Welcome to the Integrated Research Application System

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IRAS	Pro	ect	Filler

The integrated dataset required for your project will be created from the answers you give to the following questions. The system will generate only those questions and sections which (a) apply to your study type and (b) are required by the bodies reviewing your study. Please ensure you answer all the questions before proceeding with your applications.

Please enter a short title for this project (maximum 70 characters) The UK Calciphylaxis Study		
1. Is your project research?		
2. Select one category from the list below:		
Clinical trial of an investigational medicinal product		
Clinical investigation or other study of a medical device		
Combined trial of an investigational medicinal product and an investigational medical device		
Other clinical trial to study a novel intervention or randomised clinical trial to compare intervention	s in clinica	al practice
Basic science study involving procedures with human participants		
 Study administering questionnaires/interviews for quantitative analysis, or using mixed quantitative methodology 	e/qualitati	ve
Study involving qualitative methods only		
 Study limited to working with human tissue samples (or other human biological samples) and da only) 	ta (specifi	c project
Study limited to working with data (specific project only)		
Research tissue bank		
Research database		
If your work does not fit any of these categories, select the option below:		
Other study		
2a. Please answer the following question(s):		
a) Will you be taking new samples primarily for research purposes (i.e. not surplus or existing stored samples), including any removal of organs or tissue from the deceased?	Yes	○ No
b) Will you be using surplus tissue or existing stored samples identifiable to the researcher?	O Yes	No
c) Will you be using only surplus tissue or existing stored samples not identifiable to the researcher?	O Yes	No
d) Will you be processing identifiable data at any stage of the research (including in the identification of participants)?	O Yes	No
e) Please confirm that you will be processing only anonymised or effectively pseudonymised data:		
Yes, only anonymised or pseudonmyised data No		

3. In which countries of the UK will the research sites be located?(Tick all that apply)

 ✓ England ✓ Scotland ✓ Wales ✓ Northern Ireland
3a. In which country of the UK will the lead NHS R&D office be located:
● England
○ Scotland
O Wales
O Northern Ireland
This study does not involve the NHS
4. Which review bodies are you applying to?
NHS/HSC Research and Development offices
Social Care Research Ethics Committee
Research Ethics Committee
□ National Information Governance Board for Health and Social Care (NIGB)□ National Offender Management Service (NOMS) (Prisons & Probation)
Inational Offender Management Gervice (NOMG) (1 1150115 & 1 100ation)
For NHS/HSC R&D offices, the CI must create Site-Specific Information Forms for each site, in addition to the study-wide forms, and transfer them to the PIs or local collaborators.
5. Will any research sites in this study be NHS organisations?
● Yes ○ No
5a. Do you want your NHS R&D application(s) to be processed through the NIHR Coordinated System for gaining NHS Permission?
● Yes ○ No
If yes, you must complete and submit the NIHR CSP Application Form immediately after completing this project filter, before proceeding with completing and submitting other applications.
6. Do you plan to include any participants who are children?
○ Yes No
7. Do you plan at any stage of the project to undertake intrusive research involving adults lacking capacity to consent for themselves?
○ Yes ● No
Answer Yes if you plan to recruit living participants aged 16 or over who lack capacity, or to retain them in the study following loss of capacity. Intrusive research means any research with the living requiring consent in law. This includes use of identifiable tissue samples or personal information, except where application is being made to the NIGB Ethics and Confidentiality Committee to set aside the common law duty of confidentiality in England and Wales. Please consult the guidance notes for further information on the legal frameworks for research involving adults lacking capacity in the UK.
8. Do you plan to include any participants who are prisoners or young offenders in the custody of HM Prison Service or who are offenders supervised by the probation service in England or Wales?
◯ Yes No

9. Is the st	tudy or any part of it being undertaken as an educational project?
O Yes	No No
	is research be financially supported by the United States Department of Health and Human Services or any of ns, agencies or programs?
O Yes	No No
	entifiable patient data be accessed outside the care team without prior consent at any stage of the project identification of potential participants)?
O Yes	No No

Integrated Research Application System

Application Form for Research limited to working with human tissue samples and/or data

NHS/HSC R&D Form (project information)

Please refer to the Submission and Checklist tabs for instructions on submitting R&D applications.

The Chief Investigator should complete this form. Guidance on the questions is available wherever you see this symbol displayed. We recommend reading the guidance first. The complete guidance and a glossary are available by selecting <u>Help</u>.

Please define any terms or acronyms that might not be familiar to lay reviewers of the application.

Short title and version number: (maximum 70 characters - this will be inserted as header on all forms) The UK Calciphylaxis Study

PART A: Core study information

1. ADMINISTRATIVE DETAILS

A1. Full title of the research:

The UK Calciphylaxis Study

A3-1. Chief Investigator:

Title Forename/Initials Surname

Dr Smeeta Sinha

Post Consultant and Honorary Senior Lecturer in Nephrology

Qualifications MBChB MRCP PhD

Employer Salford Royal NHS Foundation Trust

Work Address Department of Renal Medicine

Level 2 Hope Building

Stott Lane, Salford

Post Code M6 8HD

Work E-mail smeeta.sinha@srft.nhs.uk
* Personal E-mail smeetasinha@doctors.org.uk

Work Telephone 01612064155
* Personal Telephone/Mobile 07872417512

Fax

A4. Who is the contact on behalf of the sponsor for all correspondence relating to applications for this project?This contact will receive copies of all correspondence from REC and R&D reviewers that is sent to the CI.

^{*} This information is optional. It will not be placed in the public domain or disclosed to any other third party without prior consent.

A copy of a current CV (maximum 2 pages of A4) for the Chief Investigator must be submitted with the application.

Title Forename/Initials Surname Rachel Georgiou

Address Salford Research & Development

Summerfield House Eccles New Road

Post Code M5 5FP

E-mail rachel.georgiou@manchester.ac.uk

Telephone 01612067032

Fax

A5-1. Research reference numbers. Please give any relevant references for your study:

Applicant's/organisation's own reference number, e.g. R & D (if

2012/030vas

available):

Sponsor's/protocol number:

Protocol Version: 1

Protocol Date: 19/07/2011

Funder's reference number:

Project website: www.calciphylaxis.org.uk

Additional reference number(s):

Ref.Number Description Reference Number

REC Reference number 11/NW/0528

Registration of research studies is encouraged wherever possible. You may be able to register your study through your NHS organisation or a register run by a medical research charity, or publish your protocol through an open access publisher. If you have registered your study please give details in the "Additional reference number(s)" section.

A5-2. Is this application linked to a previous study or another current application?

Yes

No

Please give brief details and reference numbers.

2. OVERVIEW OF THE RESEARCH

To provide all the information required by review bodies and research information systems, we ask a number of specific questions. This section invites you to give an overview using language comprehensible to lay reviewers and members of the public. Please read the guidance notes for advice on this section.

A6-1. Summary of the study. Please provide a brief summary of the research (maximum 300 words) using language easily understood by lay reviewers and members of the public. Where the research is reviewed by a REC within the UK Health Departments Research Ethics Service, this summary will be published on the website of the National Research Ethics Service following the ethical review.

Calciphylaxis is a rare condition which results in small arteries becoming calcified. This results in painful ulceration of the skin which in turn can result in infection and further damage to tissue. It is associated with a high mortality rate (60-80%). Consequently research into this area is important. The aims of this study are to determine the following:

- 1) What is the natural history of the disease?
- 2) What risk factors are associated with development and progression of calciphylaxis?
- 3) Which treatments currently in clinical practice confer a favourable outcome?
- 4) What are the underlying disease processes?

These aims will be achieved by collecting information on medications, clinical parameters, local laboratory tests, measuring specific proteins and molecules in blood and tissue as well as studying patient's DNA profiles.

A6-2. Summary of main issues. Please summarise the main ethical, legal, or management issues arising from your study and say how you have addressed them.

Not all studies raise significant issues. Some studies may have straightforward ethical or other issues that can be identified and managed routinely. Others may present significant issues requiring further consideration by a REC, R&D office or other review body (as appropriate to the issue). Studies that present a minimal risk to participants may raise complex organisational or legal issues. You should try to consider all the types of issues that the different reviewers may need to consider.

The UK Calciphylaxis study will be a non-intervention observational study. The study will aim to recruit any patient with chronic kidney disease who has a diagnosis of calciphylaxis from any UK renal department over a 10 year period. Patients will be given information sheets and at least 24 hours to consider involvement. Informed consent will then be obtained from patients willing to participate by a doctor specialising in renal medicine who will be fully informed and able to discuss the nature of the study, and any risks and benefits involved in participation.

