



THE OHIO STATE UNIVERSITY

COLLEGE OF MEDICINE

**Department of Biomedical Education & Anatomy
Body Donor Program**

279 Hamilton Hall
1645 Neil Ave.
Columbus, OH 43210

614-292-4831 Phone
614-292-7659 Fax

BodyDonor@osumc.edu Email
<http://go.osu.edu/bodydonation>

Extension Request for Human Cadaveric Material

Non-Save donor materials are to be kept for no longer than four (4) years. Only academic programs may request an extension **3-6 months prior** to the scheduled end date. Approval criteria is based on the condition of the specimen as evaluated by a site visit and includes but is not limited to: specimen dryness, pliability, storage conditions and presence of mold/mildew.

Date: _____

Name and Title of Requestor: _____

Academic Institution: _____

E-mail Address: _____ Phone Number: _____

Original possession date: _____ Donor #: _____ Quote/Invoice #: _____

Program/ Academic Course Title: _____

Last Academic Year of Use: _____

Request a one-year extension to: _____ (end date).

Request a two-year extension to: _____ (end date).

Extension Request course: _____

Semester/ Quarter Dates: _____

Requestor's Signature: _____ Date: _____

For Official OSU Body Donor Program Use Only:

Site-visit Date/Time: _____

Donor's Condition: **Dry Yes No; Pliable Yes No; Mold/Mildew Yes No;**

Storage Conditions _____

Other Comments: _____

Not Approved Approved for 1 year Approved for 2 years

OSU Rep. Signature: _____ Date: _____

Print Name and Title: _____

Email: _____