

Received: 10.28.10
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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: Primary Tumor Recurrence and Secondary Malignant Neoplasms after Pregnancy in Childhood and Adolescent Cancer Survivors: A report from the Childhood Cancer Survivor Study

Planned research population (eligibility criteria): female survivors with previous pregnancies compared to those survivors without pregnancies

Proposed specific aims: To determine if survivors have an increased frequency of recurrence or SMN's after pregnancy

Will the project require non-CCSS funding to complete?: No

If yes, what would be the anticipated source(s) and timeline(s) for securing funding?:

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

Additional self-reported information: No

Biological Samples: No

Medical record data: No

If yes to any of the above, please briefly describe.:

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

Second Malignancy: Primary

Chronic Disease: Secondary

Psychology / Neuropsychology:
Genetics:
Cancer Control:
Epidemiology / Biostatistics:

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: Primary

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: Primary
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: Correlative Factors

Race: Correlative Factors

Sex: Correlative Factors

Others:

If others, please specify:

Cancer treatment

Chemotherapy: Correlative Factors

Radiation therapy: Correlative Factors

Surgery: Correlative Factors

Anticipated sources of statistical support

CCSS Statistical Center: Yes

Local institutional statistician:

If local, please provide the name(s) and contact information of the statistician(s) to be involved.:

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: