, disease type, concomitant disease); 	NS/DFS
 the information about routine medical treatment and special treatment prior to tissue collection (e.g., anaesthetics, medications, surgical or diagnostic procedures (e.g., biopsy device used for the collection)); the time of ischemia within the body (warm ischemia) by 	NS/DFS NS/DFS
recording ischemia-relevant vessel ligation/clamping (usually arterial clamping time).	
Information on the primary tissue sample	NS/GPS/GS
 the time point when tissue is removed from the body 	NS/DFS
 the time of freezing the tissue sample (to determine the lag 	NS/DFS





SOP-Mapping within ID-Card

Describe your SOPs within ID-card portal

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tandard (Dperating Pro	cedures		
Pre-exan	nination pro	ocesses V	2.3	
d:143847	edit - detai	l		
OP name:				Pre-examination processes V 2.3
. OUTSIDE THI	E LABORATORY			
.1 Primary tiss	ue collection manua	ıl		
Informatio	n about the primary	sample donor		
the health s concomitan	tatus of the primary sa t disease);	ample donor (e.g.,	healthy, disease type,	Not Specified
tissue collec	ion about routine mec ction (e.g., anaesthetic (e.g., biopsy device us	s, medications, su	0 0	Not Specified
	schemia within the ho	dy (warm ischemia	a) by recording ischemia-	Unknown



SOP-Mapping within ID-Card

(Easy) editing by biobank editors

Specified	
Specified	Ŧ
	ased, unaffected by the disease) and collection site, including references to any marking
applied in the operating theatre made by surgeon or radi	Diogist
Specified	2
Not Specified	
Unknown	
	nary sample after removal from the body (e.g., labelling for the orientation of the
pecimen (e.g., ink-marking, stitches), incision(s))	
Specified	





Beta Test ongoing within the RD-Connect ID card and the BBRMI.at Portal

SOP mapping can be connected to collections / sample descriptions

			bb_SOPs - BBM		K ₂₁
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Univers	sion of the Biobank Graz, ity of Graz, is to support re elopment of improvement	research on the ca	use of diseases and	8010 Graz Austria	
Home			Main contact Karine Sargsyan karine.sargsyan@medunigraz.a	t 👔	
Pre-exa	amination pro	ocesses V	/ 2.3	Pre-examination processes V 2.3	
1. OUTSIDE	THE LABORATORY				
1.1 Primary t	issue collection manua	al			
	tion about the primary				
the healt	h status of the primary sa itant disease);		healthy, disease type,	Not Specified	
tissue co	the information about routine medical treatment and special treatment prior to tissue collection (e.g., anaesthetics, medications, surgical or diagnostic procedures (e.g., biopsy device used for the collection));			Not Specified	
	e of ischemia within the body (warm ischemia) by recording ischemia- t vessel ligation/clamping (usually arterial clamping time).			Unknown	
Informa	tion on the primary tiss	sue sample			
the time	point when tissue is removed from the body			Not Specified	
if applica	able, time when the specir	men is placed into	formalin solution	Specified	
the description of tissue type, tissue condition (e.g., diseased, unaffected by the disease) and collection site, including references to any marking applied in the operating theatre made by surgeon or radiologist		e Specified			
disease)		on or radiologist			
disease) operating			essing		



- Get an overview of the structure of the SOPs used (what is defined)
- Compare Collections on the collection process
- Quality improvement indicator for a biobank/network

Next Steps

- Extend the information collected on values (licensing?)
- Create SOPs out of the entered data
- Compare SOPs structured in the same way

THANK YOU!



 Peter, Marco, Lucia, Peter, Moris, David, Roxanna (WP3)

Sabina, Paola, Gaelle, Estrella, Domenica,
 Filippo, Luca (WP2)

Horst (BBMRI)