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## **Title: Optimization of Breast Biopsy and Mastectomy Sample Collection Procedures for Biobanking, Personalized Medicine, and Research Applications**

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## Author Questionnaire

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### Current Protocol Length

Number of Steps: 17

Number of Shots: 33

# Introduction

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**AUTHORS:** Please note that only 5 statements may be presented

- 1.1. **Rodney B. Dofitas:** We aim to improve breast cancer sample collection for biobanking, enabling better personalized treatment through high-quality RNA sequencing and organoid culture from Filipino patient tissues.

1.1.1. INTERVIEW: Named Talent says the statement above in an interview-style shot, looking slightly off-camera. *Suggested B.roll:2.3*

What are the most recent developments in your field of research?

- 1.2. **Ma. Easter Joy V. Sajo:** Recent advances include using patient-derived organoids and RNA sequencing to predict treatment response in breast cancer, particularly for cases with lymphovascular invasion linked to drug resistance.

1.2.1. INTERVIEW: Named Talent says the statement above in an interview-style shot, looking slightly off-camera. *Suggested B.roll:4.1*

What technologies are currently used to advance research in your field?

- 1.3. **Ma. Easter Joy V. Sajo:** We use ultrasound-guided biopsies, RNA sequencing, tumor percentage estimation, and 3D organoid cultures to analyze breast cancer tissues precisely.

1.3.1. INTERVIEW: Named Talent says the statement above in an interview-style shot, looking slightly off-camera. *Suggested B.roll:3.7*

What are the current experimental challenges?

- 1.4. **Ma. Easter Joy V. Sajo:** Main challenges include obtaining high-quality RNA from small biopsy samples, quality tissues for organoid cultivation, and ensuring consistent cold storage and transport.

1.4.1. INTERVIEW: Named Talent says the statement above in an interview-style shot, looking slightly off-camera.

What research questions will your laboratory focus on in the future?

- 1.5. **Rodney B. Dofitas:** We'll explore gene expression further in larger Filipino cohorts and use organoids to test therapies for thyroid, ovarian, pancreatic, and rare cancers like phyllodes tumors.

1.5.1. INTERVIEW: Named Talent says the statement above in an interview-style shot, looking slightly off-camera.

**Ethics Title Card**

This research has been registered and approved by the Research Ethics Board at the University of the Philippines Manila (UPMREB 2020-822-01)

# Protocol

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## 2. Breast Core Needle Biopsy and Tissue Processing for RNA and Histopathology

**Demonstrator:** Rodney B. Dofitas

- 2.1. To begin, set up a 14-gauge core needle biopsy gun under ultrasound guidance in an outpatient clinic, operating room, or other aseptic environment [1]. For each core, collect a breast sample approximately 2 centimeters in length from the center of the tumor and 1 centimeter away for adjacent normal tissue [2]. Collect 2 types of specimens, normal tissue and tumor tissue, from each patient [3].
  - 2.1.1. WIDE: Talent holding a 14-gauge core needle in a clinical room.
  - 2.1.2. Talent obtaining core samples, showing targeted locations of tumor center and adjacent tissue.
  - 2.1.3. Shot of 2 samples per participant.
- 2.2. Hand each sample to the research assistant for placement into a petri dish containing PBS solution [1-TXT].
  - 2.2.1. Talent handing samples to research assistant who places them into petri dishes with PBS. **TXT: Obtain up to 9 breast tissue**
- 2.3. Sort the nine tumor tissue samples into 6 cores for RNA analysis and 3 cores for biobanking [1]. Cut each core lengthwise or crosswise using a sterile blade [2-TXT].
  - 2.3.1. Talent sorting tumor cores into RNA and biobanking groups in labeled petri dishes.
  - 2.3.2. Talent cutting the tissue with a sterile blade. **TXT: Send half the tissue core for RNA analysis and the other half for histopathological analysis**
- 2.4. Place the three normal tissue cores in petri dishes [1]. Cut the cores in half and allocate them for analysis [2].
  - 2.4.1. Talent placing normal tissue in petri dishes.
  - 2.4.2. Talent cutting normal tissue cores and placing halves into study and pathology containers.
- 2.5. Distribute samples among the tubes according to priority [1]. Place half of the cores into designated 2 milliliter cryovials with 1.25 milliliters of RNA stabilization solution [2].
  - 2.5.1. Talent sorting samples for tube distribution.

2.5.2. Talent placing cores into cryovials with RNA stabilization solution.

2.6. Fix the other halves in specimen vials containing 10 percent neutral buffered formalin [1]. Complete and submit the surgical pathology forms with the fixed samples to the pathology department [2].

2.6.1. Talent placing matching core halves into formalin vials.

2.6.2. Talent filling out pathology forms and submitting vials.

### **3. Breast Tumor and Normal Tissue Handling for Biobanking, RNA Sequencing, and Transport**

3.1. After mastectomy, placed the sample into a clean specimen bag after documentation and transport immediately to the Department of Laboratories, Pathology without formalin to reduce cold ischemic time [1].

3.1.1. Talent placing transporting specimen from the Operating Room Complex to Pathology for grossing.

3.2. Obtain a minimum 1 cubic centimeter tumor tissue block during grossing and cut into two halves [1-TXT].

3.2.1. Talent obtaining and slicing a 1 cubic centimeter tumor block. **TXT: Use half for biobanking and the other half for pathology; Dimensions: 1 cm x 0.5 cm x 0.5 cm**

3.3. Evenly trisect the fresh half block for RNA sequencing, biobanking, and organoid culture [1].

3.3.1. Talent trisecting the half block and placing parts into corresponding containers.

3.4. Immediately place tissue for RNA sequencing in 5-milliliter pre-chilled and pre-labeled cryovials pre-filled with 2.5-milliliters of RNA stabilization solution [1]. For biobanking, use 5-milliliter cryovials with the same solution [2].

3.4.1. Talent placing RNA sequencing sample in 5-milliliter cryovials.

3.4.2. Talent placing biobanking sample in 5-milliliter cryovials.

3.5. For organoid culture, use 15 milliliter conical vials pre-filled with 5 milliliters tissue storage solution and 0.01 milliliters Primocin [1]. Pool one-third of all tumor blocks into one conical tube [2].

3.5.1. Talent placing organoid culture sample in 15 milliliter conical vials.

3.5.2. Talent pooling tissue blocks into one tube.

3.6. Obtain a minimum 1 cubic centimeter normal tissue block [1] and slice it in half for RNA biobanking and routine histopathology [2].

3.6.1. Shot of a normal tissue block.

3.6.2. Talent slicing normal tissue block and distributing samples. **TXT: Dimensions: 1 cm x 1 cm x 0.5 cm**

- 3.7. Transfer the tissue block into 5-milliliter pre-chilled and pre-labeled cryovials pre-filled with 2.5-milliliters of RNA stabilization solution for RNA sequencing and biobanking [1]. Then seal all cryovials with parafilm [2].
  - 3.7.1. Talent placing samples in cryovials.
- 3.8. Store at 4 degrees Celsius for 24 hours then transfer to minus 20 degrees Celsius for 2 to 4 hours and finally store at minus 80 degrees Celsius [1].
  - 3.8.1. Talent storing vials at successive temperatures.  
**AUTHORS: Perform any 1 storage for demonstration**
- 3.9. Seal the cryovial caps with parafilm [1]. Place sealed cryovials in test tube rack and cover with absorbent and bubble wrap [2].
  - 3.9.1. Talent wrapping the vial caps with parafilm.
  - 3.9.2. Talent placing tubes in rack and wrapping them.
- 3.10. Place the wrapped rack in a resealable bag with a temperature logger [1-TXT]. Position gel packs on the bottom of a polystyrene box [2] then place the bag over the gel packs [3]. Put another layer of gel packs on top of the bag. Make sure the tubes are sandwiched between gel packs to ensure the specimens will be kept cold during transport [4].
  - 3.10.1. Talent packing tubes with logger in a resealable bag. **TXT: Ensure temperature logger is logging temperature and tubes are intact and upright**
  - 3.10.2. Talent placing gel packs at the bottom of a polystyrene box.
  - 3.10.3. Shot of the bag being placed over gel packs in a polystyrene box.
  - 3.10.4. Talent placing gel packs over the bag.
- 3.11. Put the closed polystyrene box into a cardboard shipping box and include the manifest in a ziplock bag [1]. Seal and label the box for shipping [2-TXT]. Before courier handoff, note the number of vials and the departure time from the biobank [3].
  - 3.11.1. Talent placing box inside shipping box with manifest.
  - 3.11.2. Talent sealing and labeling the box. **TXT: Inform recipient about the collection schedule and immediately courier the samples**
  - 3.11.3. Talent documenting number of vials and time courier leaves.

