CentraXX
Clinical information and biomaterial data from all cancer patients at the University Hospital are merged in the management software CentraXX, which complies with the German data protection laws (incl. pseudonymization of biomaterial and patient data). In the future, CentraXX will provide the interface to the Clinical Communication Platform of the DKTK in order to facilitate exchange of biomaterial as well as clinical data and to improve trial recruitment across all 8 DKTK sites. All DKTK investigators at the Frankfurt site are invited to register for CentraXX and search this powerful database. Please contact Daniel Brucker with any questions concerning biomaterial searches in CentraXX!

Contact
If you have questions or are planning a project please contact us at:
Project management team of the UCT Biobank
Dipl.-Biol. Daniel Brucker
Tel.: 069 6301 87186
Dr. Kristina Götze
Tel.: 069 6301 87187
Mail: biobank-uct@kgu.de
Fax: 069 6301 3968

Clinical Data
Corinna Bendfeldt
Tel.: 069 6301 7446
Fax: 069 6301 3968
E-Mail: corinna.bendfeldt@kgu.de

Please visit our homepage for further information:
www.uct-frankfurt.de > Forschung > Biobank UCT
UCT Biobank & Tumor Documentation

The **UCT Biobank** collects and stores biomaterial and makes it available for clinical and translational cancer research.

Biomaterials are residual materials of tissues, body fluids and other specimens (e.g. excretions) that are collected for therapeutic and diagnostic purposes. After completion of the diagnostic analyses, these biomaterials are stored (formalin-fixed or frozen) or freshly processed in the UCT Biobank.

These biomaterials are made available to investigators for translational research projects and to accelerate the development of new diagnostic methods and therapies for cancer patients.

The **Tumor Documentation team of the UCT** performs a comprehensive documentation of the clinical data (for example, surgery, chemotherapy or radiation). All relevant diagnostic, therapeutic and follow-up information is assembled and available to the scientific community.

In the past it was very difficult to get high quality biomaterial and clinical data from cancer patients. To facilitate access to biomaterial and clinical data for translational researchers, the UCT has implemented a structured process that has considerably lowered the bar.

---

### Scientific & ethical evaluation process

Due to ethical and data protection regulations, stringent rules have to be followed for the scientific use of primary biomaterial and clinical information. All scientific projects are administered by the UCT project management team and approved by the UCT Scientific Board and the local ethics committee.

---

### Workflow for the application of biomaterial & clinical data

The complete workflow from project proposal and biomaterial request to evaluation, biomaterial allocation, ethics committee approval, project tracking and reporting is handled by the project management team of the UCT Biobank.

- Interested investigators should submit a brief project proposal describing the request of biomaterial and/or clinical data ([proposal form](#)) to the UCT project management. It is advised to include a member of the tumor-specific program as part of a collaboration.
- All project proposals are evaluated by the Scientific Board (in quarterly sessions) according to standardized criteria (scientific quality, expertise of the investigator, interdisciplinarity, potential for independent grant funding, tissue demand & availability of tissue).
- The tumor specific program (e.g. material collecting site) has the right to veto within 7 days.
- Upon evaluation and approval by the Scientific Board, the ethics committee grants accelerated approval.
- The biomaterial and/or clinical dataset is then handed over to the investigators.
- Investigators have to report on the project status annually and acknowledge & affiliate the UCT for the use in all publications.

These procedures allowing scientists to access biomaterial are facilitating translational research and have significantly improved the transparency of material allocation.