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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: Genetic Susceptibilities to Second Cancers

Planned research population (eligibility criteria): all patients who developed second malignancies and controls 1:1 matched for primary cancer, latency, age of treatment for primary cancer, treatment modality gender, and race/ethnicity

Proposed specific aims: We have recently completed a GWAS of radiation-induced second cancers in HL survivors. The aim of this project is to test the association of our top SNPs from this study with risk for other second cancers.

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: Secondary

Chronic Disease:

Psychology / Neuropsychology:
Genetics: Primary
Cancer Control:
Epidemiology / Biostatistics:
To describe the anticipated scope of the study, please indicate the specific CCSS data to
be included as <u>outcome</u> (primary or secondary) or <u>correlative factors</u> . (Check all that
apply)
Late mortality: Secondary
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:		
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: Secondary		
Race: Secondary		
Sex: Secondary		
Others:		
If others, please specify:		
Cancer treatment		
Chemotherapy: Correlative Factors		
Radiation therapy: Correlative Factors		
Surgery:		
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.: we perform our own statistical analysis and have a statistical geneticist as part		
of our research group		
Will this project utilize CCSS biologic samples?: Yes		
If yes, which of the following?		
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Buccal cell DNA: Yes	
Peripheral blood: Yes	
Lymphoblastoid cell lines: Yes	
Second malignancy pathology samples:	
Other requiring collection of samples:	
If other, please explain:	
Other general comments:	