

Name*

Short project title*

Description of indication*

Type of intervention*

o Medicinal product, name

Is/are the product(s) registered*

Yes, for the indication

No

Medical device

Medical nutritional product

other

Brief description of study design*

Name

Brief summary of clinical trial proposal*

Type of research subjects/patients*

Two or three key references*

I have read and accept the terms & conditions*

Please note that fields with a star () are required fields*