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Requirements to submit AOI:

A comprehensive review of previously published data has been completed.: Yes
The specific aims are clear and focused.: Yes
The investigator has appropriate experience and expertise to develop the concept proposal; if not, has identified a mentor or senior co-investigator.: Yes
The investigator agrees to develop an initial draft of the concept proposal within 6 weeks of approval of the AOI and to finalize the concept proposal within 6 months.: Yes

Project Title: Prediction Model: Breast Cancer in Women Irradiated for a Pediatric Malignancy
Planned research population (eligibility criteria): Women treated with chest radiation.
Proposed specific aims: Aim 1: Derive a breast cancer risk prediction model using chest radiation, additional treatment-related factors, traditional breast cancer risk factors, and other potential risk factors to predict the probability of breast cancer among women who have previously been treated with chest radiation for a childhood malignancy. Aim 2: Validate the model derived in Aim 1 on an independent validation data set. Aim 3: Develop a risk calculator that will predict an individual's absolute risk of breast cancer.
Will the project require non-CCSS funding to complete?: Yes
If yes, what would be the anticipated source(s) and timeline(s) for securing funding?: NIH - currently funded R01

Does this project require contact of CCSS study subjects for . . .

Additional self-reported information: Yes
Biological Samples: No
Medical record data: Yes
If yes to any of the above, please briefly describe.: already completed secondary data collection

What CCSS Working Group(s) would likely be involved? (Check all that apply)

Second Malignancy: Primary
Chronic Disease:
Psychology / Neuropsychology:
Genetics:
Cancer Control: Secondary
Epidemiology / Biostatistics: Secondary

To describe the anticipated scope of the study, please indicate the specific CCSS data to be included as outcome (primary or secondary) or correlative factors. (Check all that apply)

Late mortality:
Second Malignancy:

Health Behaviors

Tobacco:
Alcohol:
Physical activity:
Medical screening:
Other:
If other, please specify:

Psychosocial

Insurance:
Marriage:
Education:
Employment:
Other:
If other, please specify:

Medical conditions

Hearing/Vision/Speech:
Hormonal systems:
Heart and vascular:
Respiratory:
Digestive:
Surgical procedures:
Brain and nervous system:
Other:
If other, please specify:

Medications

Describe medications:

Pregnancy and offspring:
Family History:

Psychologic/Quality of Life

BSI-18:
SF-36:
CCSS-NCQ:
PTS:
PTG:
Other:
If other, please specify:

Chronic conditions (CTCAE v3):
Health status:

Demographic

Age:
Race:
Sex:
Others:
If others, please specify:

Cancer treatment

Chemotherapy:
Radiation therapy:
Surgery:

Anticipated sources of statistical support

CCSS Statistical Center:
Local institutional statistician: Yes
If local, please provide the name(s) and contact information of the statistician(s) to be involved.:
Chaya Moskowitz
Will this project utilize CCSS biologic samples?: No

If yes, which of the following?

Buccal cell DNA:

Peripheral blood:

Lymphoblastoid cell lines:

Second malignancy pathology samples:

Other requiring collection of samples:

If other, please explain:

Other general comments: