Arthrex Research Portal

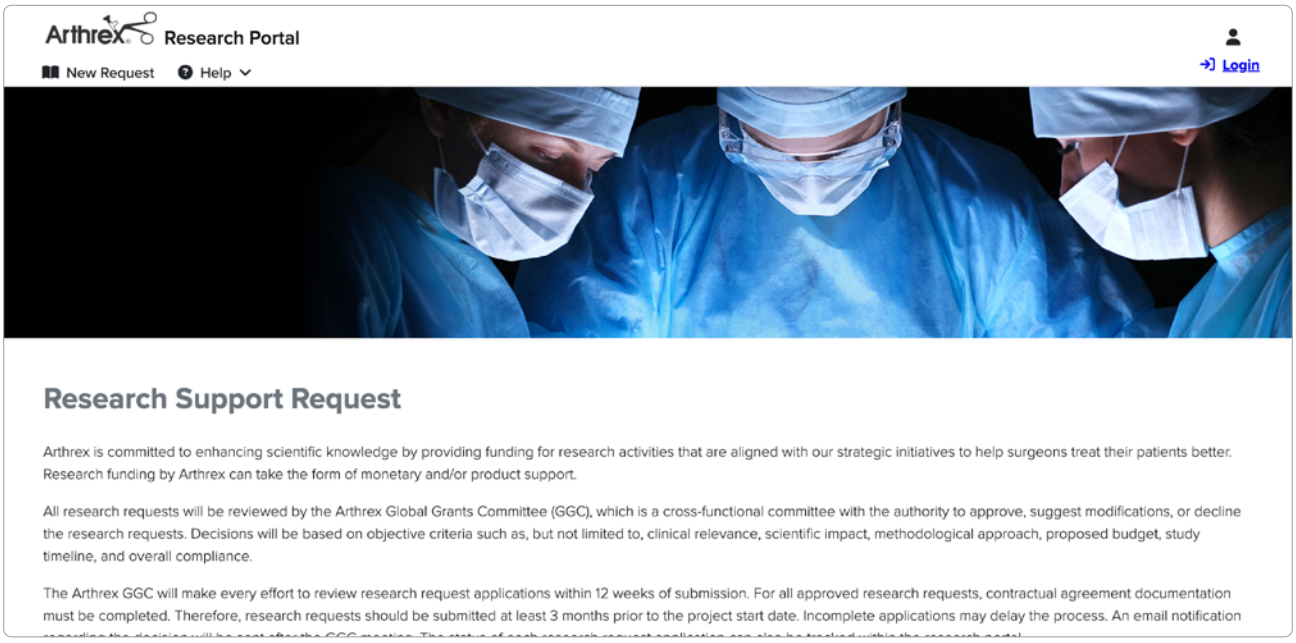
Quick Start Guide

Arthrex®

General Information

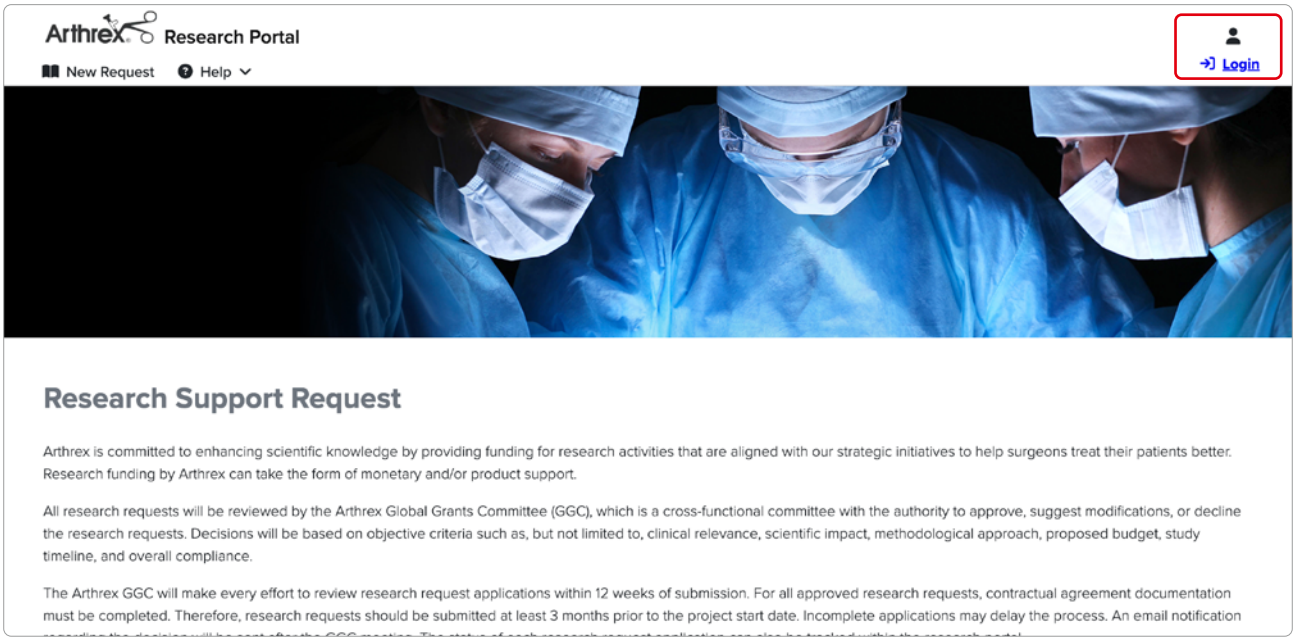
Welcome to the Arthrex Research Portal

Go to https://research.arthrex.com to visit our website for research support requests.



Login

Select Login to enter the research portal.

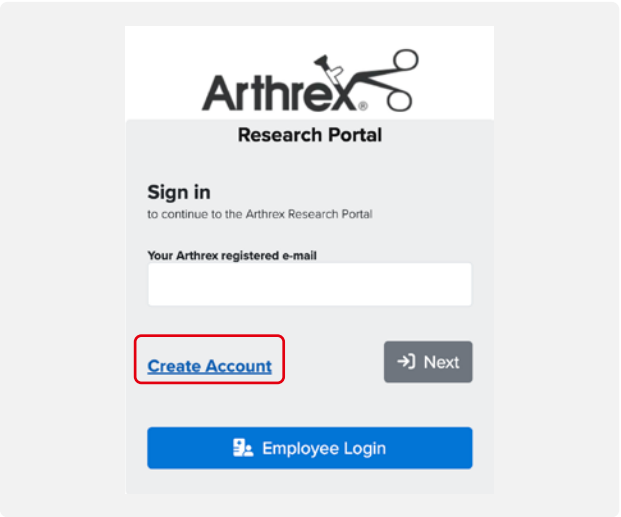


Login

