

**The Queen's Medical Center
Office of Research and Development**

BIostatistics REQUEST (FORM 7)

Date Received: ___ / ___ / ___ Initials: _____

ORD Project Number: BN - _____ - _____

Preliminary Title: _____

Principal Investigator: _____

Research Team: _____

Funding source (other than ORD support)? _____

Requested BCF faculty/staff or level (if any preference): _____

Description: The John A. Burns School of Medicine (JABSOM), University of Hawaii, and The Office of Research and Development (ORD), The Queen's Medical Center (QMC), see the need for coordinated and streamlined biostatistical/bioinformatical support for biomedical researchers (includes clinical, translational, basic). ORD has established a limited budget for QMC staff and affiliates to request biostatistical support through the JABSOM Biostatistics Core Facility (BCF; <https://qhs.jabsom.hawaii.edu/biostatistics-core/>). To manage the available funds, QMC staff in need of biostatistical support can access ORD funds under the following criteria:

1. Investigator completes ORD Form 7 (this form) except sections marked in gray.
2. Submits ORD Form 7 to the Pre-Award Coordinator (Lori Tsue, Itsue@queens.org). The coordinator will submit Form 7 to Biostatistics Core Coordinator (Meliza Roman, biostat@hawaii.edu, 808-692-1466) with cc to investigator.
3. The investigator initiates 1 hour consultation with BCF by contacting the Biostatistics Core Coordinator (Meliza Roman), which will be supported by UH institutional infrastructural grants (NIH U54MD007601 OLA HAWAII). This meeting allows BCF to determine estimated costs. The researcher agrees that OLA HAWAII will be acknowledged in any publication and presentation resulted from this biostatistical collaboration. Additional grant(s) may also need to be acknowledged.
4. BCF returns ORD Form 7 to Pre-Award Coordinator with rough outline of level of support and cost estimate (cc investigator).
5. The Director of ORD must approve the completed Form 7 for BCF support. The Post-Award Coordinator (Lori Tsue, Itsue@queens.org) will post the approved Form 7 in the ORD database (RPTS).
6. BQHS will invoice ORD through the Post-Award Coordinator. Together with the invoice, BCF will provide the Post-Award Coordinator with a progress report. This will be used to determine whether the project is on budget. If not, the project has to be re-assessed for a change order or for an adjustment in the sampling analysis plan.
7. Project costs may be capped depending on budget available.

Review Criteria:

a. QMC staff is lead?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
b. Existing grant with biostats budget?*	<input type="checkbox"/> Yes <input type="checkbox"/> No	*ORD budget is for projects without budgeted biostats support.
c. Contacted JABSOM BQHS for consultation?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
d. Request with intent for publication?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
e. Request with intent for grant submission?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
f. Research area(s)**? <small>**ORD budget prioritizes according to board-directed QMC research. ***Oncology-related projects should seek Biostats support through the University of Hawaii Cancer Center</small>	<input type="checkbox"/> Cancer*** <input type="checkbox"/> Nursing <input type="checkbox"/> Basic/Translational <input type="checkbox"/> Native Hawaiian Health <input type="checkbox"/> Trauma/Ortho <input type="checkbox"/> Cardiovascular <input type="checkbox"/> Neuroscience <input type="checkbox"/> Other: _____	
g. What kind of support is needed (check all that apply)?		
<input type="checkbox"/> <i>Sample size calculation</i> <input type="checkbox"/> <i>power analysis</i> <input type="checkbox"/> <i>data analysis plan</i> <input type="checkbox"/> <i>study design</i> <input type="checkbox"/> <i>data management</i> <input type="checkbox"/> <i>data collection tool design (randomizations and sampling techniques)</i> <input type="checkbox"/> <i>biostatistical/bioinformatical analyses</i> <input type="checkbox"/> <i>data listings, tables and figures</i> <input type="checkbox"/> <i>publication and presentation preparation.</i>		

This section for BCF use only

Estimated hours, rate and total costs: _____ hours x \$ _____ per hour = \$ _____

Assigned Lead BCF faculty/staff: _____ Project Number: _____ Invoice Number & Date: _____

BCF approval (print name & sign): _____ Date: _____

Dr. John Chen, Director

This section for ORD use only

Approved Not Approved (Reason _____)

Date: ___ / ___ / ___

Director, ORD