Request For Use of Aggregate Data Form

Date of Submission (mm/dd/yy):	01/19/20		
Name of Organization:	Geisinger Cancer Institute Analysis of Brain metastasis patients treated with Stereotactic Radiation – Patient, tumor and treatment characteristics affecting outcomes.		
Project Title:			
Principal Investigator:	Anand Mahadevan MD		
Co-Investigators:	Scott Soltys MD, Andy Gaya MD, Pollyanna Leite MD		
Corresponding Contact Name:	Anand Mahadevan MD		
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Contact Address: City, State, Zip:	100N Academy Ave, Danville PA, 17821		
roject Description			
Project Start Date (mm/dd/yy):	2/1/2020 (on receipt of Data)		
Project End Date (mm/dd/yy):			
Type of Research Project:	 □ Prospective Study □x Retrospective Analysis □ Technical Study 		
	□ Other		
If "Other," please explain nature of project:			
What is the research question being asked?	What are the patient, tumor and treatment characteristic affecting outcomes in patients with Brain metastasi treated with stereotactic Radiosurgery		
What is the background or rationale for the research question? (if needed, please attach as a separate page to application)	The impact of patients' demographic attributes, primar tumor, performance status, number/size/nature of brain metastasis and the treatment dose fractionation and technique have all been shown to impact outcomes. However, these have not been studied in a large read world experience and the interplay between these factor needs to be validated		
Patient Inclusion/Exclusion Criteria:	Inclusion: Patients treated with Stereotactic Radiation for Brain metastasis aged 18-90 Exclusion: Children<18 years of age, Primary brain tumors		
ata Requested			
Description of patient population to be analyzed:	Adult patients with metastatic brain tumors treated with Stereotactic Radiation in the RSSearch data repository.		

Time frame to be studied:			
List exact data variables requested (i.e.	Demographic Variables: Age, sex, Ethnicity (if available)		
pathology, treatment planning	Patient Characteristics: KPS		
information, outcome, reimbursement,	Tumor characteristics: Primary tumor, Primary tumor		
etc.): If the request is not self-evident,	status, Metastasis size/number/location/volume,		
write a summary of the request and/or	Radiosurgery Dose fractionation, Prior WBRT, Surgery,		
instructions on data output (e.g., table	Chemotherapy, Targeted therapy, Immunotherapy,		
specifications, sample tables).	Salvage therapy, Local Control, Distant Brain control,		
	Radiation Necrosis, Leptomeningeal failure.		
Deadline for receipt of data (mm/dd/yy):	2/15/2020		

Data Use

Are these data for internal research	Yes
purposes only? (yes/no)	
If requesting party will seek to share data	Investigators' teams.
with persons not already listed on this	
request, list the organizations with which	
data would be shared and in what	
capacity? (e.g., FDA for a clinical trial, NIH	
for a grant proposal, consultant for project	
development)	
Peer-reviewed publications to which	Radiation Oncology, International J of Radiation Oncology
submission is anticipated (if any)	Biology Physics, Journal of Clinical oncology
National meetings at which abstract	ASTRO, RSS, AAPM
presentation is anticipated (if any)	

Additional Submission Requirements

Please attach each of the following:

- Copy of IRB approval letter for use of RSSearch® at your institution
- · Curriculum vitae of the principal investigator

Requestor Certification

In making this request, I certify that:

- All information provided on this form and attachments is accurate and complete;
- I have all requisite institutional authority to submit this Request for Use of Collaborative Data

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Signature	
	Anand Mahadevan
Print Name	
	MD
Title	
-	01/20/2020
Date	

Please submit Request for Use of Collaborative Data to jdavis@therss.org

For Internal Use Only:

Date application received:	01/20/20	
	2020-0120	