

GUIDELINES FOR PREPARING A PROTOCOL SUMMARY

Below is a list of fields and the type of information that is needed to process your protocol for inclusion in PDQ. Please be as thorough as possible when completing the form so that your studies' abstract is as accurate as possible

Title

Protocol I.D. Please include as many as are known

Rationale A brief explanation of why the study is being completed

Protocol Objectives Goals of the study

Outline A brief description of the treatment plan. This should include what drugs or therapy the patient will receive and at what times

Protocol Entry Criteria/Patient Eligibility The disease characteristics that a person must have to be enrolled in a particular trial

Prior/Concurrent Therapy Any therapies that would exclude a person from this trial

Patient Characteristics/ Inclusion Criteria Age, sex, performance status, etc

Projected Accrual The number of patients expected to be entered on the trial before it closes to accrual

Study Activation Date The date when patients are allowed to be entered on the trial

Name and complete address information for the protocol Chief Investigator

Name and complete address information for the protocol update person

Additional Information

Please fax or send documents of all the participating institutions and their associated investigators conducting this study to the address below.

Please mail to:

Tel: 32 2 770 71 47

Fax: 32 2 770 47 54

e-mail: nci.pdq@eortc.be

website: <http://ncilobrussels.cancer.gov>

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