Please log in with your Arthrex registered email address. You will be prompted to enter your password in the next step.

Don’t have an account yet?

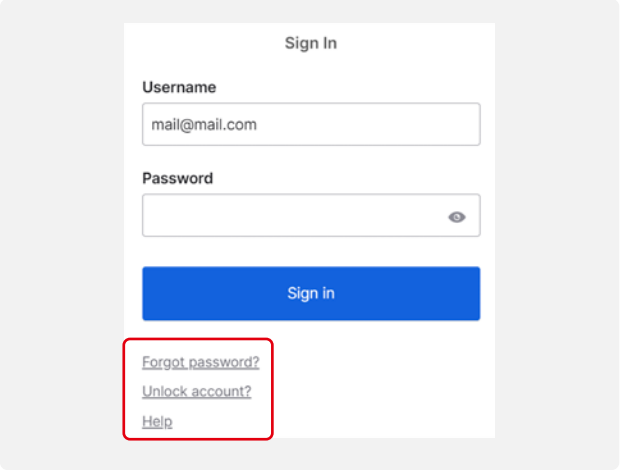
- Click on Create Account and register your information.
- Following registration, you will receive an email from noreply@okta.com once your account is activated. This process may take up to 24 hours.
- Follow the instructions in the email to verify your new login and set up a password.



Unable to log in?

