

## Project Planning Intake

Does your project involve any of the following?

- A. The collection, or use, of data [Yes/No/Don't know]  
If yes, please mark which of the following apply to the data in this project
- Data will be collected and/or stored at Duke
  - Data will be received and/or accessed from external source(s) – this includes partner institutions, companies, social media sites/web, government entities
  - Using existing Duke internal/administrative or Duke Health data
    - If yes, “Will you need help to extract data from the electronic health record?” (y/n)
  - Data will be shared or archived with an entity or person outside of Duke
  - Data needs protected storage and computing environments (e.g., for patient data from Duke Health or other health systems, classified as Sensitive or Restricted data by Duke classification standards [found [here](#) ], proprietary data from other sources, etc.)
    - [if yes, describe]
  - Other/None of the above apply to my work (opens text box to describe further)
- B. Technologies, including mobile and web applications, websites, etc. (includes developing apps/websites as part of a project, using other apps/websites) [Yes/No/Don't know]
- [if yes...] Please describe briefly
  - Please consult with the appropriate Duke resource(s) prior to any purchase or entering into any third-party agreement to learn about your options and actions to comply with Duke's policies and guidelines.
- C. Computational resources or specialized storage needs [Yes/No/Don't know]
- [if yes...] Please describe briefly
- D. Investigational drugs, biologics, devices, and/or tobacco products, which would include, for example, a completely novel product or an FDA-approved product off label. [If yes, send to [ORAQ@duke.edu](mailto:ORAQ@duke.edu)] [Yes/No/Don't know]
- Do you plan to consent participants electronically? (y/n)
  - Do you plan to collect data electronically (as opposed to on paper)? (y/n) -- If yes, send to [marissa.stroo@duke.edu](mailto:marissa.stroo@duke.edu).
- E. Shipping or receiving biological specimens, hazardous materials, or any item that may have restrictions? [Yes/No/Don't know]
- [if yes, describe]
- F. Use of a Duke core facility, or other space/service/procedure provided by another department? (e.g., Regional Biocontainment Laboratory, shared resource, etc.) [Yes/No/Don't know]
- if yes, describe

Would the PI like a 10-15 minute project planning consultation to ensure awareness of resources that can benefit your project? -The consultation will be completed by the [myRESEARCHnavigators team](#). [yes/no]