## Results

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### 4. Results

- 4.1. 2 samples with varying RIN (*Rin*) values and concentration failed in the library preparation step during sequencing and were excluded in the final analysis [1]. All samples had great sequencing quality scores, where more than 90% of base calls had an accuracy of at least 99.9% [2].
  - 4.1.1. LAB MEDIA: Table 1 **TXT: RIN: RNA Integrity Number**  
*Video Editor: Please highlight the 6<sup>th</sup> and 11<sup>th</sup> row , “RIN Value” and “Reasons for Failing QC” columns*
  - 4.1.2. LAB MEDIA: Table 2 *Video Editor: Please highlight the columns for “%>Q30”*
- 4.2. Bright-field imaging showed successful organoid formation from Stage III breast cancer mastectomy tissues after neoadjuvant therapy, with abundant spheroid-like structures visible at low [1] and high magnification [2].
  - 4.2.1. LAB MEDIA: Figure 6A.
  - 4.2.2. LAB MEDIA: Figure 6B.

**Pronunciation Guide:**

1. Biobanking  
Pronunciation link: (no single dictionary entry, but “biobank” gives root)  
<https://www.sciencedirect.com/topics/medicine-and-dentistry/biobanking>  
IPA: /ˌbaɪ·oʊˈbæŋ·kɪŋ/  
Phonetic Spelling: bye-oh-BANK-ing
2. Biobank  
Pronunciation link: <https://en.wikipedia.org/wiki/Biobank> (as reference)  
IPA: /ˌbaɪ·oʊˈbæŋk/  
Phonetic Spelling: bye-oh-BANK
3. Personalized  
Pronunciation link: Merriam-Webster “personalized”  
IPA: /ˈpɜr·sə·nəˌlaɪzd/  
Phonetic Spelling: PUR-suh-nuh-lyzd
4. Organoid  
Pronunciation link: (less common; some sites)  
<https://www.howtopronounce.com/organoid>  
IPA: /ˈɔr·gəˌnoɪd/  
Phonetic Spelling: OR-guh-noyd
5. Ultrasound  
Pronunciation link: Merriam-Webster “ultrasound”  
IPA: /ˈʌl·trəˌsaʊnd/  
Phonetic Spelling: UL-truh-sownd
6. Lymphovascular  
Pronunciation link: (may not exist in standard dictionary)  
IPA: /ˌlɪmf·oʊˈvæs·kjə·lər/  
Phonetic Spelling: lim-foh-VAS-kyuh-lur
7. Sequencing  
Pronunciation link: Merriam-Webster “sequencing”  
IPA: /ˈsi·kwən·sɪŋ/  
Phonetic Spelling: SEEK-wuhn-sing
8. Tumor / Tumour  
Pronunciation link: Merriam-Webster “tumor”  
IPA: /ˈtu·mə/   
Phonetic Spelling: TOO-mur
9. Neoadjuvant  
Pronunciation link: NCI “neoadjuvant therapy”  
<https://www.cancer.gov/publications/dictionaries/cancer-terms/def/neoadjuvant-therapy>  
IPA: /ˌni·oʊˈæd·ʒu·vənt/  
Phonetic Spelling: nee-oh-AD-joo-vuhnt
10. Mastectomy  
Pronunciation link: Merriam-Webster “mastectomy”  
IPA: /mæsˈtɛk·tə·mi/  
Phonetic Spelling: mas-TEK-tuh-mee
11. Cryovial / Cryovials  
Pronunciation link: (less common)

IPA: /ˌkraɪˌoʊˈvaɪ.əl/

Phonetic Spelling: cry-oh-VY-uhl

**12. Histopathology**

Pronunciation link: Merriam-Webster “histopathology”

IPA: /ˌhɪsˌtoʊ.pəˈθɒl.ə.dʒi/

Phonetic Spelling: his-toh-puh-THOL-uh-jee

**13. Ischemic / Ischemia**

Pronunciation link: Merriam-Webster “ischemia”

IPA: /ɪˈski.mi.ə/

Phonetic Spelling: is-KEE-mee-uh

**14. Trisect / Trisecting**

Pronunciation link: Merriam-Webster “trisect”

IPA: /traɪˈsekt/

Phonetic Spelling: try-SEKT

**15. Neoadjuvant / Neoadjuvant Therapy**

(Repeated, but useful in context)

Pronunciation link given above

IPA: /ˌniˌoʊ.ədˌʒu.vənt/

Phonetic Spelling: nee-oh-AD-joo-vuhnt

**16. RIN (RNA Integrity Number)**

- *RNA* — /ˌɑr.ənˈeɪ/ (ar-en-ay)
- *Integrity* — /ɪnˈtɛɡ.rə.ti/ (in-TEG-ruh-tee)
- *Number* — /ˈnʌm.bər/ (NUM-bur)

**17. Bright-field**

Pronunciation link: (compound word)

IPA: /ˈbraɪt.fiːld/

Phonetic Spelling: BRYTE-feeld

**18. Spheroid**

Pronunciation link: Merriam-Webster “spheroid”

IPA: /ˈsfɪr.ɔɪd/

Phonetic Spelling: SFIR-oid