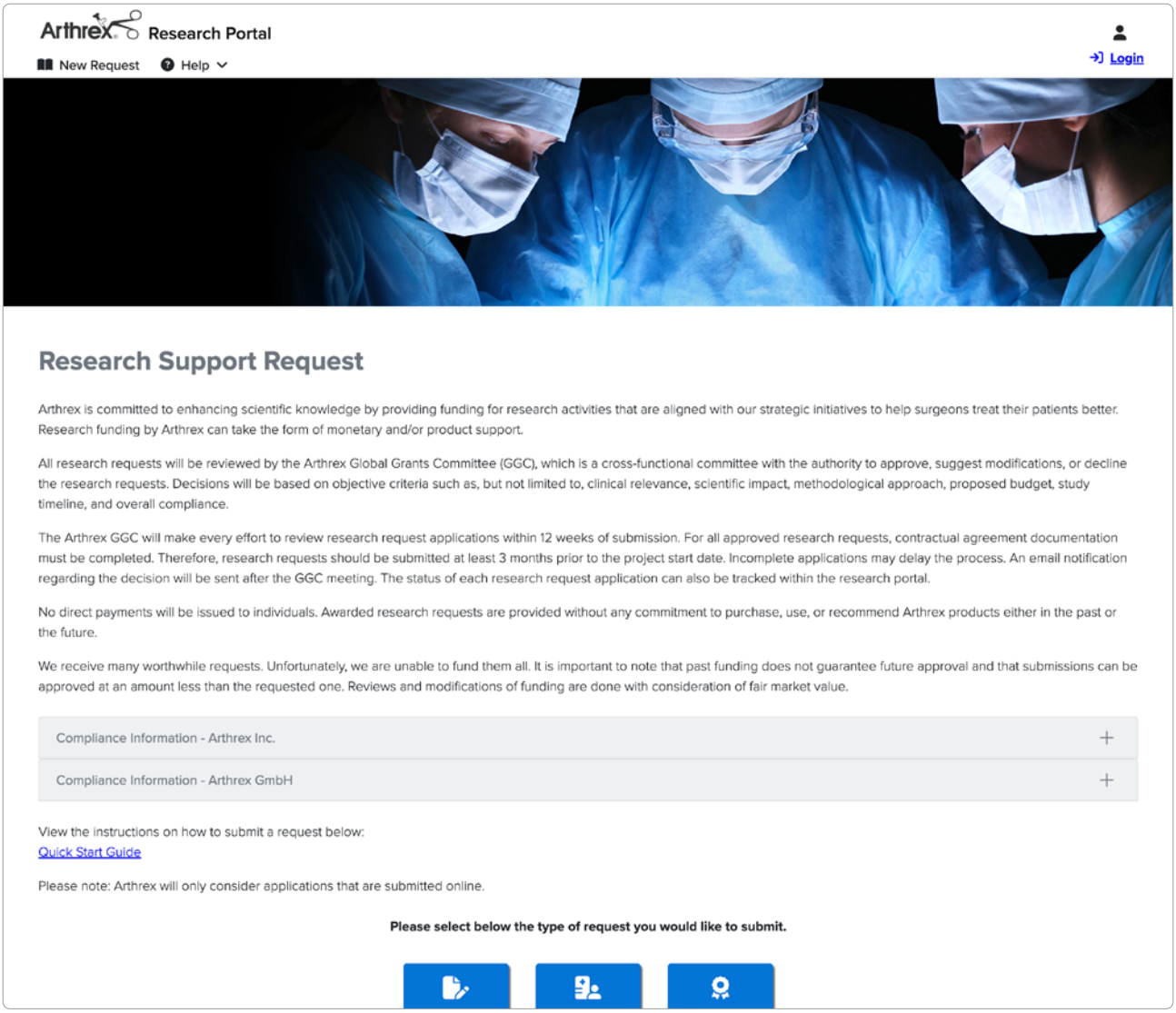
Choose one of the options to either reset your password or unlock your account.

For further help with your account, you can also contact studies@arthrex.com.



