| 1. Project Information – *to be completed by coordinator*
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| Study Title |  |
| Study Type |  |
| Principal Investigator |  |
| Sponsor |  |
| 2.Recruitment Information |
| What is the disease indication / target patient population for the study? |  |
| What is the planned OUH recruitment target? |  |
| List other research studies / clinical trials within your Directorate / Division which are already underway within this disease area(s)? |  |
| Please indicate which studies of your (if any) have had delayed recruitment of their first patient. |  |
| What is the target time for recruitment and is that a feasible target? |  |
| Full inclusion criteria |  |
| Full exclusion criteria |  |
| What is the number of patients who would meet the inclusion / exclusion criteria above that are seen in your clinic at OUH?  |  |
| When would you reasonably expect to see another patient who would meet the inclusion / exclusion criteria above? |  |
| When was the last time that you saw a patient that could be approached for this study? |  |
| If approval for this proposed research been given by your Team / Steering Group / Clinical Director, please provide the key points of that meeting. (attach email / minutes of meeting). |  |

| Capacity Information |
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| Please provide details of any specialist expertise or training required for the study which might impact on site feasibility  |  |
| Which service support departments (for example, pharmacy, radiology or clinical engineering) have you approached and what was the outcome of those discussions? |  |
| Please describe any other study requirements/ practicalities, which might have an impact upon feasibility – i.e. planned changes to the OUH Trust patient pathway for this patient group in the recruitment period? |  |
| Please provide details of the staff who will support the research and any additional staff being recruited to support this research. If additional staff are required, what stage of the recruitment process are you at? |  |
| Please describe the facilities that are available to you, for example the required space to run this research. |  |
| Please provide the following information:* Outline Costs
* Potential Funding
* Shortfall (if any).
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| Do you have a site initiation visit booked for this research? Please give the date. |  |
| What is the contractual framework for the research? For example is it a collaboration or contract research and are you using DH / NIHR standard contracts? |  |
| Other comments in support of your application. |  |

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| Additional Information from the Research Office |  |
| Completed by coordinator  |  |