

# Department of Medicine Study Concept Form

## Contact Information

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### Investigator Name

If PI is a resident, student,  
postdoc, trainee, please list the  
advising faculty member

### UAB Address

### Phone

### E-Mail Address

Date of Request

**Key Personnel on Project**  
(intellectual contribution to  
project)

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## Resource Information

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### Type of Project

Retrospective Chart Review/Data Analysis Only  
Analysis of existing biospecimens  
Prospective collection of biospecimens  
Prospective study  
Randomized Controlled Trial  
Multi-Center Trial (UAB Coordinating Center)  
Other

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## Proposal Information

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### Title of Project

**Hypotheses, Research  
Questions, Objectives,  
Outcomes**  
(limit of 300 words)

**Purpose of Research**  
(limit of 300 words)

**Background of Research**  
(limit of 300 words)

## Summary of Methods

(List measures that will  
be included in the study)  
(limit of 300 words)

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## Study Information

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**Sex**  
Male Only  
Female Only  
Both Male and Female

**Race/Ethnicity**  
Caucasian Only  
African American Only  
Native American Only  
Asian Only  
Hispanic Only  
All Races and Ethnicities  
Other

**Age Range**

**Health Status**

## **Sample Size/Target Accrual**

### **Sample Size Justification and Power Analysis**

(limit of 300 words)

### **Inclusion Exclusion Criteria**

(limit of 300 words)

### **Recruitment Plan for Participants**

(include enrollment goals, where  
patients will be recruited from and  
the methods used)

(limit of 300 words)

### **Duration of Study**

(include number of visits &  
schedule of events)

(limit of 300 words)