#

#  Australasian Kidney Trials Network

# Request for Peer Review of Proposed Research

Assistance with completing this form is available: email aktn@uq.edu.au

|  |  |
| --- | --- |
| **Date** | Click or tap to enter a date. |
| **Proposer/s** | Click or tap here to enter text. |
| **Title** | Click or tap here to enter text. |
| **Primary Objective** | Click or tap here to enter text. |
| **Secondary Objective/s** | Click or tap here to enter text. |
| **Hypothesis** | Click or tap here to enter text. |
| **Background/****Rationale** **(250-300 words)** | Click or tap here to enter text. |
| **References** | Click or tap here to enter text. |
| **Impact and significance** | Click or tap here to enter text. |
| **Details of systematic assessment of existing evidence** | Click or tap here to enter text. |
| **Details of similar investigations in progress (e.g. clinicaltrials.gov search)** | Click or tap here to enter text. |
| **Study Schema****(PICO format)** | Click or tap here to enter text.   Click or tap here to enter text.  Click or tap here to enter text.Click or tap here to enter text.Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text.   |
| **Intervention/****control** | Click or tap here to enter text. |
| **Eligibility** **Inclusion criteria** | Click or tap here to enter text. |
| **Eligibility** **Exclusion criteria** | Click or tap here to enter text. |
| **Outcome measures** | Click or tap here to enter text. |
| **Randomisation/ treatment description** | Click or tap here to enter text. |
| **Data collection****(visit schedule)** | e.g.

|  |  |  |  |
| --- | --- | --- | --- |
| **Phase** | **Baseline** | **Intervention (mo)** | **Follow up** |
|   |   | 3 | 6 | 12 |
| Informed consent | X |   |   |   |
| Demographics | X |   |   |   |
| Medical history | X |   |   |   |
| Clinical: weight, BP | X |   |   |   |
| Physical exam | X |   |   |   |
| Dialysis details | X |   |   |   |
| Adverse events (incl. mortality, hospitalisation) |   | X | X | X |
| Secondary endpoint data (e.g. transfer to a nursing home)  |   | X | X | X |
| Quality of life EQ-5D-5L | X | X | X | X |

 |
| **Sample size and assumptions** | Click or tap here to enter text. |
| **Safety monitoring** | Click or tap here to enter text. |
| **Timeline****Development period** | Click or tap here to enter text. |
| **Timeline****Recruitment period** | Click or tap here to enter text. |
| **Timeline****Follow-up period** | Click or tap here to enter text. |
| **Proposed start** | Click or tap here to enter text. |
| **Funding****Current** | Click or tap here to enter text. |
| **Funding****Proposed** | Click or tap here to enter text. |
| **Collaborators** | Click or tap here to enter text. |
| **Principal Investigator and contact details (i.e. who will lead the research)** | Click or tap here to enter text. |