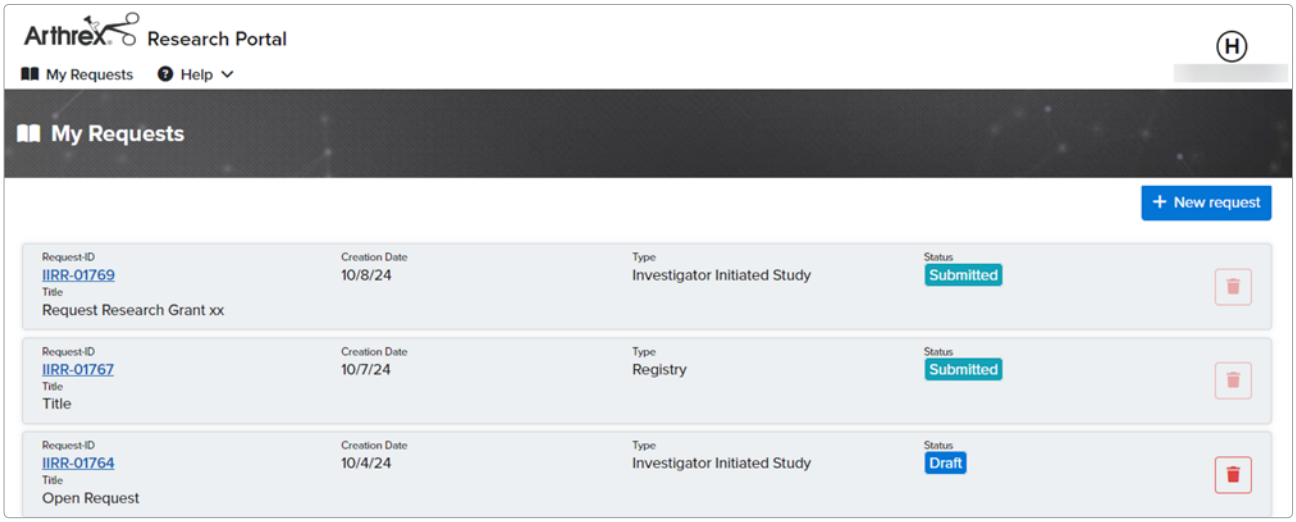
Home page

- On our home page, you can find comprehensive information regarding the request process and the different types of requests offered.
- Our Quick Start Guide is linked on the home page, or you can access it anytime through Help > Quick Start Guide.
- If you have any questions or need assistance, please contact us directly through Help > Contact Us.
  Please be sure to include your request ID for reference.
- You can return to the home page anytime by clicking on the logo in the top left section of the page.