The main ethical and design issues are outlined below:

- 1) Calciphylaxis ia a rare and poorly understood condition. Due to the rarity of the condition we will seek approval for all NHS organisations with a hub renal department.
- 2) Taking consent within the patient group. Patients with calciphylaxis are unwell but usually capable of providing consent. Although we accept this is a difficult time for patients there is no alternative to studying this condition. The study has been discussed with the vice chair of the Hope Kidney Patient Association who agrees that such a study is appropriate for patients with calciphylaxis. Patients may withdraw form the study at anytime. If patients lose capacity to consent they will be withdrawn from the study.
- 3) The following data will be collected:
- a) Demographics, medications and standard laboratory variables including 12 months retrospective values will be collected at baseline.
- b) Clinical information on skin lesions, symptoms, and initial treatments/interventions will be collected at baseline.
- c) Monthly follow-up clinical and laboratory data will be requested until full recovery or death.
- d) Blood samples will be taken at baseline, week 1 & 2, 1 month and after full healing should this occur. Samples will be frozen for testing of serum levels of promoters and inhibitors of calcification, and clotting factor deficiencies.
- e) A DNA sample will be taken at baseline. Patients will be able to refuse consent for collection of DNA. DNA samples will anonymised and transported directly to the Centre for Integrated Genomic Medical Research (CIGMR), University of Manchester.
- f) Any tissue that is taken for diagnostic or therapeutic purposes (i.e. skin biopsy, amputation, mastectomy etc) will be requested and collected for stored at the University of Manchester. Diagnostic blocks/slides will be anonymised at reception at the Laboratory of Regenerative Medicine in the University of Manchester and stored for future research subject to appropriate ethical approval for specific projects. Patients will be able to refuse consent for collection of tissue.
- 4) Data protection. Patient information will be anonymised outside the direct care centre using a unique patient code which will be generated at registration. Anonymised data and samples may be transported outside the EU for future studies.

The design of the study has been undertaken in collaboration with the International Calciphylaxis Collaborative Network involving the UK, Germany and USA. Each country is responsible for setting up its own study utilising an agreed protocol for data and biological sample collection.

3. PURPOSE AND DESIGN OF THE RESEARCH

NHS R&D Form

A7. Select the appropriate methodology description for this research. Please tick all that apply:
Case series/ case note review
Case control
Controlled trial without randomisation
Cross-sectional study
Database analysis
☑ Epidemiology
Feasibility/ pilot study
Laboratory study
☐ Metanalysis
Qualitative research
Questionnaire, interview or observation study
Randomised controlled trial
Other (please specify)

A10. What is the principal research question/objective? Please put this in language comprehensible to a lay person.

The study will aim to improve our understanding of calciphylaxis by examining:

- a) What is the natural history of the disease?
- b) What risk factors are associated with development and progression of calciphylaxis?
- c) Which current standard treatments confer a favourable outcome?
- d) What are the underlying disease processes?

A11. What are the secondary research questions/objectives if applicable? Please put this in language comprehensible to a lay person.

A12. What is the scientific justification for the research? Please put this in language comprehensible to a lay person.

Calciphylaxis is a rare syndrome during which small arteries become calcified. This results in skin breakdown (necrosis) and is associated with a high morbidity and mortality. It is usually associated with chronic kidney disease, particularly in patients on dialysis. Small cohort studies have suggested a reported prevalence of 1-4% in dialysis populations. Reports have suggested calciphylaxis carries a mortality of 60-80% in patients on dialysis. This is usually due to superseding infection in necrotic lesions.

The cause and processes that underpin the development of calciphylaxis remain poorly understood. However, it is known that calciphylaxis results from a build up of calcium and bone like tissue (calcification) in small arteries. There has been a significant increase in our understanding of harmful vascular calcification in larger blood vessels over the last 20 years. Vascular calcification is an active cell-mediated process during which cells within the vessel wall become more like bone cells and can deposit calcium within the vessel wall. Researchers have discovered that there are several proteins and molecules circulating within the blood which can promote or prevent calcification of blood vessels. An imbalance in these proteins can affect the degree of vascular calcification. Some of these proteins and molecules are also found in calcified wounds. Whether these processes occur in calciphylaxis is not clear. Recently, a group of researchers in Germany have found that levels of one such protein are significantly reduced in patients with calciphylaxis. However, this was only a small pilot study.

There is currently little published about calciphylaxis and the published literature consists largely of case reports and

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small case series. The largest published studies include retrospective studies or single centre studies across prolonged periods of times during which clinical practice has changed significantly. Data from these studies has indicated several factors may contribute to the progression of calciphylaxis and that certain patients have benefited from certain treatments. However, due to the nature of these studies it is not surprising that the published reports have conflicting information on risk factors and benefits of treatments. The UK Calciphylaxis study will therefore also aim to collect data on clinical parameters and medication prior to and during the course of the disease to assess the benefits of interventions. Before we can develop better treatments for patients it is essential that we have a better understanding of the disorder. In the proposed study we will build on what is already known but in a larger population.

A13. Please summarise your design and methodology. It should be clear exactly what will happen to the research participant, how many times and in what order. Please complete this section in language comprehensible to the lay person. Do not simply reproduce or refer to the protocol. Further guidance is available in the guidance notes.

The UK Calciphylaxis study will be a non-intervention cohort observational study. The study will recruit any patient with chronic kidney disease who has a diagnosis of calciphylaxis from any UK renal department (subject to R & D approval) over a 10 year period. Prospective patients will be identified, approached and recruited by their usual health care provider. Patients will be registered into the study via the study website www.calciphylaxis.org.uk. Patients will be given information sheets and at least 24 hours to consider involvement. Informed consent will then be obtained from patients willing to participate by a doctor specialising in renal medicine who will be fully informed and able to discuss the nature of the study, and any risks and benefits involved in participation. Due to the rarity of the disorder all NHS organisations will be invited to recruit patients into the study. The following data and samples will be collected:

- 1) Demographics, concomitant medications and standard laboratory variables including 12 months retrospective values will be collected at baseline.
- 2) Clinical information on skin lesions, symptoms, and initial therapeutic interventions will be collected at baseline.
- 3) A blood sample for DNA analysis will be taken at baseline and posted immediately at room temperature to the Centre for Integrated Genomic Medical Research (CIGMR) for extraction and storage.
- 4) Plasma/Serum and clotting samples will be taken at baseline, week 1 & 2, 1 month and after full healing should this occur. Samples will be frozen at –20oC or below and stored locally for 1 month. Samples will be sent to the core laboratory after 1 month and thereafter. Samples will be frozen at –80oC at the core laboratory for testing of serum levels of promoters and inhibitors of calcification, and clotting factor deficiencies.
- 5) 4 monthly follow-up clinical and laboratory data will be requested until full recovery or death.
- 6) Any tissue that is taken for diagnostic or therapeutic purposes (i.e. skin biopsy, amputation, mastectomy etc) will be requested and collected for tissue banking at the University of Manchester. Diagnostic blocks/slides will be anonymised at reception at the Laboratory of Regenerative Medicine in the University of Manchester and banked for future research subject to appropriate ethical approval for specific projects.

The design of the study has been undertaken in collaboration with the International Calciphylaxis Collaborative Network involving the UK, Germany and USA. Each country is responsible for setting up its own study utilising an agreed protocol for data and biological sample collection.

A14-1. In which aspects of the research process have you actively involved, or will you involve, patients, service users, and/or their carers, or members of the public?
☑ Design of the research
Management of the research
Undertaking the research
Analysis of results

Disser	nination of findings	
None o	f the above	
Give detail	s of involvement, or if none please justify the absence of involvement.	
	rmation sheets were reviewed and approved by Keith Pennington. Mr Pennington is the vice chair of the	
Hope Kidne	ey Patient Association as well as being a kidney transplant patient who has experienced haemodialysis.	

4. RISKS AND ETHICAL ISSUES

RESEARCH PARTICIPANTS

A15. What is the sample group or cohort to be studied in this research?					
Select all that apply:					
,					
Blood					
Cancer					
Cardiovascular					
Congenital Disorders					
Dementias and Neurodegenerative I	Diseases				
Diabetes					
Ear					
Eye					
Generic Health Relevance					
✓ Infection					
Inflammatory and Immune System					
☐ Injuries and Accidents					
Mental Health					
Metabolic and Endocrine					
Musculoskeletal					
Neurological					
Oral and Gastrointestinal					
Paediatrics					
Reproductive Health and Childbirth					
Respiratory					
Skin					
Stroke					
Gender:	Male and female participants				
Lower age limit: 18	Years				
Upper age limit:	Years				

A17-1. Please list the principal inclusion criteria (list the most important, max 5000 characters).

Any patient with chronic kidney disease and a clinical diagnosis of calciphylaxis, subject to informed consent.

A17-2. Please list the principal exclusion criteria (list the most important, max 5000 characters).

