

## FORM 8: CLINICAL TRIAL APPLICATION FORM

Please complete and send a copy of this form to the Director of Monash Pathology, together with a copy of the trial protocol, covering letter and any other supporting documentation.

***This form must be forwarded to Ethics along with other submission documentation***

Allow 2 weeks for a detailed response from Pathology.

### PROJECT INFORMATION

Pathology: TRIM Trial No: 15/\_\_\_\_\_

Protocol no: \_\_\_\_\_

Short title of project: \_\_\_\_\_

Department or Unit: \_\_\_\_\_

Principal Investigator: \_\_\_\_\_

Research Coordinator: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Tel: \_\_\_\_\_

Tel: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Start Date: \_\_\_\_\_

End Date: \_\_\_\_\_

No. of patients: \_\_\_\_\_

No. Episodes/visits: \_\_\_\_\_

HREC Submission date: \_\_\_\_\_

### Participating Sites

Dandenong

Monash Medical Centre, Moorabbin

Kingston Centre

Monash Medical Centre, Casey

Monash Medical Centre, Clayton

External: specify: \_\_\_\_\_

### Funding Source

Please identify whether this study is commercially sponsored or other.

#### PLEASE IDENTIFY (CIRCLE) TRIAL FUNDING SOURCE

A) Internal Client: MONASH HEALTH Departmental Research Funds to be invoiced

B) External Clients: Commercial Sponsor, Monash University, or other GRANT provider to be invoiced

**Note:** Set up And Administration fees apply  
Internal Studies, GRANTS and overseas Sponsors do not attract GST

**Details of Tests/services required**

***Please attach a copy of the trial protocol and any supporting documentation***

Please document exactly what services you require from pathology, including: phlebotomy, storage, processing and dispatch of specimens to external laboratories, or local laboratory testing

For Completion by Study Trial Coordinator			For Completion by Pathology
Item	Analyte, test or service	Occasions (per patient enrolled)	Cost

The Principle investigator or their Study Co-ordinator are required to provide

- **Notification of study commencement 48 hours prior to commencement must be provided**
- Notification to Pathology as well as Ethics Committee upon completion of each clinical trial
- Principle Investigator will ensure that adequate funds are available to cover agreed costs and that payment of invoices occurs within a timely manner. Default of payment may preclude pathology approval of future studies
- **Documentation completed by: Name:** \_\_\_\_\_

**Position:** \_\_\_\_\_ **Department:** \_\_\_\_\_ **Date:** \_\_\_\_\_