**COBRAS Human Core Actigraphy Service Request**

|  |
| --- |
| **Study information** |
| **Study Name** |  |
| **HRPO number** | [ ] Pending |
| **Principal Investigator** | **Name** |  | **Department** |  |
| **Title** |  |
| **Email** |  | **Phone** |  |
| **Study contact** | **Name** |  | **Department** |  |
| **Title** |  |
| **Email** |  | **Phone** |  |
| **Is this study industry funded? 🞏 Yes 🞏 No** |
| **Fund number:** [ ] Pending |
| **Do you have a sleep medicine physician on your study team? 🞏 Yes 🞏 No****If yes, name of physician:** |
| **Is the principal investigator of the study a member of COBRAS? 🞏 Yes 🞏 No** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Service****Requested** | **Projected N** | **Dates (approx)** | **Frequency (per week or month)** | **Notes** |
| [ ]  **Study set up** Includes device consultation, instructions for charging, setup, and download of device, and instructions for Clocklab analysis |  |  |  |  |
| [ ]  **Actigraph devices**Philips-Respironics Actiwatch 2 |  |  |  |  |
| [ ]  **Actigraph docking/charging Station and software**Philips-Respironics Actiwatch 2 docking/charging station and current version of Philips Respironics Actiware software |  |  |  |  |
| [ ]  **Actigraphy Technician**For investigators who elect not to charge, setup, or download devices |  |  |  |  |
| [ ]  **Actigraphy data scoring and analysis**Includes manual sleep scoring in Actiware and standard circadian values in Clocklab |  |  |  |  |

**Please return completed form to** **COBRAShumancore@email.wustl.edu**

**with subject, “New Actigraphy Request”**