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: Polypharmacy and patterns of prescription medication use among childhood cancer survivors
Planned research population (eligibility criteria):
All cancer survivors and sibling controls >=18 years of age who completed the baseline survey AND the 2001, 2003, or 2007 follow-up survey
Proposed specific aims:
1) Characterize patterns of prescription medication use and polypharmacy in a nationally representative sample of childhood cancer survivors and sibling controls;
2) Identify patient-, clinical-, and treatment-related factors associated with polypharmacy;
3) Examine impact of polypharmacy on health-related quality of life
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:
- Chronic Disease: Primary
- Psychology / Neuropsychology: Secondary
- Genetics:
- Cancer Control: Secondary
- Epidemiology / Biostatistics:

**Section: Outcomes or Correlative Factors**

- Late mortality:
- Second Malignancy:

**Group: Health Behaviors**
- Tobacco:
- Alcohol:
- Physical activity:
- Medical screening:
- Other:
  If other, please specify:

**Group: Psychosocial**
- Insurance: Correlative Factors
- Marriage: Correlative Factors
- Education: Correlative Factors
- Employment: Correlative Factors
- 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:
We will use prescription medications (taken consistently for $\geq 30$ days) reported on baseline and follow-up surveys to measure polypharmacy as taking five or more concurrent medications.

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

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

**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: **Correlative Factors**

**Section: 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?:
If other, please explain:

**Section: Other General Comments**
Other General Comments: