

NEW PROTOCOL - TRANSDISCIPLINARY TEAM (TDT) REVIEW

(To be completed the TDT Leader or their designee)

Transdisciplinary 7	Геат (TDT): Title					
Title of Protocol:						
Principal Investigat	tor (PI):					
Date of Review:						
Disease Team Decision: Approved		Approved, with incorporation of minor modifications as outlined below				
	☐ Disapproved	Modifications with re-review by TDT requested				
Comments:						
Scientific Merit Sco	ore:					
Scoring System: 4 - Excel		ellent – Example: high profile clinical trial initiated by a UVMCC ator with a novel therapy that may have substantial impact on				
	random high pro	3 – Good – Examples: high profile cooperative group phase III or randomized phase II study with a UVMCC investigator as national PI; high profile industry sponsored or multi-institutional study with a UVMCC investigator as a national PI; high interest trial likely to impact disease				
	disease compet	2 - Acceptable – Examples: high interest clinical trials less likely to impact disease or quality of life but ask an important question; studies with competing higher priority trials of interest that may address a gap in the disease team portfolio				
	1 - Not	Scientifically Meritorious				



UVMMC ACCRUAL GOALS/PRIORITIZATION PLAN:

 I. Does this study compete with another active study? □ No □ Yes If yes, answer questions (a-c): a) Please list other competing studies:
b) Please note how the studies' patient populations overlap and provide rationale for opening the current study:
c) Prioritization of study within existing portfolio of trials (if trials compete for the same patient population): \Box N/A
1) First priority:
2) Second priority:
3) Third priority:
d) Accrual Goals: 1) UVMMC Total Target Accrual (Single #, not range):
2) UVMMC Target Accrual per year (Single #, not a range):
(Note: Studies that do not meet \geq 50% of annual accrual goal measured from the date the study is open to accrual will be recommended for closure.)
2. How many patients/year would likely have been eligible for this trial when considering the past several years?
3. What are the potential barriers to accrual and what preemptive steps can the research team take to minimize those barriers?



4.	. Did the TDT identify any non-standard of	of care	processes	or procedures?	? If yes,	what is	the plan
	to address them?						

By signing this form, the TDT leader (or their designee) attests that the disease team reviewed and discussed the protocol and agrees to support enrollment on the clinical trial. If the PI is the TDT team leader, an alternate team member should sign the TDT form. This completed form must be submitted to the Protocol Review and Monitoring Committee (PRMC) along with a completed protocol submission form (PSF).

IDI Leader (or designee):	
Printed Name:	
Signature:	Date: