

MULTICENTER OSTEOARTHRITIS STUDY ANCILLARY STUDY PROPOSAL FORM

Email completed form to MOSTPublications@bu.edu.

Name of ancillary study investigator: Telephone number:				MOST investigator (sponsoring): Date of request: / /		
Institutional Affiliation:	□BU	☐ UAB	UCSF	□UI	☐ Other:	
1. Working title of propo	sal:					
2. Please attach a proposal (generally 3-5 pages in length) that includes the following:						
hypothesis and asse) Proposed analysis plan should include be used in the propproposed abstracts require submission submitting abstract requirements. f) A detailed estimate i. costs includir ii. staff and partiii. radiation expiv. quantity of arg) Plans for funding, if h) A timeline and plant from receipt of funding.	tionale for a nethods an sample size sumptions u plans for u a tentative osal analys /papers res of a separa s/papers ba of the impla administ icipant time osure by biological for completing.	the study ad procedure e required to underlying tl p to 3 speci e title for the ses and 1 to sulting from ate analysis ased on the act of the si tration, data e al specimen	es to be emplootest, or if sane estimate fic abstracts/pe paper, the report 2 mock table the ancillary study on the manalysis, and (s) to be consubmission of a	mple size is papers that esearch que es illustratir study that a T Publicatir dy data. Se ain study, it Coordinat umed per pubstract(s) a	ing Center costs	
1)		4)			7)	
2)		5)			8)	
3)		6)			9)	
	n of specia of any exis	al sets of ir sting MRI,)	nages (MRI, I	X-ray and/	Committee): or CT) for reading? ps to people reading images for the ancillary study	
5. When and where do ye	ou plan to	submit an	abstract for	this propo	sal (if applicable)?	
	T Executiv	ve Committ	t ee. (Note: Th	e MOST w	n the MOST website, once the ancillary study is ebsite is a restricted-access website.)	