Patients who cannot give informed consent

RESEARCH PROCEDURES, RISKS AND BENEFITS

A18. Give details of all non-clinical intervention(s) or procedure(s) that will be received by participants as part of the research protocol. These include seeking consent, interviews, non-clinical observations and use of questionnaires.

Please complete the columns for each intervention/procedure as follows:

- 1. Total number of interventions/procedures to be received by each participant as part of the research protocol.
- 2. If this intervention/procedure would be routinely given to participants as part of their care outside the research, how many of the total would be routine?
- 3. Average time taken per intervention/procedure (minutes, hours or days)
- 4. Details of who will conduct the intervention/procedure, and where it will take place.

Intervention or procedure	1	2	3	4
Seeking consent	1	0	30	local nephrologist

A19. Give details of any clinical intervention(s) or procedure(s) to be received by participants as part of the research protocol. These include uses of medicinal products or devices, other medical treatments or assessments, mental health interventions, imaging investigations and taking samples of human biological material. Include procedures which might be received as routine clinical care outside of the research.

Please complete the columns for each intervention/procedure as follows:

- 1. Total number of interventions/procedures to be received by each participant as part of the research protocol.
- 2. If this intervention/procedure would be routinely given to participants as part of their care outside the research, how many of the total would be routine?
- 3. Average time taken per intervention/procedure (minutes, hours or days).
- 4. Details of who will conduct the intervention/procedure, and where it will take place.

Intervention or procedure	1	2	3	4
Venepuncture	8	0	5	normal local venepuncturist

A21. How long do you expect each participant to be in the study in total?

Patients will remain in the study until complete resolution of calciphylaxis, withdrawal or death.

A22. What are the potential risks and burdens for research participants and how will you minimise them?

For all studies, describe any potential adverse effects, pain, discomfort, distress, intrusion, inconvenience or changes to lifestyle. Only describe risks or burdens that could occur as a result of participation in the research. Say what steps would be taken to minimise risks and burdens as far as possible.

As this is an observational non-intervention study, there are no expected clinical risks aside from minor discomfort associated with additional venepunture.

A24. What is the potential for benefit to research participants?

There will be no direct benefit to patients.

Knowing that they are contributing towards research in improving the understanding of calciphylaxis.

RECRUITMENT AND INFORMED CONSENT

In this section we ask you to describe the recruitment procedures for the study. Please give separate details for different study groups where appropriate.

A27-1. How will potential participants, records or samples be identified? Who will carry this out and what resources will be used? For example, identification may involve a disease register, computerised search of GP records, or review of medical records. Indicate whether this will be done by the direct healthcare team or by researchers acting under arrangements with the responsible care organisation(s).
a) Patients will be identified by their local nephrologist at the time of presentation of calciphylaxis lesions.b) Patients will be approached by the local research team and provided with patient information leaflets.c) Patients will be recruited by their local research team.
A27-2. Will the identification of potential participants involve reviewing or screening the identifiable personal information of patients, service users or any other person?
◯ Yes ● No
Please give details below:
A28. Will any participants be recruited by publicity through posters, leaflets, adverts or websites?
◯ Yes No
A29. How and by whom will potential participants first be approached?
Patients will initially be approached by their normal health-care provider.
A30-1. Will you obtain informed consent from or on behalf of research participants?
● Yes ○ No
If you will be obtaining consent from adult participants, please give details of who will take consent and how it will be done, with details of any steps to provide information (a written information sheet, videos, or interactive material). Arrangements for adults unable to consent for themselves should be described separately in Part B Section 6, and for children in Part B Section 7.
If you plan to seek informed consent from vulnerable groups, say how you will ensure that consent is voluntary and fully informed.
Patients will be given information sheets and at least 24 hours to consider involvement. Informed consent will then be obtained from patients willing to participate by a doctor specialising in renal medicine who will be fully informed and able to discuss the nature of the study, and any risks and benefits involved in participation. The doctor will be used to taking consent and will be appropriately trained.
If you are not obtaining consent, please explain why not.
Please enclose a copy of the information sheet(s) and consent form(s).
A30-2. Will you record informed consent (or advice from consultees) in writing?
● Yes ○ No
A31. How long will you allow potential participants to decide whether or not to take part?

A33-1. What arrangements have been made for persons who might not adequately understand verbal explanations or

Minimum of 24 hours

written information given in English, or who have special communication needs?(e.g. translation, use of interpreters)

Use of local interpreter services or other support services as available.

A33-2. What arrangements will you make to comply with the principles of the Welsh Language Act in the provision of information to participants in Wales?

None

A35. What steps would you take if a participant, who has given informed consent, loses capacity to consent during the study? Tick one option only.
The participant and all identifiable data or tissue collected would be withdrawn from the study. Data or tissue which is not identifiable to the research team may be retained.
• The participant would be withdrawn from the study. Identifiable data or tissue already collected with consent would be retained and used in the study. No further data or tissue would be collected or any other research procedures carried out on or in relation to the participant.
The participant would continue to be included in the study.
Not applicable – informed consent will not be sought from any participants in this research.
Not applicable – it is not practicable for the research team to monitor capacity and continued capacity will be assumed.
Further details:
Details pertaining to consent are provided in the patient information leaflet.
If you plan to retain and make further use of identifiable data/tissue following loss of capacity, you should inform participants about this when seeking their consent initially.

CONFIDENTIALITY

In this section, personal data means any data relating to a participant who could potentially be identified. It includes pseudonymised data capable of being linked to a participant through a unique code number.

Storage and use of personal data during the study A36. Will you be undertaking any of the following activities at any stage (including in the identification of potential participants)?(Tick as appropriate) Access to medical records by those outside the direct healthcare team ☑ Electronic transfer by magnetic or optical media, email or computer networks Sharing of personal data with other organisations Export of personal data outside the EEA ✓ Use of personal addresses, postcodes, faxes, emails or telephone numbers Publication of direct quotations from respondents Publication of data that might allow identification of individuals Use of audio/visual recording devices Storage of personal data on any of the following: Manual files including X-rays NHS computers Home or other personal computers University computers Private company computers

_		
	Lanton	computers
	Labiuu	COHIDULEIS

Further details:

Patients will be identified by a unique number which will be generated at registration. This number will be used from the time of data entry/download outside the patients' electronic or paper records.

Personal details will be used as part of routine clinical care at the direct care centre. These details will not be transferred outside the local centre.

A37. Please describe the physical security arrangements for storage of personal data during the study?

The research database will be stored within the research department on NHS trust encrypted and password protected computers. This will be in accordance with the Data Protection Act and NHS Code of Confidentiality.

A38. How will you ensure the confidentiality of personal data? Please provide a general statement of the policy and procedures for ensuring confidentiality, e.g. anonymisation or pseudonymisation of data.

Patient data will anonymised outside the direct care centre. Patients will be given a unique number at the time of registration. This will ensure anonymity outside the direct care team and local study site.

The NHS Code of Confidentiality will apply.

A40. Who will have access to participants' personal data during the study? Where access is by individuals outside the direct care team, please justify and say whether consent will be sought.

There will be no access to the participants' personal data outside the direct care team with exception of that required for audit and monitoring.

Storage and use of data after the end of the study

A41. Where will the data generated by the study be analysed and by whom?

Analysis will take place by data handling experts (statisticians or doctors) affiliated to the hospital, University of Manchester or to the study itself.

A42. Who will have control of and act as the custodian for the data generated by the study?

Title Forename/Initials Surname
Dr Smeeta Sinha

Post Consultant & Honorary Senior Lecturer in Nephrology

Qualifications MBChB MRCP(UK) PhD
Work Address Department of Renal Medicine

Level 2 Hope Building

Hope Hospital, Stott Lane, Salford

Post Code M6 8HD

Work Email smeeta.sinha@srft.nhs.uk

Work Telephone 01612064155

Fax

A43. How long will personal data be stored or accessed after the study has ended?

O Less than 3 months

It should be made clear in the participant's information sheet if the GP/health professional will be informed.

