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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:  Address  Country: |  |
| **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 |  |