

The flow cytometer LSR Fortessa with high throughput sampler (hereinafter referred to as the device) is located in the Children's Hospital (KIK) in the Clinical Research Laboratory. The device is operated by the structural unit KIK itself. The following rules must be observed:

§1 Access requirements

1. The premises are subject to Biological Security Level 2 (S2). Therefore, access is only possible with proof of the corresponding, annually recurring instruction. For this, please contact Ms. Navratel (KIK-Labor-Arbeitsschutz@ukdd.de; occupational safety) and Dr Luksch (KIK-Labor-Gentechnik@ukdd.de; genetic engineering). Appropriate appointments should be made with sufficient advance notice.
2. Only users with sufficient training and/or previous experience may operate the device. Appropriate proof must be presented before first use. Likewise, a one-time briefing on the device takes place before the first use. Please contact Dr. Thieme or Ms. Navratel (KIK-Labor-FACS@ukdd.de). Corresponding appointments are to be arranged with sufficient advance notice.
3. Further requirements for admission as a user are: I) Acknowledgement of these rules of use by written confirmation of knowledge (Annex 1); and presentation of II) a signed declaration of assumption of costs by an authorized person/agency (Annex 2) and III) a biosafety form (Annex 3).

§2 Fees for use

1. A user fee of 20€ per hour is charged for the use of the equipment (as of 1 July 2022). KIK reserves the right to adjust the usage fee. The user will be notified accordingly by e-mail. Existing bookings can be cancelled free of charge a maximum of 48 hours before the appointment. After that, the bookings will be charged.
2. The time for instruction for (first) use is usage time and therefore subject to a charge.
3. No usage fee will be charged for booked usage times during which the device is defective or cannot be used for other technical or organizational reasons.
4. Billing is by the hour per hour or part thereof. The log data of the online booking system and the FACS device are used for this purpose. Invoices are issued on a quarterly basis.
5. The administration of KIK is entitled to store all data necessary for the processing of the use and billing, including personal data of the users, and to use it to the extent necessary. The data will not be passed on to third parties for any purpose other than billing.

§3 Use of the device

1. Users may only use the device for the period booked by them. An extension of the period of use can be made on the spot in the booking system if the time required for this is not occupied by other users.
2. The booking of the equipment takes place exclusively via the online booking system (<http://cgc.med.tu-dresden.de/phpScheduleIt/>). This requires a password-supported registration via a TU Dresden login. Users should contact their system administrator for this purpose.
3. Users must protect their login and password from misuse by third parties.
4. The regular access hours are from Monday to Friday from 09:00 to 16:00. Outside the opening hours, only very experienced users should use the device, as no support is available in case of problems. Regular users can only book during the regular hours.

5. We reserve the right to refuse bookings for off-peak hours if there is insufficient training or experience.
6. All cellular samples must be filtered (40 to 100µm; e.g. Falcon 5mL Polystyrene round-bottom tube with cell-strainer cap - Corning REF 352235) immediately prior to analysis to avoid clogging the machine. Suitable centrifuges are available on the premises of the laboratory.
7. Cells of any origin can only be analyzed if either I) they comply with S1/L1 rules (i.e. if human cells have been tested free of HBV, HCV, HIV, etc.), or II) the potential infectivity has been prevented by appropriate measures (e.g. methanol fixation).
8. Cells of any origin known to release infectious particles must not be analyzed at any time, regardless of pre-treatment.
9. Experimental data created during use will be saved on a computer assigned to the device and must be transferred to a suitable medium by the user himself/herself when leaving the workstation after the respective booking time has expired. No liability can be accepted for data temporarily stored on the designated data storage areas of the hard disk after the booking period has expired.
10. Data stored outside the designated data carrier areas can be deleted at any time. After one month, all data can be deleted without further inquiry; in the event of capacity bottlenecks, it can also be deleted before then, after notifying the user by e-mail.
11. The use of the computer and computing technology other than for experimental work, e.g. for visiting Internet pages and retrieving e-mails, is not permitted.
12. Users must bring all the consumables they require with them. These are not provided by the laboratory. Only BD-approved plastic materials shall be used on the equipment in order to avoid damage (High-throughput sampler: Falcon 96-well U-bottom – Corning REF 353077; single samples: Falcon 5mL Polystyrene round-bottom tube - Corning REF 352052 or 352054).
13. There are separate start-up and shut-down routines for the first and last daily use. Washing routines must also be followed after each measurement cycle. Corresponding instructions are displayed on the unit and must be observed by the users.
14. The device must be left in a cleaned and ready-to-use condition. At the end of your session, users are responsible for ensuring that the device is ready for the next user. If you find the device in an unfit condition, report this by email (KIK-Labor-FACS@ukdd.de) before you start your measurements.
15. Users are not allowed to make any changes to the device or to the premises of the children's hospital without permission.
16. Users are not entitled to grant rights to equipment or facilities of the Children's Hospital to a third party.