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	PUBLICATION AND DISSEMINATION
ſ	A50. Will the research be registered on a public database?
	● Yes ○ No
	Please give details, or justify if not registering the research. NIHR Database
	Registration of research studies is encouraged wherever possible. You may be able to register your study through your NHS organisation or a register run by a medical research charity, or publish your protocol through an open access publisher. If you are aware of a suitable register or other method of publication, please give details. If not, you may indicate that no suitable register exists. Please ensure that you have entered registry reference number(s) in question A5-1.
ſ	A51. How do you intend to report and disseminate the results of the study? Tick as appropriate:
	✓ Peer reviewed scientific journals
	✓ Internal report
	✓ Conference presentation
	☐ Publication on website
	Other publication
	Submission to regulatory authorities
	Access to raw data and right to publish freely by all investigators in study or by Independent Steering Committee on behalf of all investigators
	☐ No plans to report or disseminate the results
	✓ Other (please specify)
	Kidney Patient Association Leaflets
L	
	A52. If you will be using identifiable personal data, how will you ensure that anonymity will be maintained when publishing the results?
	The study will not publish patient identifiable data
Γ	A53. Will you inform participants of the results?
	Yes No
	Please give details of how you will inform participants or justify if not doing so. Results will be published in patient association leaflets and to renal departments. Due to the nature of the disease and high mortality rate it will not be feasible to provide a results summary to all participating patients.
П	
	5. Scientific and Statistical Review
ſ	A54. How has the scientific quality of the research been assessed? Tick as appropriate:
	✓ Independent external review
	Review within a company
	Review within a multi-centre research group
	Review within the Chief Investigator's institution or host organisation

Review within the research team
Review by educational supervisor

Other
Justify and describe the review process and outcome. If the review has been undertaken but not seen by the researcher, give details of the body which has undertaken the review: The study has been sent for external review to Dr David Wheeler, Consultant Renal Physician
For all studies except non-doctoral student research, please enclose a copy of any available scientific critique reports, together with any related correspondence.
For non-doctoral student research, please enclose a copy of the assessment from your educational supervisor/ institution.
A56. How have the statistical aspects of the research been reviewed? Tick as appropriate:
Review by independent statistician commissioned by funder or sponsor
Other review by independent statistician
Review by company statistician
Review by a statistician within the Chief Investigator's institution
Review by a statistician within the research team or multi-centre group
Review by educational supervisor
Other review by individual with relevant statistical expertise
No review necessary as only frequencies and associations will be assessed – details of statistical input not required
In all cases please give details below of the individual responsible for reviewing the statistical aspects. If advice has been provided in confidence, give details of the department and institution concerned.
Title Forename/Initials Surname
Department
Institution
Work Address
Post Code
Telephone
Fax
Mobile
E-mail
Please enclose a copy of any available comments or reports from a statistician.
A57. What is the primary outcome measure for the study?
This is an observational study.
A58. What are the secondary outcome measures? (if any)
A59. What is the sample size for the research? How many participants/samples/data records do you plan to study in total?
If there is more than one group, please give further details below.
Total UK sample size: 200 Total international sample size (including UK):

Total in European Economic Area:	
Further details:	

A60. How was the sample size decided upon? If a formal sample size calculation was used, indicate how this was done, giving sufficient information to justify and reproduce the calculation.

The sample size was based on incidence reports and acceptability.

A61. Will participants be allocated to groups at random?

O Yes

No

A62. Please describe the methods of analysis (statistical or other appropriate methods, e.g. for qualitative research) by which the data will be evaluated to meet the study objectives.

Data will be analysed by descriptive analysis and logistic regression.

6. MANAGEMENT OF THE RESEARCH

A63. Other key investigators/collaborators. Please include all grant co-applicants, protocol co-authors and other key members of the Chief Investigator's team, including non-doctoral student researchers.

Title Forename/Initials Surname

Dr Maria Jeziorska

Post Senior Lecturer in Pathology

Qualifications PhD

Employer University of Manchester

RM1.534, Stopford Building

Oxford Rd, Manchester

Post Code M13 9PT

Telephone 0161 275 5296 Fax 0161 275 5289

Mobile

Work Email maria.jeziorska@manchester.ac.uk

Title Forename/Initials Surname Prof Philip A. Kalra

Post Consultant and Honorary Professor in Nephrology

Qualifications MD FRCP

Employer Salford Royal Hospitals NHS Foundation Trust

Work Address Department of Renal Medicine

Level 2 Hope Bulding Stott Lane, Salford

Post Code M6 8HD
Telephone 01612050509

Fax Mobile

Work Email philip.kalra@srft.nhs.uk

Title Forename/Initials Surname
Dr Robert Oliver

Post Salford Royal Biorepository Facility Manager

Qualifications PhD

Employer Salford Royal NHS Foundation Trust

Work Address Clinical Sciences Building

Salford Royal NHS Foundation Trust

Stott Lane

Post Code M6 8HD
Telephone 01612064446

Fax Mobile

Work Email robert.oliver@manchester.ac.uk

Title Forename/Initials Surname Sr Lesley Haydock

Post Specialist Nurse, Vascular Research

Qualifications RCN

Employer Salford Royal NHS Foundation Trust

Work Address Clinical Sciences Building

Salford Royal NHS Foundation Trust

Stott Lane

Post Code M6 8HD
Telephone 01612061309

Fax Mobile

Work Email lesley.haydock@srft.nhs.uk

A64. Details of research sponsor(s)

A64-1. Sponsor Status: NHS or HSC care organisation Commercial status: Academic Pharmaceutical industry Medical device industry Local Authority Other social care provider (including voluntary sector or private organisation) Other If Other, please specify: Contact person Name of organisation Salford Royal NHS Foundation Trust Given name Rachel

Family name Georgiou Address Summerfield House Town/city **Eccles New Road** Post code M5 5FP Country UNITED KINGDOM Telephone 01612067032 Fax E-mail rachel.georgiou@manchester.ac.uk Is the sponsor based outside the UK? Yes No Under the Research Governance Framework for Health and Social Care, a sponsor outside the UK must appoint a legal representative established in the UK. Please consult the guidance notes.

A65. Has extern	al funding for the res	search been secured?
	cured from one or mo	ore funders
External fu	nding application to o	ne or more funders in progress
No applicat	tion for external fundir	ng will be made
What type of re	esearch project is this	?
Standalone	e project	
	it is part of a programi	me grant
	t is part of a Centre gr	
		ip/ personal award/ research training award
Other		priparation and an arrange and a
Other – please	atata:	
Otriei – piease	siale.	
Please give det	ails of funding applic	ations.
Organisation	Amgen (Europe) GmBH
Address	Dammstrasse 2	23
	CH-6300 Zug	
	Switzerland	
Post Code		
Telephone	00413690300	
Fax	004141369040)
Mobile		
Email	bdehmel@amg	en.com
Funding Appli	cation Status:	Secured
Amount:	US \$112500.00	
Duration		
Years:	10	

B 4	I	_ 1	ı_	
I\/I	n	nτ	n	s:

If applicable, please specify the programme/ funding stream:

What is the funding stream/ programme for this research project?

A66. Has responsibility for any specific research activities or procedures been delegated to a subcontractor (other than a co-sponsor listed in A64-1)? Please give details of subcontractors if applicable.

O Yes

No

A67. Has this or a similar application been previously rejected by a Research Ethics Committee in the UK or another country?

O Yes

No

Please provide a copy of the unfavourable opinion letter(s). You should explain in your answer to question A6-2 how the reasons for the unfavourable opinion have been addressed in this application.

A68-1. Give details of the lead NHS R&D contact for this research:

Title Forename/Initials Surname

Rachel Georgiou

Organisation Salford Royal NHS Foundation Trust

Address Summerfield House

Eccles New Road

Salford

Post Code M5 5FP

Work Email rachel.georgiou@manchester.ac.uk

Telephone

01612067032

Fax Mobile

Details can be obtained from the NHS R&D Forum website: http://www.rdforum.nhs.uk

A68-2. Select Comprehensive Local Research Network for this NHS organisation:

To support communication between the REC and R&D contacts for this study, please select the Comprehensive Local Research Network (CLRN) for this NHS organisation. This CLRN will be the Lead CLRN for your study.

-- Not Selected --

For information about support and advice available through the Lead CLRN and the CLRNs for participating sites see http://www.crncc.nihr.ac.uk/about_us/processes/csp. A map showing the CLRNs is available at http://www.crncc.nihr.ac.uk/about_us/ccrn.

A69-1. How long do you expect the study to last in the UK?

Planned start date: 01/09/2011 Planned end date: 01/09/2021

Total duration:

re trial will terminate at the end of the 10 year of the 10. 71-1. Is this study? Single centre Multicentre 71-2. Where will the research take place? (Tienson) England	
Single centre Multicentre 11-2. Where will the research take place? (Tide)	ijok og approprieto)
• Multicentre 71-2. Where will the research take place? (Tide	ijok og approprieto)
71-2. Where will the research take place? (Tide	ijok og approprieto)
	ijak an annyanyinta)
☑ England	ick as appropriate)
✓ Scotland	
— ▼ Wales	
→ Northern Ireland	
Other countries in European Economic Are	ea
otal UK sites in study 73	
oes this trial involve countries outside the EU Yes No	J?
	n the UK will be responsible for the research sites? Please indicate approximate numbers of planned research sites:
☑ NHS organisations in England	53
▼ NHS organisations in Wales	6
✓ NHS organisations in Scotland	8
☑ HSC organisations in Northern Ireland	6
GP practices in England	
GP practices in Wales	
GP practices in Scotland	
GP practices in Northern Ireland	
Social care organisations	
Phase 1 trial units	
Prison establishments	
Probation areas	
Independent hospitals	
☑ Educational establishments	1
Independent research units	
Other (give details)	
otal UK sites in study:	74

A74. What arrangements are in place for monitoring and auditing the conduct of the research	A74. WI	hat arranger	ments are in p	lace for	monitorina	and auditing	the co	onduct of	the resear	rch	?
---------------------------------------------------------------------------------------------	---------	--------------	----------------	----------	------------	--------------	--------	-----------	------------	-----	---

The study will be monitored and audited in accordance with Salford Royal NHS Foundation Trust Research & Development monitoring systems.

