CMLH INTENT TO PROPOSE

THE INTENT TO PROPOSE IS INTENDED TO GIVE THE CMLH AN OPPORTUNITY TO PROVIDE FEEDBACK TO YOU AHEAD OF YOUR FULL PROPOSAL. THE FINAL PROPOSAL MAY VARY FROM THE INFORMATION SUBMITTED HERE, BUT AT THIS STAGE, WE MAY BE ABLE TO HELP YOU BUILD THE STRONGEST ARGUMENT FOR YOUR PROPOSED WORK. WE DO NOT NEED MORE THAN A PARAGRAPH OR TWO FOR EACH OF THE QUESTIONS BELOW.

PLEASE SUBMIT YOUR ITP USING THIS TEMPLATE VIA EMAIL BY SEPTEMBER 18. FURTHER DETAILS REGARDING SUBMISSIONS ARE INCLUDED BELOW.

1. RESEARCH TEAM

List PI(s) and additional researchers (name, affiliation and email address) and anticipated student involvement (name, degree program, curriculum/department. NOTE: undergraduate students are not eligible to work on CMLH projects)

2. OVERVIEW OF PROBLEM AND SOLUTION

Lead with the need. Please describe the problem or opportunity in terms of who would be utilizing the innovation and the magnitude of the problem (large/costly/growing patient population, etc.). How does your solution work, who will use it, and why is this approach particularly advantaged over the status quo or competing solutions?

3. OVERVIEW OF RESEARCH PLAN

Please provide a high-level overview of the contemplated research plan. Reference prior work that this may be building off of, key research design elements, data to be used/required for trials, research outcomes (prototype or other proof of concept end point that is being targeted at the end of 12 months)
4. GOODNESS / IMPACT IN HEALTHCARE

Ok, now for some extrapolation from incomplete data. What is the goodness/impact that your innovation would deliver in practice? How will it deliver better outcomes or more efficiency or both? There are many pathways to value: reducing variation in diagnosis, earlier detection / proactive individualized approaches, reducing waste or inappropriate therapy, liberation of data within privacy requirements, and so on.

5. ANTICIPATED BACKGROUND IP IN RESEARCH PLAN

Please indicate if your proposed work will build upon existing IP from:

CMU?
UPMC / Univ. of Pittsburgh?
Other? (Please describe, thank you)

PLEASE SUBMIT THIS DOCUMENT VIA EMAIL BY SEPTEMBER 18 TO: CMLH@CS.CMU.EDU

PLEASE USE “ITP [YOUR NAME] [SHORT PROJECT TITLE]” AS THE FILE NAME

FOR QUESTIONS REGARDING THE ITP, OR THE FULL PROPOSAL PLEASE CONTACT: JIM CIUCA
DEVELOPMENT OFFICER FOR COMMERCIALIZATION, CMLH JCIUCA@CS.CMU.EDU