



HTRS

HEMOPHILIA
& THROMBOSIS
RESEARCH SOCIETY

CONCEPT SHEET SUBMISSION FORM

Date Submitted to HTRS: _____

Study Title

Principal Investigator	
Name	
Institution	
Address	
Phone	
Fax	
E-mail	

Co-Investigator	
Name	
Institution	
Address	
Phone	
Fax	
E-mail	

Other Collaborators	
Name	
Institution	
Address	
Phone	
Fax	
E-mail	

Background and Rationale (Please limit to 300 words)

Aims (Limit 150 words)

Study Design (Limit 150 words)

Overall design (multi-institutional, pilot, randomized); study end points; population (inclusion/exclusion criteria); study treatment and intervention; statistical rationale and sample size

HTRS Resources Requested (Include Proposed Budget)

Will the proposed study use the HTRS Registry Database? If so, how?