A76. Insurance/ indemnity to meet potential legal liabilities

<u>Note:</u> in this question to NHS indemnity schemes include equivalent schemes provided by Health and Social Care (HSC) in Northern Ireland

A76-1. What arrangements will be made for insurance and/or indemnity to meet the potential legal liability of the sponsor(s) for harm to participants arising from the management of the research? Please tick box(es) as applicable. Note: Where a NHS organisation has agreed to act as sponsor or co-sponsor, indemnity is provided through NHS schemes. Indicate if this applies (there is no need to provide documentary evidence). For all other sponsors, please describe the arrangements and provide evidence. NHS indemnity scheme will apply (NHS sponsors only) Other insurance or indemnity arrangements will apply (give details below) Please enclose a copy of relevant documents. A76-2. What arrangements will be made for insurance and/ or indemnity to meet the potential legal liability of the sponsor(s) or employer(s) for harm to participants arising from the design of the research? Please tick box(es) as applicable. Note: Where researchers with substantive NHS employment contracts have designed the research, indemnity is provided through NHS schemes. Indicate if this applies (there is no need to provide documentary evidence). For other protocol authors (e.g. company employees, university members), please describe the arrangements and provide evidence. NHS indemnity scheme will apply (protocol authors with NHS contracts only) Other insurance or indemnity arrangements will apply (give details below)

Please enclose a copy of relevant documents.

A76-3. What arrangements will be made for insurance and/ or indemnity to meet the potential legal liability of investigators/collaborators arising from harm to participants in the <u>conduct</u> of the research?

<u>Note:</u> Where the participants are NHS patients, indemnity is provided through the NHS schemes or through professional indemnity. Indicate if this applies to the whole study (there is no need to provide documentary evidence). Where non-NHS sites are to be included in the research, including private practices, please describe the arrangements which will be made at these sites and provide evidence.

₩ NHS	indemnity scheme	or professional i	indemnity w	ill apply	(participants	recruited at NI	HS sites or	ıly)
Rese	arch includes non-	-NHS sites (aive	details of in	surance	/ indemnity a	rrangements f	or these si	tes h

Exesser of includes non-NHS sites (give details of insurance/ indemnity arrangements for these sites below)

Please enclose a copy of relevant documents.

A76-1. What arrangements will be made for insurance and/or indemnity to meet the potential legal liability of the sponsor(s) for harm to participants arising from the management of the research? Please tick box(es) as applicable.

<u>Note:</u> Where a NHS organisation has agreed to act as sponsor or co-sponsor, indemnity is provided through NHS schemes. Indicate if this applies (there is no need to provide documentary evidence). For all other sponsors, please describe the arrangements and provide evidence.
✓ NHS indemnity scheme will apply (NHS sponsors only)
Other insurance or indemnity arrangements will apply (give details below)
Please enclose a copy of relevant documents.
A76-2. What arrangements will be made for insurance and/ or indemnity to meet the potential legal liability of the
sponsor(s) or employer(s) for harm to participants arising from the design of the research? Please tick box(es) as applicable.
<u>Note:</u> Where researchers with substantive NHS employment contracts have designed the research, indemnity is provided through NHS schemes. Indicate if this applies (there is no need to provide documentary evidence). For other protocol authors (e.g. company employees, university members), please describe the arrangements and provide evidence.
✓ NHS indemnity scheme will apply (protocol authors with NHS contracts only)
Other insurance or indemnity arrangements will apply (give details below)
Please enclose a copy of relevant documents.
A=0.0 MIL 1
A76-3. What arrangements will be made for insurance and/ or indemnity to meet the potential legal liability of investigators/collaborators arising from harm to participants in the <u>conduct</u> of the research?
<u>Note:</u> Where the participants are NHS patients, indemnity is provided through the NHS schemes or through professional indemnity. Indicate if this applies to the whole study (there is no need to provide documentary evidence). Where non-NHS sites are to be included in the research, including private practices, please describe the arrangements which will be made at these sites and provide evidence.
▼ NHS indemnity scheme or professional indemnity will apply (participants recruited at NHS sites only)
Research includes non-NHS sites (give details of insurance/ indemnity arrangements for these sites below)
Please enclose a copy of relevant documents.
A78. Could the research lead to the development of a new product/process or the generation of intellectual property?
○ Yes No Not sure
Part B: Section 5 – Use of newly obtained human tissue(or other human biological materials)

1. What types of human tissue or other biological material will be included in the study?

Plasma/ serum, clotting samples, DNA and tissue will be collected by local health care providers. They will be analysed by the Vascular Research Group at Hope Hospital and researchers at the University of Manchester.

2. Who will collect the samples?

Plasma, serum, clotting samples and DNA will be taken for research purposes. Tissue will be obtained as a by

product of a clinical intervention eg amputation, diagnostic skin biopsy.
3. Who will the samples be removed from?
☑ Living donors
☐ The deceased
4. Will informed consent be obtained from living donors for use of the samples? Please tick as appropriate
In this research?
● Yes ○ No
In future research?
Yes No Not applicable
6. Will any tissues or cells be used for human application or to carry out testing for human application in this research?
○ Yes No
0.163
8. Will the samples be stored: [Tick as appropriate]
In fully anonymised form? (link to donor broken)
◯ Yes No
In linked anonymised form? (linked to stored tissue but donor not identifiable to researchers)
Yes No
If Yes, say who will have access to the code and personal information about the donor.
Plasma, serum, clotting and DNA samples will be sent to the Vascular Research Group laboratories in the Clinical Sciences building at Hope Hospital. Samples will be labelled with a unique identification barcode and archived in the Salford
Biological Repository (SaBRe) - a purpose built facility that only deals with biological samples and with no direct
links to personal data. Dedicated freezer facilities and split site storage are used.
Pathology samples will be identified by their unique patient study number and coded with a chronological code at the receiving immunocytochemistry laboratory at the University of Manchester
receiving inimunocytochemistry laboratory at the university of Manchester
In a form in which the donor could be identifiable to researchers?
◯ Yes No
9. What types of test or analysis will be carried out on the samples?
Consent from the time of study entry will be utilised. Samples will be tested for proteins and molecules associated with vascular calcification. DNA samples will be used to assess genetic associations with calciphylaxis
40 Will the vecesses involve the analysis or use of human DNA in the complex?
10. Will the research involve the analysis or use of human DNA in the samples?
● Yes ○ No
11. Is it possible that the research could produce findings of clinical significance for donors or their relatives?
○ Yes ● No

12. If so, will arrangements be made to notify the individuals concerned?
42. Cive details of where the complex will be stored who will have peece and the custodial among amonts
13. Give details of where the samples will be stored, who will have access and the custodial arrangements.
Plasma, serum and clotting will be stored at Vascular Research Group laboratories in the Clinical Sciences building at Hope Hospital for 20 years. Access will be available to researchers involved in The UK calciphylaxis Study and members of the Vascular Research Group, Salford Royal NHS Foundation Trust. Custody will remain with Dr Smeeta Sinha.
DNA will be stored at the Centre for Integrated Genomic Medical Research (CIGMR) Imaging, Genomics and Proteomics Research Group, Faculty of Medical and Human Sciences, University of Manchester.
Tissue samples will be stored in the immunocytochemistry laboratory, Division of Laboratory & Regenerative Medicine, University of Manchester. Custody will be with Dr Maria Jeziorska, University of Manchester
14. What will happen to the samples at the end of the research? Please tick all that apply and give further details.
Transfer to research tissue bank
(If the bank is in England, Wales or Northern Ireland the institution will require a licence from the Human Tissue Authority to store relevant material for possible further research.)
☑ Storage by research team pending ethical approval for use in another project
(Unless the researcher's institution holds a storage licence from the Human Tissue Authority, or the tissue is stored in Scotland, or it is not relevant material, a further application for ethical review should be submitted before the end of this project.)
Storage by research team as part of a new research tissue bank
(The institution will require a licence from the Human Tissue Authority if the bank will be storing relevant material in England, Wales or Northern Ireland. A separate application for ethical review of the tissue bank may also be submitted.)
Storage by research team of biological material which is not "relevant material" for the purposes of the Human Tissue Act
Disposal in accordance with the Human Tissue Authority's Code of Practice
Other
Not yet known
Please give further details of the proposed arrangements:

PART C: Overview of research sites

Please enter details of the host organisations (Local Authority, NHS or other) in the UK that will be responsible for the research sites. For NHS sites, the host organisation is the Trust or Health Board. Where the research site is a primary care site, e.g. GP practice, please insert the host organisation (PCT or Health Board) in the Institution row and insert the research site (e.g. GP practice) in the Department row.

