**Sample Data Collection/Capture Sheet**

**(To be used with Master List)**

*Remove instructions in red.*

*Modify data elements (noted in blue font). These are provided as examples only.*

**Protocol Title:**

Data to be collected on paper: Yes [ ]  No [ ]

Data to be entered directly into computer spread sheet Yes [ ]  No [ ]

**Data Elements to be collected**:

*(****NOTE:*** *rational for collection of certain demographic information and identifiers should be clarified in the Research Ethics Board submission form)*

**Demographic data and identifiers** *(Examples provided – revise as necessary):*

Age: \_\_\_\_\_\_\_

Gender: \_\_\_\_\_\_\_\_\_\_

First three digits of postal code: \_\_\_\_\_\_\_\_\_\_\_

Admission date: \_\_\_\_\_\_\_\_\_\_\_

Discharge date: \_\_\_\_\_\_\_\_\_\_\_

Ethnicity: \_\_\_\_\_\_\_\_\_\_\_\_\_

**Data elements from chart or database** (*Examples provided – revise as necessary. List all data to be collected):*

Type of Cancer: \_\_\_\_\_\_\_\_\_\_\_\_\_

Chemotherapy: Yes [ ]  No [ ]  If yes, type of chemotherapy: \_\_\_\_\_\_\_\_\_\_\_\_\_

Radio therapy: Yes [ ]  No [ ]  Dose of Radiation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Etc.

Data collected by (printed name and signature): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Data collected: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_