Section: Contact Information
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Section: Project Requirements and Description

Group: 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: A Personalized Cumulative Burden Prediction Tool for Second Neoplasms
Planned research population (eligibility criteria) :
All survivors in the cohort
Proposed specific aims :
Develop a predictive model using demographic and treatment exposure predictors to estimate the cumulative burden for groups of second neoplasms by a given time in order to provide a cumulative burden profile for second neoplasms based on any combination of predictors.
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? :

Group: 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.

Group: What CCSS Working Group(s) would likely be involved? (Check all that apply)
Second Malignancy: Secondary
Chronic Disease:
Psychology / Neuropsychology:
Genetics:
Cancer Control:
Epidemiology / Biostatistics: Primary

**Section: Outcomes or Correlative Factors**

Late mortality: Primary
Second Malignancy: Primary

**Group: Health Behaviors**
Tobacco: Correlative Factors
Alcohol: Correlative Factors
Physical activity: Correlative Factors
Medical screening:
Other: Correlative Factors
If other, please specify: Hepatitis B, Hepatitis C, HIV, Obesity

**Group: Psychosocial**
Insurance:
Marriage:
Education:
Employment:
Other:
If other, please specify:

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

**Group: Medications**
Describe medications:

**Group: Psychologic/Quality of Life**
BSI-18:
SF-36:
CCSS-NCQ:
PTS:
PTG:
Other:
If other, please specify:

**Group: Other**
Pregnancy and offspring:
Family history:
Chronic conditions (CTCAE v3):
Health status:

**Group: Demographic**
Age: Correlative Factors
Race: Correlative Factors
Sex: Correlative Factors
Other:
If other, please specify:

**Group: Cancer treatment**
Chemotherapy: Correlative Factors
Radiation therapy: Correlative Factors
Surgery:

**Section: 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:
Yutaka Yasui
Will this project utilize CCSS biologic samples?: No
If yes, which of the following?:
If other, please explain:

**Section: Other General Comments**
Other General Comments:
None