



## Investigational Drug Service (IDS) Collaborative Practice With Pharmalife Community Pharmacy

529 Brandies Cir, Murfreesboro, TN 37128  
Phone: (615) 494-1255 Fax: (615) 896-0403 ATTN: Research

### Questionnaire for Budget Requests

Thank you for submitting your request for a budget for an upcoming study. Please complete this questionnaire as completely as possible. If printing, please return via fax or email: [Paul.Jackson@gethsemanecardio.org](mailto:Paul.Jackson@gethsemanecardio.org)

1. Who will be the primary investigator for this site?
2. When is IRB approval expected or what is IRB#?
3. Is the funding federally sourced?
4. Is this sponsored (industry) or non-sponsored (grant funded) research?
5. Please list the following KSP along with contact's phone #...
  - a. Study Coordinator:
  - b. Other Prescribers/Investigators:
  - c. Study Nurses (as appropriate):
  - d. Financial Manager:
6. Is the medication considered hazardous per NIOSH definition?
7. Will the study use "remote" monitoring (i.e. require IDS to send copies of accountability logs, temp logs, etc... to a monitor)?
8. Is the IP to be procured by IDS pharmacy? If so, are generic manufacturers allowed?
9. Does the study involve non manipulated drugs (dispensed in original container) or will the drug require manipulation (IV/Sterile Compounding)?
10. Will enrollment be during office hours or 24/7?
11. Will enrolled patients be considered outpatient?
12. When do you plan to begin enrolling patients?
13. How many patients do you expect to enroll?
14. How long will we be enrolling new patients?
15. What are the storage requirements of the investigational product?
16. Is the study considered open label, blinded, patient specific, dea scheduled,



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Let Not Your Heart Be Troubled - John 14:1

17. How will randomization occur? Open Label, blinded envelopes, IVRS Database or Automated
18. Sponsored or non sponsored research?
19. Will the study require remote monitoring access?

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(Person Completing Form)

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(Date)