STANDARD OPERATING PROCEDURE 15

TITLE: LABELLING SAMPLES STORED IN THE BIOBANK

Purpose
The purpose of this SOP is to describe the procedure to be followed to label samples that are stored in the BioBank freezers.

Scope
BioBank Staff

Responsibilities
Working within HSE and HTA guidelines as well as any local rules.

Materials
Equipment
Consumables

-80°C freezer
Colour-coded cryoboxes
Cryobox storage racks

General Procedures Before labelling for Storage
The records management system developed in the BioBank permits detailed records to be made concurrently with the performance of each step in the collection, processing and distribution of samples.

1. Records are maintained in a manner that allows steps to be clearly traced and ensure the samples chain of custody
2. The confidentiality and security of all stored records should maintained at all times.
3. Access to the records should also be on a ‘need to know’ basis, according to HSE, HTA and local rules (e.g. local ethics committee).
4. There is a uniform system of recording, allowing effective record taking and sample tracing.
5. Records should be readily available for inspection by authorised personnel from regulatory agencies (e.g. local HTA inspector).
6. Backup records should be taken monthly, or fortnightly, depending on the volume of samples processed, recorded on a CD-ROM and stored in a specified location.

Procedure

1. Each container should receive a computer printed label that tightly adheres under all projected storage conditions. Information encoded on the labels should be resistant to all common laboratory solvents.
2. Labels should include readable or clearly coded indications as to what is stored in the containers.
3. The storage racks used by the Biobank should hold 16 cryoboxes in a 4x4 array. The racks should be labelled numerically (eg HIV 1, HIV 2, HIV 3, etc., BAC 1, BAC 2, BAC 3, etc.).
4. The cryoboxes used by the BioBank are colour coded (yellow=HIV, green=bacteraemia, blue=Hepatitis B) and should be labelled with the rack number followed by alphabetical labelling (A-H, J, K, M, N, P-S) (eg in the first rack: 1A, 1B, 1C, 1D, 1E, 1F, 1G, 1H, 1J, 1K, 1M, 1N, 1P, 1Q, 1R, 1S
In the second rack: 2A, 2B, 2C, 2D, 2E, 2F, 2G, 2H, 2I, 2K, 2M, 2N, 2P, 2Q, 2R, 2S, and so on).
5. The most current storage rack with boxes should be kept in one of the -80°C freezers in rooms 3.26 and 3.28 of the CL3 unit. Labelled 1.5ml centrifuge tubes containing processed fractions (plasma, blood cell, granulocyte-rich) derived from infected blood should be placed in the appropriately coloured and labelled cryoboxes in rows.
6. The storage location of the sample should be recorded on the storage location datasheet (ie. the rack number followed by the cryobox letter and the row number) together with the type of sample and number of aliquots held in each row.
5. When full, the racks containing the storage boxes should be removed from the CL3 unit for long-term storage in the -80°C freezers as described in SOP 13.

Health and Safety

1. All processing of infected blood will take place in the CL3 unit within the Department of Infectious Diseases. Staff involved with the BioBank will strictly adhere to the in-house CL3 unit Codes of Safe Working Practice. Staff will wear protective gowns/jumpsuits (which include covering of the shoes), eye-protection, mask and be double gloved in the CL3 anteroom (Room 3.25). Upon leaving the CL3 lab, the external glove layer should be discarded into autoclave bags immediately next to the exit door and the inner gloves wiped with 70% IMS..
2. All BioBank staff working with infectious material will be trained by senior personnel in CL3 processes and will be immunised against hepatitis B by KCL Occupational Health. All staff will read the CL3 Codes of Safe Working Practice, this Standard Operating Procedure and the risk assessment, and sign to confirm that they have done so.