Investigator identifier	Research site		Investigator Name	
N1 🗹				
	Institution name	Newcastle - The Newcastle upon Tyne Hospitals NHS	Forename Middle name Family name	Suren Kanagasundaram
	Department name Street address Town/city Post Code Country		Email Qualification (MD) Country	
N2 🔽				
	Institution name Department name Street address Town/city Post Code Country	Belfast - Ulster Hospital Renal Medicine Upper Newtownards Road BT16 1RH	Forename Middle name Family name Email Qualification (MD) Country	Alastair Woodman
N3 🗹				
	Institution name Department name Street address Town/city Post Code	Wirral University Teaching Hospital NHS Foundation Renal Medicine Arrowe Park Road, Upton Wirral, Mersey CH49 5PE	Forename Middle name Family name Email Qualification (MD) Country	Anindya Banerjee
	Country			
IN4 ☑	Institution name Department name Street address Town/city	Birmingham Heartlands Hospital Renal Medicine Bordesley Green East Birmingham	Forename Middle name Family name Email Qualification (MD)	Jyoti Baharani
	Post Code Country	B9 5ST	Country	

IN5 🗹				
	Institution name Department name Street address Town/city Post Code Country	St Lukes Hospital Renal Medicine Littel Horton Lane Bradford BD5 0NA	Forename Middle name Family name Email Qualification (MD) Country	John Stoves
IN6 🗹				
	Institution name Department name Street address Town/city Post Code Country	Dumfries & Galloway Royal Infirmary Renal Medicine Bankend Road Dumfries DG1 4AP	Forename Middle name Family name Email Qualification (MD) Country	Sue Robertson
IN7 🗹				
	Institution name Department name Street address Town/city Post Code Country	Edinburgh Royal Infirmary Renal Medicine 51 Little France Crescent Edinburgh EH16 4SA	Forename Middle name Family name Email Qualification (MD) Country	Barbara
IN8 🗹				
	•	Leeds - St James's University Hospital Renal Medicine Beckett Street Leeds LS9 7TF	Forename Middle name Family name Email Qualification (MD) Country	Mark Wright
IN9 🗹			-	1
	Department name Street address Town/city	Leicester General Hospital Renal Medicine Gwendolen Road LE5 4PW	Forename Middle name Family name Email Qualification (MD) Country	Jonathon Barratt
IN10 🗹				
			Forename	Pearl

	Institution name Department name Street address Town/city Post Code Country	Liverpool - Royal Liverpool University Hospital Nephrology Department 6C Link Prescot Street L7 8XP	Middle name Family name Email Qualification (MD) Country	Pai
IN11 ▼	Institution name Department name Street address Town/city Post Code Country	Middlesbrough - The James Cook University Hospital Renal Medicine Marton Road Middlesborough TS4 3BW	Forename Middle name Family name Email Qualification (MD) Country	David
IN12 ₩	Institution name Department name Street address Town/city Post Code Country	Northampton General Hospital Renal Medicine Cliftonville Northampton NN1 5BD	Forename Middle name Family name Email Qualification (MD) Country	Robert Preston
IN13 ☑	Institution name Department name Street address Town/city Post Code Country	Oxford Radcliffe Hospitals NHS Trust Oxford Kidney Unit and Oxford Transplant Centre The Churchill Hospital, Old Road, Headington Oxford OX3 7LE	Forename Middle name Family name Email Qualification (MD) Country	Victoria
IN14 ✓	Institution name Department name Street address Town/city Post Code Country	Lancashire Teaching Hospitals NHS Foundation Trust Renal Medicine Sharoe Green Lane Preston PR2 9HT	Forename Middle name Family name Email Qualification (MD) Country	Ajay Dhaygude

IN15 🗹	Street address Town/city	Northern General Hospital NHS Trust Sheffield Kidney Institute Herries Road Sheffield S5 7AU	Forename Middle name Family name Email Qualification (MD) Country	Nicholas Fardon
	Country			
IN16 ✓	•	Royal Cornwall Hospitals NHS Trust Renal Unit Truro TR1 3LJ	Forename Middle name Family name Email Qualification (MD) Country	Lisa Attrill
IN17 ☑	•			
	Street address Town/city	Cambridge Universities NHS Foundation Trust Addenbrooke's Dialysis Centre Cambridge CB2 0QQ	Forename Middle name Family name Email Qualification (MD) Country	Sanjay
IN18 ☑				
	Street address Town/city	University Hospital of North Staffordshire NHS Renal Medicine Department Royal Infirmary, Princes Road Stoke-on-Trent St4 7LN	Forename Middle name Family name Email Qualification (MD) Country	Julie Wessels
IN19 ☑	Institution name	Countess of Chester Hospital NHS Foundation Trust	Forename Middle name Family name Email	Anindya Banerjee

IN20 ✓	Department name Street address Town/city Post Code Country	Renal Unit Countess of Chester Health Park, Liverpool Road Chester CH2 1UL	Qualification (MD) Country	
IN2U 🔽	Institution name Department name Street address Town/city Post Code Country	Southern Health & Social Care Trust Renal Unit, Daisy Hill Hospital 5 Hospital Road Newry, County Down BT35 8DR	Forename Middle name Family name Email Qualification (MD) Country	John
IN21 ☑	Institution name Department name Street address Town/city Post Code Country	Victoria Hospital NHS Fife Renal Unit Hayfield Road, Kircaldy KY2 5AH	Forename Middle name Family name Email Qualification (MD) Country	Arthur Doyle
IN22 ▼	Institution name Department name Street address Town/city Post Code Country	Barts Health NHS Trust Barts & The London Renal Centre The Royal London Hospital, Whitechapel London E1 1BB	Forename Middle name Family name Email Qualification (MD) Country	Stanley
IN24 ₩	Institution name Department name Street address Town/city Post Code Country	York Teaching Hospitals NHS Foundation Trust Renal Medicine The York Hospital, Wigginton Road York YO31 8HE	Forename Middle name Family name Email Qualification (MD) Country	Colin

	Institution name Department name Street address Town/city Post Code Country	Hull and East Yorkshire NHS Hospitals Renal Services Anlaby Road Hull HU3 2JZ	Forename Middle name Family name Email Qualification (MD) Country	Sunil Bhandari
IN25 🗹	Institution name Department name Street address Town/city Post Code Country	Peterborough & Stamford Hospitals NHS Foundation Renal Medicine Peterborough City Hospital, Edith Cavell Campus, Bretton Gate Peterborough PE3 9GZ	Forename Middle name Family name Email Qualification (MD) Country	Frieder Kleemann
IN26 🕶	Institution name Department name Street address Town/city Post Code Country	Aberdeen Royal Infirmary, NHS Grampian Renal Medicine Foresterhill Aberdeen AB25 2ZN	Forename Middle name Family name Email Qualification (MD) Country	
IN27 ▼	Institution name Department name Street address Town/city Post Code Country	Monklands Hospital,NHS Lanarkshire Renal Medicine Monkscourt Avenue Airdrie ML6 0JS	Forename Middle name Family name Email Qualification (MD) Country	
IN28 ▼	Institution name Department name Street address Town/city Post Code	Northern Health & Social Care Trust Renal Service, Antrim Area Hospital Bush Road Antrim BT41 2RL	Forename Middle name Family name Email Qualification (MD) Country	

	Country		
IN29 ✓			
			Forename
		Gwynedd Hosp, Betsi	Middle name
	Institution name	Cadwaladr University	Family name
		Hospital	Email
	Department name		Qualification (MD)
	Street address Town/city	Penrhosgarnedd Bangor, Gwynedd	Country
	Post Code	LL57 2PW	,
	Country		
IN 100 ==			
IN30 ✓			Forename
			Middle name
	Institution name	Glan Clywd Hospital, Betsi Cadwaladr University Ho	Family name
	Department name	•	Email
	Street address		Qualification
	Town/city	Rhyl, Denbighshire	(MD)
	Post Code	LL18 5UJ	Country
	Country		
IN31 ▼			
			Forename
	Institution name	Wrexham Maelor Hospital	Middle name
	Department name	·	Family name
	Street address	Croesnewydd Road	Email
	Town/city	Wrexham	Qualification (MD)
	Post Code	LL13 7TD	Country
	Country		
IN32 ▼			
			Forename
		Basildon & Thurrock	Middle name
	Institution name	University Hospitals	Family name
	Department name	Renal Services	Email
	Street address	Basildon Hospital, Nethermayne	Qualification (MD)
	Town/city	Basildon, Essex	Country
	Post Code	SS16 5NL	
	Country		
IN33 ▼			
			Forename
		Delftilwith 0.0 0	Middle name
	Institution name	Belfast Health & Social Care Trust	Family name
	Department name		Email
	Street address	Belfast City Hospital, 51	Qualification (MD.)
	Gircot address	Lisburn Road	(MD)

