Welcome to the Integrated Research Application System

IRAS Project Filter

The integrated dataset required for your project will be created from the answers you give to the following questions. The system will generate only those questions and sections which (a) apply to your study type and (b) are required by the bodies reviewing your study. Please ensure you answer all the questions before proceeding with your applications.

Please complete the questions in order. If you change the response to a question, please select 'Save' and review all the questions as your change may have affected subsequent questions.

Please enter a short title for this project (maximum 70 characters) PRISM					
1. Is your project research?					
2. Select one category from the list below:					
Clinical trial of an investigational medicinal product					
Clinical investigation or other study of a medical device					
Combined trial of an investigational medicinal product and an investigational medical de	evice				
Other clinical trial to study a novel intervention or randomised clinical trial to compare interventions in clinical practice					
Basic science study involving procedures with human participants					
 Study administering questionnaires/interviews for quantitative analysis, or using mixed of methodology 	quantitative	e/qualitative			
 Study involving qualitative methods only 					
 Study limited to working with human tissue samples (or other human biological sample only) 	s) and dat	a (specific project			
Study limited to working with data (specific project only)					
Research tissue bank					
Research database					
If your work does not fit any of these categories, select the option below:					
Other study					
2a. Will the study involve the use of any medical device without a CE Mark, or a CE marked device which has been modified or will be used outside its intended purposes? Yes No					
2b. Please answer the following question(s):					
a) Does the study involve the use of any ionising radiation?	O Yes	No			
b) Will you be taking new human tissue samples (or other human biological samples)?	O Yes	No			
c) Will you be using existing human tissue samples (or other human biological samples)?	O Yes	No			

3. In which countries of the UK will the research sites be located?(Tick all that apply)
☑ England
Scotland Scotland
₩ Wales
□ Northern Ireland
3a. In which country of the UK will the lead NHS R&D office be located:
● England
Scotland
○ Wales
Northern Ireland
This study does not involve the NHS
4. Which applications do you require?
4. Which applications do you require:
IMPORTANT: If your project is taking place in the NHS and is led from England select 'IRAS Form'. If your project is led from Northern Ireland, Scotland or Wales select 'NHS/HSC Research and Development Offices' and/or relevant Research Ethics Committee applications, as appropriate.
□ IRAS Form
► NHS/HSC Research and Development offices
Social Care Research Ethics Committee
Research Ethics Committee
Confidentiality Advisory Group (CAG)
National Offender Management Service (NOMS) (Prisons & Probation)
For NHS/HSC R&D Offices in Northern Ireland, Scotland and Wales the CI must create NHS/HSC Site Specific Information forms, for each site, in addition to the study wide forms, and transfer them to the PIs or local collaborators.
For participating NHS organisations in England different arrangements apply for the provision of site specific information. Refer to IRAS Help for more information.
5. Will any research sites in this study be NHS organisations?
Fo. And all the analysis and infrastructure and (founding fourth and foulth).
5a. Are all the research costs and infrastructure costs (funding for the support and facilities needed to carry out research e.g. NHS Support costs) for this study provided by a NIHR Biomedical Research Centre, NIHR Biomedical Research Unit, NIHR Collaboration for Leadership in Health Research and Care (CLAHRC), NIHR Patient Safety Translational Research Centre or a Diagnostic Evidence Co-operative in all study sites?
Please see information button for further details.
Please see information button for further details.

5b. Do you wish to make an application for the study to be considered for NIHR Clinical Research Network (CRN) Support and inclusion in the NIHR Clinical Research Network Portfolio?

Please see information button for further details.
The NIHR Clinical Research Network provides researchers with the practical support they need to make clinical studies happen in the NHS e.g. by providing access to the people and facilities needed to carry out research "on the ground".
If you select yes to this question, you must complete a NIHR Clinical Research Network (CRN) Portfolio Application Form (PAF) immediately after completing this project filter question and before submitting other applications. Failing to complete the PAF ahead of other applications e.g. HRA Approval, may mean that you will be unable to access NIHR CRN Support for your study.
6. Do you plan to include any participants who are children?
◯ Yes • No
7. Do you plan at any stage of the project to undertake intrusive research involving adults lacking capacity to consent
for themselves?
◯ Yes • No
Answer Yes if you plan to recruit living participants aged 16 or over who lack capacity, or to retain them in the study following loss of capacity. Intrusive research means any research with the living requiring consent in law. This includes use of identifiable tissue samples or personal information, except where application is being made to the Confidentiality Advisory Group to set aside the common law duty of confidentiality in England and Wales. Please consult the guidance notes for further information on the legal frameworks for research involving adults lacking capacity in the UK.
C. De very plan to include any posticinants who are principal and a set of the control of the Drings Coming and
8. Do you plan to include any participants who are prisoners or young offenders in the custody of HM Prison Service or who are offenders supervised by the probation service in England or Wales?
9. Is the study or any part of it being undertaken as an educational project?
10. Will this research be financially supported by the United States Department of Health and Human Services or any of its divisions, agencies or programs?
Yes No
11. Will identifiable patient data be accessed outside the care team without prior consent at any stage of the project (including identification of potential participants)?
◯ Yes • No

NOTICE OF SUBSTANTIAL AMENDMENT

Please use this form to notify the main REC of substantial amendments to all research other than clinical trials of investigational medicinal products (CTIMPs).

