

The aim of this guide is to help researchers write a research study protocol for an [observational](#) study.

The guide will take you through each section of the protocol giving advice and examples

- Brief description of methods

---

The background should include a \_\_\_\_\_ along with a full literature review, a detailed justification for the study and discussion of its feasibility.

### *6.1 Literature Search and Review*

Precise details of the literature search completed should be given here.

- The nature of any unpublished work should also be documented here.
- Help with this aspect your intended research can often be sought from a clinical librarian. A good literature search at the beginning of the research process is invaluable and will steer the researcher in the most appropriate direction.
- Your review should make reference to relevant papers, unpublished works as well as clinical experience.

### *6.2 Justification*

- A statement indicating the size of the problem (and effect on the health service) and why the study is appropriate
- Explain what the potential benefits are – to patients and the health service
- Explain what your study will add to the body of evidence already available.
- Discuss the feasibility of the study in terms of subject and data availability as well as length.

- 
- Describe the primary research question
  - Clearly defined objectives in terms of measurable endpoints
  - Distinguish primary and secondary objectives

---

The two most commonly used designs for observational studies are (A) case-control studies (including nested case-control studies) and (B) cohort studies. In the former, the study groups are chosen on the basis of their disease or outcome of interest. In a cohort study the comparison groups are identified according to an exposure of interest. A description of the design should be given, along with details of any matching and blinding used. Cross-sectional studies are also discussed in (C).

- 
- Describe an objective definition for the disease or outcome of interest and use this to define the
  - Describe the appropriate [control](#) group for the particular group of cases. In general the controls should be sources from a similar population as the cases, the only difference being that they do not have the outcome of interest.
  - Describe the matching factor(s) and how the matching will be done. The main purpose of matching is to control for [confounding](#). By matching on age, for example, we are attempting to ensure the cases and controls have the same (or similar) age distribution.

---

Other types of observational studies may involve only one group of subjects. For example, in a [method comparison study](#), measurements will be taken on a group of subjects using two (or more) methods. The guidelines set out in this document still apply, the main difference being that a second group of subjects is not used.

---

Include details of:

- Source of subjects (where they come from and why this group is appropriate). For example, are they a random sample from a larger population or are they obtained from a disease register? They may be patients attending a clinic over a particular period.
- Number of centres involved or regional / national limits on possible recruitment
- Subject inclusion and exclusion criteria (with justification if necessary)
- Expected no of eligible participants available per year and proportion of these expected to agree to take part.

- useful to include table / diagram describing schedule for data collection.
- describe methods used to maximise completeness of data (e.g. telephoning patients who have not returned postal questionnaires)
- include data collection forms and questionnaires as appendices

### 11.2 *Data handling and record keeping*

- describe procedures for data collection and recording (software to be used, location of the data etc)
- detail methods implemented to ensure validity and quality of data (e.g. double entry, cross validation etc)
- Security / storage of data
- Records retention – duration and location
- Adherence to Data Protection Act 1998 and Caldicott

---

### 12.1 [Sample size calculation](#)

Details of the precision or power calculation used to estimate the required sample size based on primary outcome

- Assumptions made (statistical assumptions regarding distribution)
- Estimates of difference to be detected along with appropriate justification

---

### 13.1 *Subject compliance*

- procedures for monitoring (e.g. exercise diary for subjects on a rehabilitation programme)
- recording of patient compliance information (what will be recorded and where)
- detail of follow-up of non compliant subjects

### 13.2 *Withdrawal of subjects*

- describe under what circumstances and how subjects will be withdrawn from the study
- give details of documentation to be completed on subject withdrawal (including recording reasons for withdrawal and any follow-up information collected)

---

Description of ethical issues related to the study. For example consider:

- Approvals from relevant groups (e.g. MREC, LREC, MHRA, Trust(s))
- Informed consent (subject information and informed consent form appended)
- Allowances for special groups (e.g. non English speakers, children, mentally ill)
- Patient withdrawal / discontinuation

- 
- Finance and insurance details (if not addressed in separate agreement)
  - Cover for non negligent and negligent harm

---

Details of how, where and when the results of the study will be reported / presented.

- Altman, DG. (1991)

. London: Chapman and Hall, Chapter

