

Form #1: Clinical Research Division Planning Form

Investigator Initiated Study

Please submit to Jennifer Victory, RN, CCRC

Clinical Research Nurse Supervisor

Jennifer.victory@bassett.org

- Title of Project: _____
- Principal Investigator: _____
 - Department: _____
 - Best Contact Method/#: _____
- Co/Subinvestigators: _____
- Brief Description of Study (1-2 paragraphs):

- Approximate number of participants (if known): _____
- Funding source (if known): _____
- Expected time frame for study completion (deadline for meeting presentation, etc.): _____

- Recruitment Details
 - location(s) for recruitment (ie. outpatient, cath lab)
 - Person(s) to obtain consent
 - list of colleagues who have agreed to allow recruitment of patients