

**REGISTRE FRANCE GREFFE DE MOELLE
FRENCH REGISTRY OF UNRELATED STEM CELL DONORS**
FEE SCHEDULE valid as of 1st JANUARY 2024
INTERNATIONAL PATIENTS

DESIGNATION	Euros (€)	Equivalent EMDIS code	
Preliminary donor search	FREE		
Activation fee	FREE		
HLA class I typing			
Low resolution (2 digits)	loci A	100	L
	loci B	100	L
	loci C	100	L
Intermediate resolution (NMDP code or high resolution) DNA typing	loci A	230	M
	loci B	230	M
	loci C	230	M
High resolution allelic level ≥ 4 digits without ambiguities	loci A	420	H
	loci B	420	H
	loci C	420	H
HLA class II typing			
Low resolution DNA typing (2 digits)	DRB1	100	L
	DQB1	100	L
Intermediate resolution (NMDP code or high resolution) DNA typing	DRB1	230	M
	DQA1	230	M
	DQB1	230	M
	DPB1	230	M
High resolution allelic level ≥ 4 digits without ambiguities	DRB1	420	H
	DRB3/B4/B5	420	H
	DQA1	420	H
	DQB1	420	H
	DPA1	420	H
	DPB1	420	H
Other testing			
CMV testing	35		
Sample procurement			
Blood sample (including IDM testings)	collection	250	
	shipment	VARIES	
Blood sample and freezing (including IDM testings)	collection	350	
	shipment	VARIES	
DNA (including IDM testings)	extraction	260	
	shipment	VARIES	
Stem cells collection			
Marrow or PBSC procurement	12 400		
If transport by FGM	fixed cost	500	
	courrier expenses	VARIES	
Cancellation fee (1)	1 240		
Postponement fee	1 240		
Freezing of bone marrow upon request	830		
Lymphocytes collection			
Unstimulated leucapheresis per bag	2 860		
Cancellation fee (1)	1 000		

(1) charged only if requested by TC

For any other services offered, price will be communicated upon request.

Additional transport costs may be charged when a blood sample is required to validate the donor, in order to carry out additional tests (Dengue, WNV, Zika, Chikungunya, TBEV...).

The total amount is due within 30 days after reception of the invoice.

All invoices should be paid free of bank charge. Payment must be made by Wire Transfer in EUROS :

Recette Générale des Finances de Paris
94 rue Réaumur
75104 PARIS cedex 2
SWIFT code : TRPUFRP1
IBAN : FR76 1007 1750 0000 0010 0042 178
Beneficiary name : Agence de la biomédecine Agence Comptable

Please quote our invoice number in your wire transfer.

If you are paying a large number of invoices at the same time we would appreciate an advice of payment beforehand indicating all invoice numbers and respective amounts to be balanced.

Please send your notification by email to : agence.comptable@biomedecine.fr

In case of questions, please contact us at : finance.rfgm@biomedecine.fr