	Town/city Post Code Country	Belfast BT9 7AB	Country	
IN34 🗹				
			Forename	Clara
	Institution name	University Hospitals Birmingham NHS Foundation Tru	Middle name Family name Email	Day
	Department name		Qualification (MD)	
	Street address	Queen Elizabeth Hospital, Queen Elizabeth Medical Centre,	Country	
	Town/city	Birmingham		
	Post Code	B15 2TH		
	Country			
IN35 🔽				
			Forename	
	Institution name	Brighton and Sussex	Middle name	
		University Hospitals	Family name Email	
	•	Sussex Kidney Unit Royal Sussex County	Qualification	
	Street address	Hospital, Eastern Road	(MD)	
	Town/city	Brighton	Country	
	Post Code	BN2 5BE		
	Country			
IN36 🗹				
			Forename	
	Institution name	North Bristol NHS Trust	Middle name Family name	
	Department name	The Richard Bright Renal Unit, Southmead Hospital	Email	
	Street address	Southmead Road, Westbury-on-Trym	Qualification (MD)	
	Town/city	Bristol	Country	
	Post Code	BS10 5NB		
	Country			
IN37 🗹				
			Forename	
	Institution name	East Kent Hosp University	Middle name	
		NHS Foundation Trust	Family name Email	
	Department name	Kenal Medicine Kent & Canterbury Hospital,	Qualification	
	Street address	Ethelbert Road	(MD)	
	Town/city Post Code	Canterbury CT1 3NG	Country	
	Country	OTT JING		
	···· ,			

Institution name Department name Street address Town/city Post Code Country	Cardiff and Vale University Health Board Nephrology and Transplant, University Hospital of Wales Heath Park Cardiff CF14 4XW	Forename Middle name Family name Email Qualification (MD) Country
IN39 ☑		
Institution name	North Cumbria University Hospitals NHS Trust	Forename Middle name Family name Email
Department name	Renal, Cumberland Infirmary	Qualification
Street address	Newtown Road,	(MD)
Town/city Post Code	Carlisle CA2 7HY	Country
Country		
IN40 ✓		
		Forename
Institution name	Mid Essex Hospital Services NHS Trust	Middle name Family name
Department name	Renal Department	Email
Street address	Zone A, Hospital Wing, Court Road, Broomfield	Qualification (MD)
Town/city Post Code	Chelmsford CM1 7ET	Country
Country		
IN41 ☑		
		Forename
	Colchester Hospital	Middle name Family name
Institution name	University NHS Foundation Trus	Email
Department name	Nephrology, Colchester General Hospital	Qualification (MD)
Street address	Turner Road	Country
Town/city Post Code	Colchester, Essex CO4 5JL	
Country	· ••-	
IN42 ▼		
_		Forename
Institution name	University Hospitals Coventry and Warwickshire NHS	Middle name Family name Email
Department name Street address	Renal and Transplantation Clifford Bridge Road	Qualification (MD)

	Town/city Post Code Country	Coventry CV2 2DX	Country
N43 🗹			Forename
N44 ▼	Institution name Department name Street address Town/city Post Code Country	NHS Ayrshire and Arran John Stevenson Lynch Renal Unit University Hospital Crosshouse Kilmarnock KA2 0BE	Middle name Family name Email Qualification (MD) Country
	Institution name Department name Street address Town/city Post Code Country	Derby Hospitals NHS Foundation Trust Renal Services Royal Derby Hospital, Uttoxeter Road Derby DE22 3NE	Forename Middle name Family name Email Qualification (MD) Country
N45 ☑	Institution name Department name Street address Town/city Post Code Country	Western Health and Social Care Trust Renal Unit, Altnagelvin Area Hospital Glenshane Road Londonderry BT47 6SB	Forename Middle name Family name Email Qualification (MD) Country
N46 🗹	Institution name Department name	Doncaster and Bassetlaw Hospitals NHS Foundation Renal Medicine, Doncaster Royal Hospital	Forename Middle name Family name Email Qualification (MD)
	Street address Town/city Post Code Country	Armthorpe Road Doncaster DN2 5LT	Country

	Institution name Department name Street address Town/city Post Code Country	Dorset County Hospital NHS Foundation Trust Renal Unit, Dorset County Hospital Williams Avenue, Dorchester DT1 2JY	Middle name Family name Email Qualification (MD) Country
IN48 ☑	Institution name Department name Street address Town/city Post Code Country	The Dudley Group NHS Foundation Trust Renal Russells Hall Hospital Dudley DY1 2HQ	Forename Middle name Family name Email Qualification (MD) Country
IN49 ✓	Institution name Department name Street address Town/city Post Code Country	NHS Tayside - Ninewells Hospital Renal Medicine Ninewells Hospital Dundee DY1 2HQ	Forename Middle name Family name Email Qualification (MD) Country
IN50 ☑	Institution name Department name Street address Town/city Post Code Country	NHS Fife - Dunfermline Renal, Queen Margaret Hospital Whitefield Road Dunfermline KY12 0SU	Forename Middle name Family name Email Qualification (MD) Country
IN51 ▼	Institution name Department name Street address Town/city Post Code Country	Royal Deveon and Exeter NHS Foundation Trust Exeter Kidney Unit Barrack Road Exeter EX2 5DW	Forename Middle name Family name Email Qualification (MD) Country

	Institution name Department name Street address Town/city Post Code Country	NHS Greater Glasgow and Clyde - Western Infirmary Glasgow Renal and Transplant Unit Dumbarton Road Glasgow G11 6NT	Forename Middle name Family name Email Qualification (MD) Country
IN53 🗹			
	Institution name Department name Street address Town/city Post Code Country	Gloucestershire Hospitals NHS Foundation Trust Nephrology - Gloucestershire Royal Hospital Great Western Road Gloucester GL1 3NN	Forename Middle name Family name Email Qualification (MD) Country
IN54 🔽			
	Institution name Department name Street address Town/city Post Code Country	NHS Highland - Raigmore Hospital Renal Unit Old Perth Road Inverness IV2 3UJ	Forename Middle name Family name Email Qualification (MD) Country
IN55 ▼	Institution name Department name Street address Town/city Post Code Country	The Ipswich Hospital NHS Trust Renal Medicine Heath Road Ipswich IP4 5PD	Forename Middle name Family name Email Qualification (MD) Country
IN56 🗹	Institution name Department name Street address Town/city	Royal Free London NHS Foundation Trust Renal Services, Royal Free Hospital Pond Street London	Forename Middle name Family name Email Qualification (MD) Country

	Post Code Country	NW3 2QG	
IN57 🗹	Institution name Department name Street address Town/city Post Code	King's College Hospital NHS Foundation Trust King's Renal Unit Denmark Hill London SE5 9RS	Forename Middle name Family name Email Qualification (MD) Country
IN58 ☑	Institution name	Aintree University Hospitals NHS Foundation Trust	Forename Middle name Family name Email
	Department name Street address Town/city Post Code Country	Aintree Renal Unit Longmoor Lane Liverpool L9 7AL	Qualification (MD) Country
IN59 ✓			
	Institution name Department name Street address Town/city Post Code Country	Guy's and St Thomas' NHS Foundation Trust Kidney Services Guy's Hospital, Gret Maze Pond London SE1 9RT	Forename Middle name Family name Email Qualification (MD) Country
IN60 ☑			
	Institution name Department name Street address Town/city Post Code Country	St George's Healthcare NHS Trust Renal Medicine Blackshaw Road, Tooting London SW17 0QT	Forename Middle name Family name Email Qualification (MD) Country
IN61 ☑			Forename

	Institution name Department name Street address Town/city Post Code Country	Imperial College Healthcare NHS Trust Imperial Renal and Transplant Centre, Hammersmith Hospital Du Cane Road London W12 0HS	Middle name Family name Email Qualification (MD) Country	
IN62 ▼	Institution name Department name Street address Town/city Post Code Country	Central Manchester NHS Foundation Trust Renal Medicine Oxford Road Manchester M13 9WL	Forename Middle name Family name Email Qualification (MD) Country	
	Institution name Department name Street address Town/city Post Code Country	Norfolk and Norwich University Hospitals NHS FT Renal Medicine Colney Lane Norwich NR4 7UY	Forename Middle name Family name Email Qualification (MD) Country	
IN64 ☑	Institution name Department name Street address Town/city Post Code Country	Nottingham University Hospitals NHS Trust Renal and Transplant Unit, City Hospital Hucknall Road Nottingham NG5 1PB	Forename Middle name Family name Email Qualification (MD) Country	Matthew
IN65 ☑	Institution name Department name Street address Town/city Post Code Country	Plymouth Hospitals NHS Trust Renal Medicine Derriford Road, Crownhill Plymouth, Devon PL6 8DH	Forename Middle name Family name Email Qualification (MD) Country	

