Policy for coring of archival blocks for tissue microarray (TMA) construction and related research studies

For TMA construction requests sent to the MGH Tissue Microarray Facility, investigators should request H&E slides to assist them in determining area to be cored. Blocks will be released to TMA Facility research personnel only. The TMA construction request should accompany H&E slides marked according to the guidelines below. If additional clarification is needed regarding the area of the block to be cored, TMA Facility research personnel will contact the investigator directly.

TMA construction requests or other research requests that require coring of archival blocks sent to other laboratories within or outside MGH will require prior approval of the Biospecimen Oversight and Access Committee for release of blocks. Please send a brief written justification to the Director of Surgical Pathology. Investigators will still need to adhere to the guidelines below in marking slides and selecting areas for coring.

Criteria for selecting and coring a donor block:

- Tumor cross section (surface area*) – In addition to circling the core site of interest, it would be helpful to mark (underline) all tumor areas within a block. To make a 2 mm core, tumor area (within the donor block) should be at least 0.25 cm². The same ratio applies to other core diameter(s).

- No more than 2 adjacent* cores may be made in any particular area of a donor block, and all cores may not exceed 50% of the block’s total tumor area.

- A donor block is to come from an archival case that, at selection time, has at least 2 tumor blocks.*

- Donor blocks are to come from older cases in order of preference- first to last (i.e. >10 years, 7-10 years, 3-7 years and 0-3 years).

* Restriction(s) may not apply to older (>20 years) blocks/cases.

When restriction(s) poses hardship, investigators may seek exemption through the Biospecimen Oversight and Access Committee.