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| **Associated Procedure / Instruction Ref:** | **080165-SOP** |

**INVESTIGATOR sPONSORED STUDY OUTLINE**

The aim of this document is to allow Ipsen to decide if we are interested by the scientific concept and willing to receive a full synopsis

|  ***Study Title :*** |
| --- |
| **EXTERNAL SPONSOR** Sponsor/Investigator Name:Institution:AddressCountry: |  |
| **Study SCIENTIFIC OBJECTIVE**(Include primary objective) |  |
| **Study SCIENTIFIC Rationale** |  |
| **Overall Study Design** |  |
| **Ipsen product**(If any) |  |
| **study population**(Include expected population size or sample size, if available and target population) |  |
| **ENDPOINTS**(Include Primary and Secondary Endpoints) |  |
| **projected timelines**(If available, include key milestones including date of the proposal, first patient in, last patient out, availability of results) |  |
| **IPSEN SUPPORT**Estimated costs* Overall project cost
* Cost per patient

Support type* Funding
* Funding & product

Product only |  |