**General Principles for using ELSO Registry data for Publication**

1. ELSO supports the use of ELSO Registry data for research to improve the care of ECMO patients.
2. Released data must only be used to test the hypotheses included in the study proposal.
3. Investigators are allowed 12 months of exclusive access to the data for the questions articulated in the proposal, with the following caveats.
4. I agree to only publish one (1) manuscript from this data request. This does not include abstracts for scientific meetings.

***All requests for ELSO Registry data constitute my own work and that of the co-investigators included in this request. By submitting this data request form, I acknowledge and agree to the*** [***ELSO Policy on Data***](https://www.elso.org/Portals/0/Files/ELSO_Policy_on_Data.pdf)***. Please email the completed data request form to*** ***ELSODataRequest@elso.org******.***

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| **Internal ELSO Registry Number *(ELSO will complete this part)*** |
|  | Number |

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| **ADMINISTRATIVE INFORMATION *(Investigator has to complete all fields)*** |
| **PROJECT and corresponding contact** |
| Principal Investigator(s) | Name |
| Organization | Organization |
| Telephone number (cell) | Telephone number |
| Email address of Principal Investigator(s) | Email address PI |
| Co-Investigator(s) (please include role and ELSO Site) | Co-Investigtor(s) |
| Any additional person who will have access to the data? | Additional persons |
| **ELSO CENTER** |
| Name of Center Director / Coordinator requesting data | Name of Center Director / Coordinator |
| Email address of Director / Coordinator | Email address Director / Coordinator |
| Electronic Signature of Center Director / Coordinator | Type name for electronic signature |
| Date | 12/2/2021 |
| ELSO Center Name | ELSO center Name |
| ELSO Center Number | ELSO center number |
| **DATA USE** |
| Publication in a peer-reviewed journal (yes/no) | Yes |
| Anticipated journal of submission? (specify) | Anitcipated journal submission ? |
| I have existing data requests from ELSO? (yes/no)*If yes, provide updates for any released dataset*  | Existing data requests ? |

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| **Study Title** |
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| **Overall Study Objective** |
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| **Study aims** (we encourage study aims to include a hypothesis) |
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| **Background and Significance** |
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| **Study inclusion criteria** (defined by ICD-9 / ICD-10 codes, procedure codes, age, ECMO support type, e.g. 28 days to 18 years, pulmonary, 2018-2021 who had any mention of P27.1 ICD-10 diagnoses 2018-2021 who had any mention of P27.1 ICD-10 diagnoses) |
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| **Study exclusion criteria** |
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| **Study years** |
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| **Planned statistical analysis** |
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| **Relevant ELSO variables** (do not state – ‘All Available’, do not list dates) \* for variables not listed in ELSO including addenda, the data request will be rejected: |
|  |  |

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| **References** (please include references for cited works in background, significance, and analysis plan) |
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| **Previous ELSO publication(s) by the study team that support the team’s ability to complete the work** (if no previous experience, please write N/A) |
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| **Have any previous ELSO reviews for this hypothesis been published ?** (if yes, explain how your analysis will contribute to science, if no previous publications, please write N/A) |
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