Research Budget Template

****Industry Sponsored****

Clinical Study Subject:

Clinical Activities

Obtain research and regular rates for:

- _____ Each clinical procedure
- _____ Out-patient clinic room
- _____ Laboratory fees
- _____ Central lab
- _____ Overnight shipping
- _____ Pharmacy charges
- _____ In patient room
- _____ Radiology

Personnel

Estimate number of hours or give fee:

_____ Physician

_____ Coordinator

_____ Technical

_____ Clerical

Subject Payment

Define amounts and times for:

_____ Per visit stipends

_____Travel

_____ Meals

_____Parking

Administrative Costs Obtain rates and/or amounts for:

____Indirect cost

Other overhead

Study Budget Checklist:

SUBJECT Costs

_____ Cost per subject x Maximum number of subjects

_____ Cost per screened subject x Maximum number of screened, but not enrolled

_____ Cost per dropped subject x Maximum number of dropped subjects

_____ Bonus Number of subjects qualifying

STUDY Charges Up Front Costs

- _____ IRB Preparation fee (\$1,000)
- _____ Capital equipment (include cost of maintenance if applicable)
- _____ Sub-contracts
- _____ Record storage charges
- _____ Informed consent form translation
- _____ Advertisement(s)
- _____ Special supplies
- _____ Training costs
- _____ Source document preparation

MANAGEMENT Charges

- _____ Pharmacy charges (storage and preparation of drug)
- _____ Monitor visits (Coordinator time)
- _____ Post-study Coordinator charges
- _____ Protocol amendments
- _____ Physician fee (Salary and benefits)
- _____ Coordinator fee (Salary and benefits)
- _____ Administrative Assistant fee
- _____ Technical fee
- _____ Research Administrator
- _____ SAE Processing
- _____ Annual CHR review (\$200/year)

ADMINISTRATIVE Charges

- _____ Indirect costs on Study charges _____%
- _____ Cancellation fee