Research Collaboration Proposal Request Form

<u>Instructions</u>: A completed and approved Research Collaboration Proposal Request is required to be submitted to the TED Executive Committee (care of brian.fabian@ucsf.edu) and should be no more than 2 pages long. Authors are encouraged to contact the Biostatistics Core to receive assistance with the statistical analysis plan. Clinical site statisticians are also encouraged to participate in these consultations. Proposals will be reviewed by the TED Executive Committee. All aspects of manuscript development will be governed by this Guideline. Proposals should contain the following elements:

Date:			
Investigator's Name:		Investigator's Title:	
Organization or Clinical Center:			
E-mail:		Telephone:	
TED Sponsor (if not a TED investigator):			
Other investigators who will be working on this analysis:			
Analysis Plan Title:			
That year This.			
TED Metadataset files requested: TRACK-TBI Pilot □ TRACK-TBI U01 Currently Enrolling Study □			
TED Metadataset \square TED Metadataset Imaging \square			
Pu	urpose of Data Request (check all that apply)		TED Core (check all that apply)
	Exploratory		Clinical Core
	Data analysis for manuscript		Biospecimens Core
	Preliminary data for grant proposal		Neuroimaging Core
	Inputs for simulation model		Biostatistics/CER Core
	Development of statistical methods		Outcomes Core
	Other (describe)		
Please attach a 2 page description of your analysis plan including:			
Please attach a 2-page description of your analysis plan including:			
 Short background/rationale for addressing the research question Primary variables to be used in the analysis (please provide mock tables) 			
3) Brief description of methods and statistical analysis plan			
4) What is the impact if successful?			
For exploratory requests, complete item 1 now and submit items 2 through 4 within 60-days of accessing			
the dataset(s).			
Research Collaboration Request Tracking Log			
☐ Received by Executive Committee Member By: Date:			Date:
☐ Reviewed by Executive Committee			Date:
□ Decision communicated to Requestor By: Date:			
Decision	Decision: ☐ Accept ☐ Decline ☐ Return for revision		