



## Irish Prostate Cancer Outcomes Research

### RELEASE OF DATA ACCESS REQUEST FORM

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The Irish Prostate Cancer Outcomes research (IPCOR) encourages use of its data for a variety of purposes such as quality improvement projects, research and clinical planning.

*Each request for release of data must be accompanied by this completed form. Please type or print clearly. Please return this completed form to the address below:*

IPCOR Project Manager

Email: [PM@ipcor.ie](mailto:PM@ipcor.ie)

Clinical Research Development Ireland  
28 Upper Mount Street  
Dublin 2

Tel: +353 1 658 2136

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#### SECTION 1: APPLICANT'S DETAILS

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*All correspondence regarding this application should be directed to:*

Applicant's name	
Affiliation	
Address:	
Telephone	
Fax	
Email	
Project Lead Investigator or Project Supervisor name	
Affiliation	
Address:	



Telephone	
Fax	
Email	
Requesting party:	
<input type="checkbox"/> Research/Academic Institution	<input type="checkbox"/> Government Dept
<input type="checkbox"/> Registry	<input type="checkbox"/> Treating physician
<input type="checkbox"/> Industry: Please specify	
<input type="checkbox"/> Other: Please specify	

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## SECTION 2: PURPOSE OF THE DATA REQUEST

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- Research       Clinical       Planning       Business
- Other, specify: \_\_\_\_\_

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## SECTION 3: PROPOSED RESEARCH PLAN

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Short title of data request
Project plan: Please attach a description of your project. Project plan must include: <ul style="list-style-type: none"><li>• <i>Background</i></li><li>• <i>Objectives</i></li><li>• <i>Methods</i></li><li>• <i>Data analysis plan</i></li><li>• <i>Person responsible for data analysis</i></li><li>• <i>How potential results will be displayed</i></li><li>• <i>Proposed output from the project: include scientific journal/s to which the completed manuscript will be submitted, detail of conference/forum where data will be discussed.</i></li><li>• <i>References</i></li></ul>
What data fields are you requesting from IPCOR? Please review IPCOR Data Dictionary and include data fields. Attach additional pages as required



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*How will this project be resourced?*

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#### **SECTION 4: ETHICS APPROVAL**

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Have you received all relevant Ethics Certificates to access the IPCOR data?

Yes       No

Sites approving the ethical conduct of the research

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Sites yet to approve the project and anticipated approval date (if applicable)

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If No ethics application has been lodged, please explain why

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**SECTION 5: PROCESSING FEE**

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Individual researcher without funding	No charge
Individual researcher with funding	Negotiable
Industry group	Negotiable

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**SECTION 6: CERTIFICATION**

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I certify that I have read the IPCOR Data Access Policy and agree to the terms outlined in the Policy	
Applicant's signature	
Lead Investigator/ Supervisor signature	

Notes:

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**FOR OFFICE USE ONLY**

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Date received	
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Documentation checked	
Researcher contacted	
Outcome provided to researcher	
IPCOR Responsible Person	
Processing fee	