§4 Exclusion from use and liability

1. Users who repeatedly or seriously violate the rules of use or commit criminal offences while using the equipment may be temporarily or permanently excluded from using the equipment. The exclusion shall not affect any obligations already arising from the use. If there is still a claim to payment under these regulations, this shall remain valid. In addition, claims for damages may be asserted against the user. Users shall not be entitled to claims for damages on the basis of such exclusion. The user is liable for culpable damage to or destruction of the equipment and facilities of the children's hospital.

2. The Children's Hospital accepts no liability for the device being free of faults and operating without interruption at all times.

§5 Intellectual property and publication of results

1. The use of the device is to be taken into account appropriately in the case of publication. Therefore, users are obliged to mention the support in the "Acknowledgement" in corresponding publications. For this purpose, the following wording is to be used: "This work was supported by the Children's Hospital of the University Hospital Dresden. The "name/type of work/experiment" was carried out at an LSR Fortessa (BD Biosciences) of the Children's Hospital."
2. Any other form of participation shall be listed in the "Acknowledgements" or in the acknowledgements of bachelor's, master's and doctoral theses.

§6 Entry into force

The regulations come into force on 01.08.2022.

Annex 1**Acknowledgement of the Regulations for Use**

I confirm that I have read and understood the Regulations for the Use of the LSR Fortessa of the Children's Hospital of the University Hospital Dresden. By signing this document, I also confirm that I accept the terms of use. I hereby agree that my data listed below may be stored and used for the purpose of billing / invoicing, as well as for the creation of anonymized evaluations and statistics. Any disclosure of my data beyond this scope is excluded. The consent is valid without time limit, but can be revoked at any time.

Name, first name:

Institution:

Work group:

E-mail address:

.....

Date / Signature User

Annex 2**Cost acceptance**

I confirm that I have read and understood the scale of charges for the use of the LSR Fortessa of the Children's Hospital of the University Hospital Dresden. By signing, I also confirm that I recognise the scale of charges and will pay the usage fees accordingly.

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Date / Signature Group leader

Annex 3**Biosafety Form****1) User information**

1.1) Name	
1.2) Position	
1.3) Group leader / PI	
1.4) Institution	
1.5) Phone number	
1.6) Email address	

2) Sample information

2.1) Sample ID				
2.2) Organism, tissue				
2.3) Cell status	live <input type="checkbox"/>	fixed (specify fixative) <input type="checkbox"/>		
2.4) Cell modification	transfected Yes <input type="checkbox"/>	No <input type="checkbox"/>	transduced Yes <input type="checkbox"/>	No <input type="checkbox"/>
2.5) Human material	Cell line <input type="checkbox"/> Primary cells <input type="checkbox"/> Tested for HIV, HBV, HBV <div style="display: flex; justify-content: flex-end; gap: 20px;"> Yes <input type="checkbox"/> No <input type="checkbox"/> </div>			
2.6) Biological safety level	S1/L1 <input type="checkbox"/>	S2/L2 <input type="checkbox"/>	File number (SMEKUL) <div style="background-color: #f0f0f0; height: 20px; width: 100%;"></div>	
2.7) Potentially harmful chemicals or toxins	<div style="background-color: #f0f0f0; height: 20px; width: 100%;"></div>			

Brief description of the project:

I certify that the samples do not contain infectious or harmful material other than as specified.

Signature User

Signature PI

Date

[illegible]