# Section 1: Application Details

**Request Category**

Research (research studies with approval from a research ethics board)

Information (information to support planning, policy development, quality improvement projects or general inquiries)

## Request Type

New

Update (add additional fields or years of data to previously disclosed data)

Re-use (use previously disclosed data for a different project)

## Previous Request Information

#### (For Update or Re-use Requests*)*

|  |  |
| --- | --- |
| Request Number: REQ- | Project Name: |

## Primary Contact/Principal Investigator Secondary Contact

#### (As listed in the ethics board approval) (Optional - contact person for correspondence/administration)

|  |  |
| --- | --- |
| **Title:** | **Title:** |
| **First Name**: | **First Name**: |
| **Last Name**: | **Last Name**: |
| **Institution**: | **Institution**: |
| **Address**: | **Address**: |
| **Email**: | **Email**: |
| **Phone**: | **Phone**: |

**Project Details**

**Project Name:**

**Project Purpose:**

# Section 2: Supporting Documentation

## Research Requests

Email this application form along with the documents listed below to: [**health.resdata@gov.ab.ca**](mailto:health.resdata@gov.ab.ca)

**Required Documentation: (Attach the following documents)**

Original research proposal

Original ethics submission

Original ethics approval

[*Commonly Requested Data Elements*](http://www.health.alberta.ca/documents/Research-Common-Data-Elements.xlsm)(*if known)* (*see* [*Overview of Administrative Health Datasets*](http://www.health.alberta.ca/documents/Research-Health-Datasets.pdf))

**Additional Documentation:**

Revised research proposal

Amending ethics submission

Amending ethics approval

Current ethics renewal approval

Agreement or letter from external data source permitting linkage with Alberta Health data

Consent template/Patient information sheet

## Information Requests

Email this application form along with the documents listed below to: [**health.inforequest@gov.ab.ca**](mailto:health.inforequest@gov.ab.ca)

Any relevant project documentation (i.e. project charter)

[*Commonly Requested Data Elements*](http://www.health.alberta.ca/documents/Research-Common-Data-Elements.xlsm)(*if known)*

# Section 3: Data Requested

|  |  |  |  |
| --- | --- | --- | --- |
| **DATA SET** | | **START DATE**  *(MM/DD/YYYY)* | **END DATE**  *(MM/DD/YYYY)* |
|  | **Alberta Blue Cross Pharmacy Claims** (fromApril 1, 1994) |  |  |
|  | **Alberta Continuing Care Information System (ACCIS)  Long-Term Care** (from January 1, 2010) |  |  |
|  |
|  | **Ambulatory Care** (from April 1, 1997) |  |  |
|  | **Diagnostic Imaging** (from January 1, 2011 |  |  |
|  | **Inpatient** (from April 1, 1993) |  |  |
|  | **Laboratory** (limited from Jan 2009, full from April 2012) |  |  |
|  | **Longitudinal Demographic Profile** (from April 1, 2000) |  |  |
|  | **Pharmaceutical Information Network (PIN) Dispenses** (from January 1, 2008) |  |  |
|  | **Population Registry** (from April 1, 1993) |  |  |
|  | **Practitioner Claims** (from January 1, 1994) |  |  |
|  | **Vital Statistics - Births\*** *(*from January 1, 2005) |  |  |
|  | **Vital Statistics - Deaths\*** (from January 1, 1999) |  |  |

\* With authorization

Cohort: *(see* [*Cohort Template*](http://www.health.alberta.ca/documents/Research-Cohort-Template.xlsx) *for the format to submit cohort data; Secure File Transfer Protocol must be used)*

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