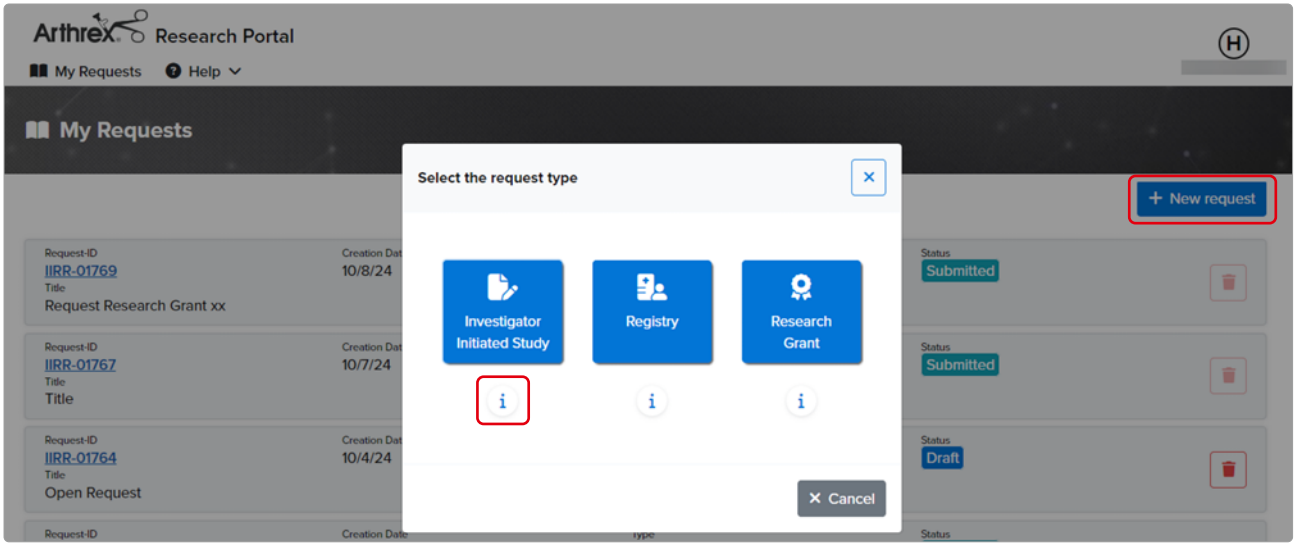
My Requests

Navigate to My Requests to view all your requests. For each request, the request ID, title, creation date, request type, and the status are displayed. Only requests with the status Draft can be edited or deleted.



New Research Request

Click on New Request to start a new study application. A pop-up will prompt you to select the request type.
For more information on the available request types, select the information button underneath.



Navigation Overview

Progress and Navigation

› The application process consists of several steps, varying by request type.

› For general information on each request type, visit the first tab, Info.

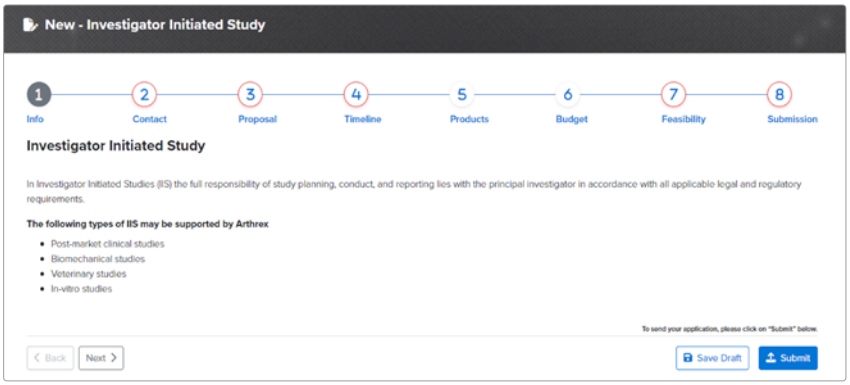
› Navigate using either the progress bar at the top of the page to jump between tabs or the Back and Next buttons at the bottom of the page.

Saving and Submitting

› Save a draft of your application at any time using the Save Draft button. (Tip: Save regularly to prevent data loss.)

› When finished, click Submit to send your application.

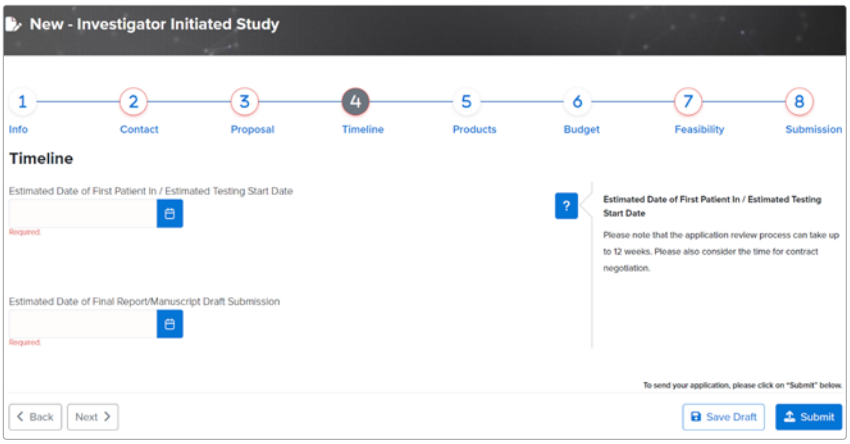
› The system will alert you if any information is missing and direct you to the respective fields.



Required Fields

› Required fields are marked visually and must be completed before submission.

› The progress bar indicates incomplete tabs by highlighting them with a red border.



Help Text

› Help text is available for certain fields or sections.

› It opens automatically when editing the field.

› You can also access it manually by clicking the ? button next to the field.