The form should be completed by the Chief Investigator using language comprehensible to a lay person.

Details of Chief Investigator:

Title Forename/Initials Surname Professor Rupert Pearse

Work Address Adult Critical Care Unit, Royal London Hospital

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For guidance on this section of the form refer to the guidance

Prevention of Respiratory Insufficiency after Surgical Management

(PRISM) Trial:

Full title of study:

A pragmatic randomised controlled trial of continuous positive airway

pressure (CPAP) to prevent respiratory complications and improve

survival following major abdominal surgery

Lead sponsor: Queen Mary University of London

Name of REC: NRES Committee London - Central

REC reference number: 15/LO/1595

International Standard Randomised Controlled Trial Number (ISRCTN):

ClinicalTrials.gov Identifier (NCT number):

Additional reference number(s):

Ref.Number Description Reference Number

Name of lead R&D office: Queen Mary University

Date study commenced: February 2016

Protocol reference (if applicable), current version 1.5 version and date: version 2.5 vers

Amendment number and date: Substantial amendment 2 13.04.2017

Type of amendment
(a) Amendment to information previously given in IRAS
If yes, please refer to relevant sections of IRAS in the "summary of changes" below.
Point A71-2 Where will the research take place? Add North Ireland. Does this trial involve countries outside the EU? Yes, South Africa
(b) Amendment to the protocol
If yes, please submit <u>either</u> the revised protocol with a new version number and date, highlighting changes in bold, or a document listing the changes and giving both the previous and revised text.
Attached is the Summary of protocol changes v 1.6 10th April 2017, tracked changes of the protocol v 1.6 10 April 2017 and a clean copy of the protocol v 1.6,10th April 2017
(c) Amendment to the information sheet(s) and consent form(s) for participants, or to any other supporting documentation for the study
Yes No

Is this a	a modified	version of	an amend	lment pre	viously n	otified and	d not approved	?

O Yes

No

Summary of changes

Briefly summarise the main changes proposed in this amendment. Explain the purpose of the changes and their significance for the study.

If this is a modified amendment, please explain how the modifications address the concerns raised previously by the ethics committee.

If yes, please submit all revised documents with new version numbers and dates, highlighting new text in bold.

If the amendment significantly alters the research design or methodology, or could otherwise affect the scientific value of the study, supporting scientific information should be given (or enclosed separately). Indicate whether or not additional scientific critique has been obtained.

The amendment to the IRAS form only includes a change to the countries where the research will take place. This has been amended to include South Africa and Northern Ireland.

We have made a series of small changes to the protocol to clarify the timing of randomisation and CPAP administration for the purpose of improving intervention compliance. This does not represent a substantial change to the intervention or patient experience. No changes to the patient facing documents have been made.

The changes include:

- 1. We have added "contraindication to continuous positive airway pressure (CPAP)" to exclusion criteria
- 2. We have amended the wording for when randomisation should take place.
- 3. Further clarified the time period for administration of CPAP.
- 4. We have amended the wording for types of equipment which can be used to deliver CPAP
- 5. Provided further explanation in the baseline data and added "Diagnosis of Human Immunodeficiency Virus (HIV) infection"

6. Amended the protocol deviation "Administration of CPAP for less than 4 hours or with significant interruption for a patient in the intervention group" to now be recorded as two separate deviations.

- 7. Clarified which databases will be used for health economic analysis.
- 8. Added an appendix which outlines the proposed sub-studies for the trial.

Any other relevant information

Applicants may indicate any specific issues relating to the amendment, on which the opinion of a reviewing body is sought.

List of enclosed documents

Document	Version	Date
PRISM Trial protocol	v1.6	10/04/2017
PRISM Trial protocol tracked changes	v1.6	10/04/2017
PRISM Trial protocol Summary of changes	v1.6	10/04/2017

Declaration by Chief Investigator

- 1. I confirm that the information in this form is accurate to the best of my knowledge and I take full responsibility for it.
- 2. I consider that it would be reasonable for the proposed amendment to be implemented.

This section was signed electronically by Dr Rupert Pearse on 25/04/2017 14:22.

Job Title/Post:

Organisation:

Email:

Declaration by the sponsor's representative

I confirm the sponsor's support for this substantial amendment.

This section was signed electronically by Dr Sally Burtles on 25/04/2017 14:36.

Job Title/Post: Director of Research Services and Business Development

Organisation: Queen Mary University of London

Email: sponsorsrep@bartshealth.nhs.uk