Request for Research Informatics Services

Name:	Request Date:
Email (VA preferred):	
VA Status (MVAHCS staff, resident, trainee):	
Project type:	
Funded Research project	
IRBNet Number:	Approval Date:
• Research Informaticist added to IRB approval?	🗆 Yes 🛛 No
Funding Agency:	
Preparatory to research / Feasibility request	
QI project: Please include non-research determination (<u>Research Determination Checklist</u>)	
Request Type:	
Consultation for services (30min) to be completed within ~1 week of request date. Please indicate request type below in addition to meeting.	
Data needs preparatory to research	
Protocol review (data capture, storage, and analysis plan)	
Participant screening plan	
Data extraction (VINCI/DART request)	
Data collection and management plan	
CPRS documentation/note template creation	
Other (clarify in request overview)	
Overall End Goal:	
□ Manuscript □ Abstract □ Grant □ Pres	entation
Request overview (2-3 sentence summary):	

List any relevant dates or deadlines for project:

Email to Lisa.Smith17@va.gov