Cardiovascular Imaging Core Research Laboratory (CICRL) Project Proposal Form

This form must accompany your proposal to the CICRL Scientific Advisory Committee for approval of your research project. Please follow the guidelines given for each portion of the proposal and be *as brief as possible*. Consult the Laboratory Supervisor, Sandy Witt, for current laboratory fees. If human subjects or animals are to be used, appropriate IRB or IACUC approval must be obtained before your project can begin. Please attach IRB protocol and consent or IACUC protocol and approval letter as well as a copy of a 4 page NIH format biosketch of the P.I. A letter from your Department Head indicating support must also accompany your proposal. Submit completed proposals on line or to Thomas R. Kimball, M.D., Cardiology, MLC-2003. If you have questions please call 636-3577. The CICRL Scientific Advisory Committee will review all proposals.

Project Title:

Name and Division of Principal Investigator:

Collaborator(s):

<u>CICRL Collaborator(s):</u>

Methods:

Cardiac Ultrasound Vascular Ultrasound Applanation Tonometry

Subjects:

HumanHuman Protocol #(Please attach IRB Protocol and Consent and Approval Letter)

Large Animal (> Mouse) Small Animal (≤ Mouse) Mouse Embryo (Please attach IACUC approval) Animal Protocol #

Number of subjects Number of studies/subject

Duration of Project:

Start Date Anticipated completion date



Sources of Funding

List current sources and limits of funding for this project: Is external funding anticipated for this project? List potential sources for future funding and proposed application/award dates

<u>Purpose of the Project (one sentence):</u>

Description of Proposal

Attach a 3-5 page summary of the proposed project using the NIH-PHS-398 research plan format. If the work is connected with a funded project, please attach a copy of the proposal if available.

Research Plan Format

Specific Aims – Concise statement of hypotheses and specific aims Background and Significance – Brief description of work in related fields including a few key references and appropriate journal articles. Describe any previous work you have done on related problems. Attach your relevant publications

Preliminary Studies – If you have performed preliminary experiments that are relevant to the proposal, briefly describe them.

Research Design and Methods – Describe the experiments which you propose to address the specific aims.



For Staff Use only

Anticipated Costs:

Billing Information:

Imaging Methodology to be Employed

Cardiac Ultrasound 2D **Basic Anatomy** Fractional area change Valve annulus Aortic Mitral Tricuspid Pulmonary LA area/volume LV volume LV EF M-mode LVED LVES Hd Hs IVSd IVSs SF LV mass RWT End-systolic wall stress EΤ VCFc VCFc difference LA size Doppler Valve peak velocity Aortic Mitral Tricuspid Pulmonary Gradient TR Other Time velocity integral



Aortic Mitral Tricuspid Pulmonary Mitral E/A ratio Color Doppler m-mode Doppler tissue imaging MV lateral MV septal TV lateral Other Pulmonary venous velocity

Vascular Ultrasound (human only) Carotid IMT Regional aortic compliance M-mode 2D Regional carotid compliance M-mode 2D Brachial artery reactivity

Applanation Tonometry (human only) Augmentation Index Pulse wave velocity

Equipment to be Utilized:

GE Vivid 7 Philips HP Sonos 5500 Visualsonics Sphygmacor