IN66 ✓			
			Forename
	Institution name	Portsmouth Hospitals NHS Trust	Middle name Family name
	Department name	Wessex Renal and Transplant Service	Email Qualification (MD)
	Street address	Queen Alexandra Hospital, Cosham	Country
	,	Portsmouth PO6 3LY	
	Country		
IN68 ₩			
		Southend University Hospital NHS Foundation Trust	Forename Middle name Family name Email
	Department name Street address	Nephrology Prittlewell Chase	Qualification (MD)
	Post Code	Westcliff-on-sea, Essex SS0 ORY	Country
	Country		
IN69 ▼	Institution name	Epsom & St Helier University Hospitals NHS	Forename Middle name Family name Email
	Department name	Trust South West Thames Renal & Transplantation Unit	Qualification (MD)
	Street address	St Helier Hospital, Wrythe Lane	Country
	Town/city Post Code	Carshalton, Surrey SM5 1AA	
	Country		
IN70 ☑			
	Institution name	East and North Hertforshire	Forename Middle name Family name
	Department name Street address Town/city Post Code	NHS Trust Renal Medicine Coreys Mill Lane Stevenage, Hertfordshire SG1 4AB	Email Qualification (MD) Country
	Country		
IN71 🗹			Forename

	Institution name Department name Street address Town/city Post Code Country	City Hospitals Sunderland NHS Foundation Trust Department of Renal Medicine Kayll Road Sunderland SR4 7TP	Middle name Family name Email Qualification (MD) Country	
IN72 ₩	Institution name Department name Street address Town/city Post Code Country	Abertawe Bro Morgannwg University Health Board Renal Services, Morriston Hospital Heol Maes Eglwys, Morriston Swansea, Wales SA6 6NL	Forename Middle name Family name Email Qualification (MD) Country	
IN73 ₩	Institution name Department name Street address Town/city Post Code Country	The Shrewsbury and Telford Hospital NHS Trust Renal Department Mytton Oak Road Shrewsbury SY3 8XQ	Forename Middle name Family name Email Qualification (MD) Country	
IN74 ☑	Institution name Department name Street address Town/city Post Code Country	The Royal Wolverhampton NHS Trust Renal Department, New Cross Hospital Wednesfield Road Wolverhamptom WV10 0QP	Forename Middle name Family name Email Qualification (MD) Country	
IN77 🗌	NHS site Non-NHS site Country: England Organisation name		Forename Middle name Family name Email Qualification (MD) Country	Sumith Abeygunasekara Sumith.Abeygunasekara@meht.nhs.uk UNITED KINGDOM

	Address Post Code	BROOMFIELD HOSPITAL COURT ROAD CHELMSFORD ESSEX CM1 7ET		
IN78 🔲	NHS site		Forename	Oliver
	O Non-NHS s	site	Middle name	Olivei
			Family name	Flossmann
	Country: Engla	and	Email Qualification (MD)	Oliver.flossman@royalberkshire.nhs.uk
	Organisation name	ROYAL BERKSHIRE NHS FOUNDATION TRUST	Country	UNITED KINGDOM
	Address	ROYAL BERKSHIRE HOSPITAL LONDON ROAD READING BERKSHIRE		
	Post Code	RG1 5AN		
IN79 🗌	NHS site			
	O Non-NHS s	site	Forename	Benjamin
			Middle name Family name	Walker
	Country: Engla	and	Email Qualification (MD)	BENJAMIN.WALKER@hdft.nhs.uk
	Organisation name	HARROGATE AND DISTRICT NHS FOUNDATION TRUST	Country	UNITED KINGDOM
	Address	STRAYSIDE WING HARROGATE DISTRICT HOSPITAL		
		LANCASTER PARK ROAD HARROGATE NORTH		
		YORKSHIRE		

PART D: Declarations

D1. Declaration by Chief Investigator

1. The information in this form is accurate to the best of my knowledge and belief and I take full responsibility for it.

- 2. I undertake to abide by the ethical principles underlying the Declaration of Helsinki and good practice guidelines on the proper conduct of research.
- 3. If the research is approved I undertake to adhere to the study protocol, the terms of the full application as approved and any conditions set out by review bodies in giving approval.
- 4. I undertake to notify review bodies of substantial amendments to the protocol or the terms of the approved application, and to seek a favourable opinion from the main REC before implementing the amendment.
- 5. I undertake to submit annual progress reports setting out the progress of the research, as required by review bodies.
- 6. I am aware of my responsibility to be up to date and comply with the requirements of the law and relevant guidelines relating to security and confidentiality of patient or other personal data, including the need to register when necessary with the appropriate Data Protection Officer. I understand that I am not permitted to disclose identifiable data to third parties unless the disclosure has the consent of the data subject or, in the case of patient data in England and Wales, the disclosure is covered by the terms of an approval under Section 251 of the NHS Act 2006.
- 7. I understand that research records/data may be subject to inspection by review bodies for audit purposes if required.
- 8. I understand that any personal data in this application will be held by review bodies and their operational managers and that this will be managed according to the principles established in the Data Protection Act 1998
- 9. I understand that the information contained in this application, any supporting documentation and all correspondence with review bodies or their operational managers relating to the application:
 - Will be held by the REC (where applicable) until at least 3 years after the end of the study; and by NHS R&D offices (where the research requires NHS management permission) in accordance with the NHS Code of Practice on Records Management.
 - May be disclosed to the operational managers of review bodies, or the appointing authority for the REC (where applicable), in order to check that the application has been processed correctly or to investigate any complaint.
 - May be seen by auditors appointed to undertake accreditation of RECs (where applicable).
 - Will be subject to the provisions of the Freedom of Information Acts and may be disclosed in response
 to requests made under the Acts except where statutory exemptions apply.
 - May be sent by email to REC members.
- I understand that information relating to this research, including the contact details on this application, may be held on national research information systems, and that this will be managed according to the principles established in the Data Protection Act 1998.
- 11. Where the research is reviewed by a REC within the UK Health Departments Research Ethics Service, I understand that the summary of this study will be published on the website of the National Research Ethics Service (NRES), together with the contact point for enquiries named below. Publication will take place no earlier than 3 months after issue of the ethics committee's final opinion or the withdrawal of the application.

Contact point for publication(Not applicable for R&D Forms)

NRES would like to include a contact point with the published summary of the study for those wishing to seek further information. We would be grateful if you would indicate one of the contact points below.

Chief	Investigat	or
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Sponsor

Study co-ordinato	r	
Student		
Other – please giv	ve details	
O None		
Access to application	n for training purposes	(Not applicable for R&D Forms)
Optional – please tick	as appropriate:	
		RECs to have access to the information in the application in confidence and references to sponsors, funders and research units would be
Signature:		
Print Name:	Smeeta Sinha	
Date:	19/07/2011	(dd/mm/yyyy)

D2. Declaration by the sponsor's representative

If there is more than one sponsor, this declaration should be signed on behalf of the co-sponsors by a representative of the lead sponsor named at A64-1.

I confirm that:

- 1. This research proposal has been discussed with the Chief Investigator and agreement in principle to sponsor the research is in place.
- An appropriate process of scientific critique has demonstrated that this research proposal is worthwhile and of high scientific quality.
- Any necessary indemnity or insurance arrangements, as described in question A76, will be in place before
 this research starts. Insurance or indemnity policies will be renewed for the duration of the study where
 necessary.
- 4. Arrangements will be in place before the study starts for the research team to access resources and support to deliver the research as proposed.
- Arrangements to allocate responsibilities for the management, monitoring and reporting of the research will be in place before the research starts.
- 6. The duties of sponsors set out in the Research Governance Framework for Health and Social Care will be undertaken in relation to this research.
- 7. Where the research is reviewed by a REC within the UK Health Departments Research Ethics Service, I understand that the summary of this study will be published on the website of the National Research Ethics Service (NRES), together with the contact point for enquiries named in this application. Publication will take place no earlier than 3 months after issue of the ethics committee's final opinion or the withdrawal of the application.

Signature:		
Print Name:	Rachel Georgiou	
Post:	Research Governa	ance Manager
Organisation:	Salford Royal NHS	S Foundation Trust
Date:	19/07/2011	(dd/mm/yyyy)