

**Call for Third-Party Evaluation Sites:**

**Evaluation Study of the AI4HF Model in Heart Failure Management**

Application form

1. **General information**

|  |  |
| --- | --- |
| **Main applicant** | Name:  Department:  Institute:  Email:  Role in the project: |
| **Project team** | Name:  Department:  Institute:  Email:  Role in the project:  Name:  Department:  Institute:  Email:  Role in the project:  Name:  Department:  Institute:  Email:  Role in the project:  etc. |
| **Data or IT specialists** | Name:  Department:  Institute:  Email:  Role in the project:  Name:  Department:  Institute:  Email:  Role in the project: |

1. **Meta data**

|  |  |
| --- | --- |
| **Meta data - administrative** | Origin: …  Geographical coverage: …  Language: …  Access procedure: [describe how to get access to your center’s data]  Access environment: local environment/virtual environment/…  Processing time new data request: … days/months  Last updated: dd/mm/yyyy  Website/publication referencing data: … |
| **Meta data - structural** | Temporal coverage: dd/mm/yyyy – dd/mm/yyyy  Semantic annotations: ICD/SNOMED/…  Type: structured/unstructured/…  Format: csv/SAV/xlsx/…  Data availability: *see data availability and outcome table checklist under point 6.* |
| **Meta data - descriptive** | Total heart failure population size: …  Age distribution: …  Sex distribution: …  Ethnicity distribution: …  HF type distribution: N HFrEF/ N HFmrEF/ N HFpEF |

1. **Infrastructure (max 1 A4 page)**

|  |  |
| --- | --- |
| **Infrastructure** | [describe the infrastructure available in your center to support advanced research] |
| **Data standardization** | [describe efforts towards data standardization, specifically on OMOP or FHIR] |
| **Regulatory** | [describe your center’s processes for ensuring regulatory and ethical compliance for this evaluation study] |
| **Research staff** | [describe the collaboration between hospital and GP and how staff will be recruited for the evaluation study] |
| **Support** | [describe the data management and IT support available for the evaluation study in your center] |

1. **Center of excellence (max half A4 page)**

|  |  |
| --- | --- |
| **Motivation** | [describe motivation for participation in the evaluation study] |
| **Expertise** | [describe your center’s expertise in heart failure research, including specific areas of focus] |
| **Innovation** | [describe the innovative approaches that your center employs in heart failure research, and what technologies and tools your center deploys] |

1. **Timeline (max half A4 page)**

|  |  |
| --- | --- |
| **Timeline** | [please provide a local center timeline for the evaluation study including steps taken before the start of the study, including at least ethical approval, data preparation and evaluation training] |

1. **Data availability checklist**

|  |  |  |
| --- | --- | --- |
| **Features** | **Present in data** | **Note** |
| Sex |  |  |
| Age |  |  |
| Smoking status |  |  |
| HF ≥ 18 months prior |  |  |
| Systolic blood pressure |  |  |
| Sodium |  |  |
| Creatinine |  |  |
| BMI |  |  |
| NYHA class |  | [please specify] |
| Ejection fraction |  | [please specify] |
| COPD |  |  |
| Diabetes |  |  |
| Atrial Fibrillation |  |  |
| Myocardial Infarction |  |  |
| Stroke |  |  |
| Beta-Blocker use |  |  |
| ACE/ARB use |  |  |
| PCI |  | [please specify] |
| CABG |  | [please specify] |
| ECG features\* |  | [please specify] |
| Echocardiography features\* |  | [please specify] |
| **Outcomes** |  |  |
| All-cause death |  |  |
| CV-related death |  |  |
| CV outcomes |  |  |
| Renal outcomes |  |  |
| Re-hospitalisation for various outcomes |  |  |

\*optional

Budget

1. The maximum amount that can be requested is € 75,000 (including overhead and VAT).
2. Provide a detailed description of the costs of the evaluation study. See point 4 for how to specify by category.
3. If applicable: report requested and/or granted external funding (including amount, subsidizing party, granted yes/no)
4. Eligible costs are:
   1. Research costs
   2. Implementation costs
   3. Material costs
   4. Personnel costs
   5. Overhead costs
   6. Other costs
5. Budget

|  |  |  |
| --- | --- | --- |
| **Cost category** | **Amount** | **Description** |
|  | **€** | **[description how budget will be spent]** |
|  | **€** |  |
|  | **€** |  |
| **Total costs** | **€** |  |