

Resource Summary Report

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University of Nebraska Medical Center Nebraska Biobank Core Facility

RRID:SCR_021024

Type: Tool

Proper Citation

University of Nebraska Medical Center Nebraska Biobank Core Facility
(RRID:SCR_021024)

Resource Information

URL: <https://www.unmc.edu/cctr/resources/biobank/index.html>

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Description: Nebraska Biobank is made up of residual blood samples from volunteer patients. Serum, Plasma, and DNA are recovered from the consented samples and stored for future research studies. Deidentified data from the Electronic Health Record (EHR) such as age range, diagnosis, and medications are linked to the stored samples. Any faculty member from the University of Nebraska system may request samples from the biobank for their research projects but all requests are subject to feasibility and scientific merit review. Offers sample management services to investigators for clinical trials and registries.

Synonyms: UNMC-Nebraska Biobank

Resource Type: access service resource, core facility, service resource

Keywords: USEDit, ABRF, ABRF

Resource Name: University of Nebraska Medical Center Nebraska Biobank Core Facility

Resource ID: SCR_021024

Alternate IDs: ABRF_1141

Alternate URLs: <https://coremarketplace.org/?FacilityID=1141>

Record Creation Time: 20220129T080353+0000

Record Last Update: 20260821T194148+0000

Ratings and Alerts

No rating or validation information has been found for University of Nebraska Medical Center Nebraska Biobank Core Facility.

No alerts have been found for University of Nebraska Medical Center Nebraska Biobank Core Facility.

Data and Source Information

Source: [SciCrunch Registry](#)

Usage and Citation Metrics

We found 2 mentions in open access literature.

Listed below are recent publications. The full list is available at [NIF](#) .

Maurya SK, et al. (2025) Mucin 5AC Promotes Breast Cancer Brain Metastasis through cMET/CD44v6. Clinical cancer research : an official journal of the American Association for Cancer Research, 31(5), 921.

Carson WK, et al. (2022) Small bowel stomas are associated with higher risk of circulating food-specific-IgG than patients with organic gastrointestinal conditions and colostomies. BMJ open gastroenterology, 9(1).