

**OPPORTUNITIES TO CONTRIBUTE SAMPLES TO IMPROVE GENERAL KNOWLEDGE ABOUT OSTEOSARCOMA**

	STUDY	INSTITUTION*	GOAL	SAMPLE REQUIRED	CONTACT
database	<a href="#">Biology of Osteosarcoma (BOOST) Registry and Biobank</a>	University of Minnesota Masonic Cancer Center	<p>The Biology of Osteosarcoma (BOOST) Registry and Biobank offers a single location where every patient with osteosarcoma and their relatives can participate in research to better understand how genes and environment affect the development and survival of this disease.</p> <p>We are only studying osteosarcoma in the BOOST Biobank and Registry. For the time being, we are only collecting samples and not testing them. When we do receive funds to test them, we may analyze up to and including whole genome sequencing of germline (i.e. normal) and tumor DNA. These tests could reveal the presence of actionable germline mutations and/or targetable genes in tumors. The possibility of finding these results in the future is included in the consent for BOOST.</p>	saliva	<p>spect012@umn.edu</p> <p>612-625-3910</p>
	<a href="#">The Osteosarcoma Project</a>	The Osteosarcoma Project is part of Count Me In, a research initiative launched out of the Broad Institute of MIT and Harvard that brings together patients and researchers as partners to accelerate discoveries in cancer research.	<p>The Osteosarcoma Project (OSP) takes a new approach to cancer research in which patients contribute their experiences, clinical information, and samples to make data freely available for any osteosarcoma researchers. By generating the most comprehensive database for osteosarcoma, the entire cancer research community can make discoveries that can lead to a better understanding of the disease and changes for future treatments.</p> <p>The goal of this project is to generate a large dataset that includes genomic, clinical, molecular, and patient reported information that can be shared with the biomedical community in order to accelerate discoveries and better therapies for this disease. Cancer is not a single disease, and each medical record, tumor, and patient's story holds part of the puzzle. Our goal is to help the research community understand the landscape of osteosarcoma and accelerate discoveries by making data more readily available.</p>	medical records, patient data, saliva, with an option to provide blood and tissue	<p>info@osproject.org</p> <p>651-602-2020</p>
testing new therapies	<a href="#">New treatment approaches to osteosarcoma</a>	University of Utah	Test new drug treatments for osteosarcoma using primary samples, will be done in vitro and in vivo, with genetic profiling of tumor samples.	patient data, tumor tissue	<p>Joshua.Schiffman@hci.utah.edu</p> <p>801-587-4745</p>
	<a href="#">UCSF WGS+RNA sequencing</a>	UCSF	Genomic analysis of advanced osteosarcoma. We are using WGS and RNAseq to study relapsed or metastatic osteosarcoma to understand what drives osteosarcoma to be chemotherapy resistant or to spread beyond the initial site.	<p>Must have frozen tissue available. Matched biopsy/recurrence samples preferred but if this is not available, the relapsed sample can be sequenced.</p> <p>Sample required: in addition to frozen tumor tissue, a normal DNA sample (blood, buccal swab) is required</p>	Alejandro.Sweet-Cordero@ucsf.edu
	<a href="#">Targeting integrin signaling in myeloid immune compartment in metastatic osteosarcoma</a>	Case Western Reserve University / UH Rainbow Babies & Children's Hospital	<p>To understand the immune landscape of metastatic osteosarcoma and how it relates to integrin signaling between tumor cells and myeloid immune cells.</p> <p>We wish to carefully dissect out the presence, abundance and position of various immune cell subsets within metastatic pulmonary osteosarcoma and correlate these finds with the level and VCAM-1 surface expression on tumor cells. We hypothesize that VCAM-1 is a critical factor on metastatic osteosarcoma whose interaction with VLA4 on myeloid compartments, along with TGFb signaling, allows the establishment of an immune privilege site to allow tumor escape. A careful analysis of immune cell landscape among clinical metastatic OS samples (using immunohistochemistry and multi-color flow cytometry) with correlative studies on soluble VCAM-1 molecule in peripheral blood may reveal prognostic and therapeutic insights for pulmonary metastatic osteosarcoma.</p>	patient data, blood sample, tumor tissue	<p>alex.y.huang@case.edu</p> <p>216-368-1271</p>
pdx and cell lines	<a href="#">CUREfast legacy autopsy</a>	<a href="#">Childhood Cancer Therapy Development Institute, funded by Childhood Cancer Project</a>	To improve pediatric cancer model systems, we propose to study the genetics, make a cell culture and make a PDX mouse model for each child's cancer in honor of their life – and to the benefit of future children. PDX models are created in collaboration with the Jackson Laboratory. The non-profit Childhood Cancer Project (CCP) will fund legacy autopsy donations. PDX will be made available to to any researchers who requests it.	patient tumor tissue	<p>andy@cc-tdi.org</p> <p>charles@cc-TDI.org</p> <p>406-570-3400 (Andy)</p> <p>801-232-8038 (Charles)</p>
	<a href="#">The Childhood Cancer Repository</a>	Children's Oncology Group & Alex's Lemonade Stand Foundation	The Childhood Cancer Repository is a laboratory that collects tissue samples from all types of childhood cancer and grows cancer cells from those samples in the lab (in test tubes) and in special mice, to create patient-derived xenografts (PDXs). The goal of the repository is to provide cell lines and PDXs for free to vetted investigators seeking to carry out biological and pre-clinical therapeutic studies of childhood cancer.	all cancer tissue samples which include tumor, blood and bone marrow which is taken during biopsies, routine blood draws or other scheduled clinical tests that are sent immediately (fresh, not frozen) to the repository.	<p>FamilyServices@AlexsLemonade.org</p> <p>Patrick.Reynolds@ttuhsc.edu</p> <p>http://cccels.org</p>

**IMPORTANT NOTE:** MIB does not independently verify information submitted to the MIB; it relies on submitters to provide information that is accurate and not misleading. MIB makes no endorsements of tests or laboratories listed in the MIB Testing & Data Directory. MIB is not a substitute for medical advice. Patients and families with specific questions about a genetic test should contact a healthcare provider or a genetics professional.