Investigator Initiated Request

Contact Information

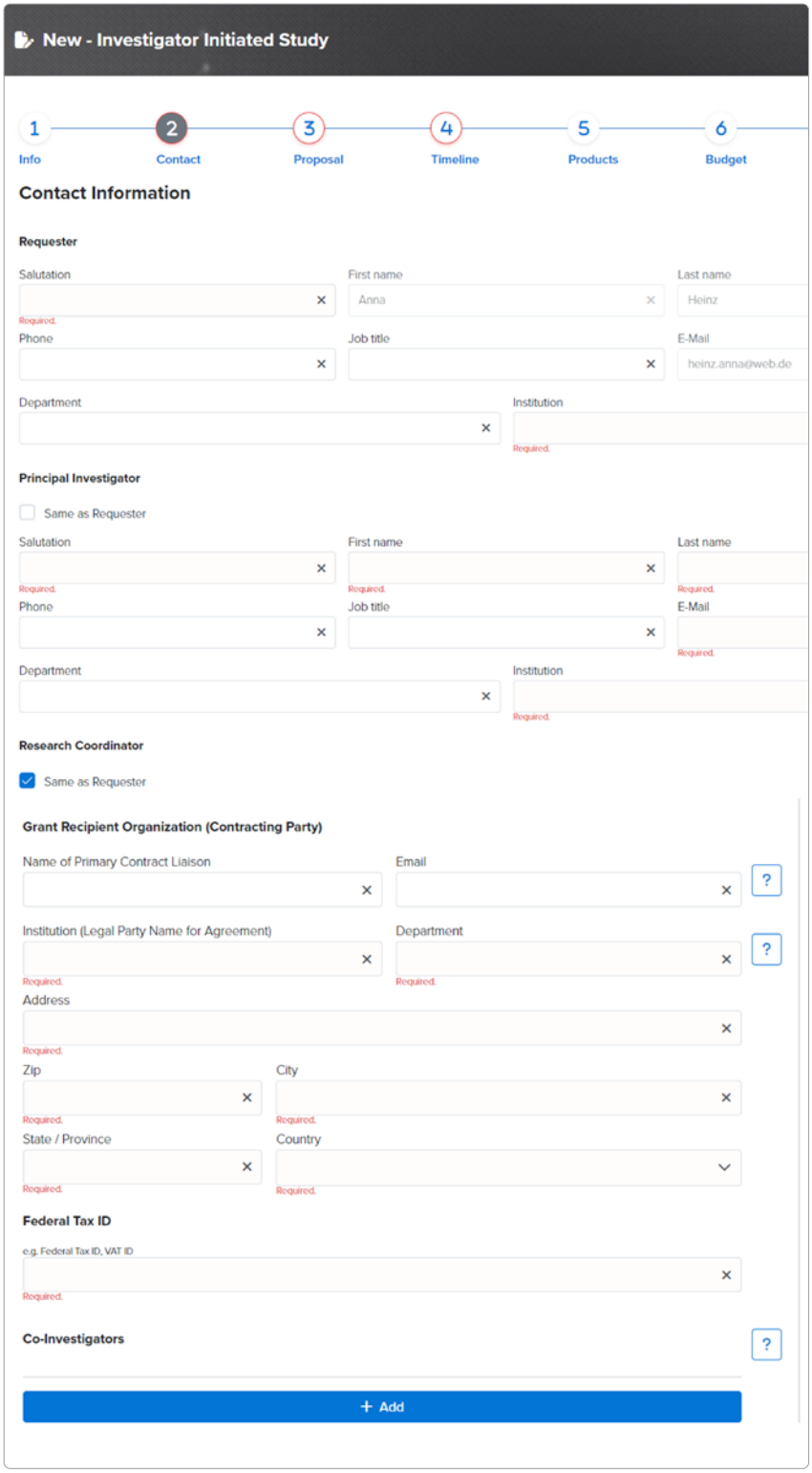
Please enter all required information regarding the requester, principal investigator, and research coordinator of the study request.

Name and email for the requester are automatically pre-filled from your account.

If the principal investigator and/or research coordinator are the same person as the requester, tick the checkbox Same as Requester and the information will be automatically filled in for you.

Please enter the grant recipient organization, including information for a primary contract liaison.

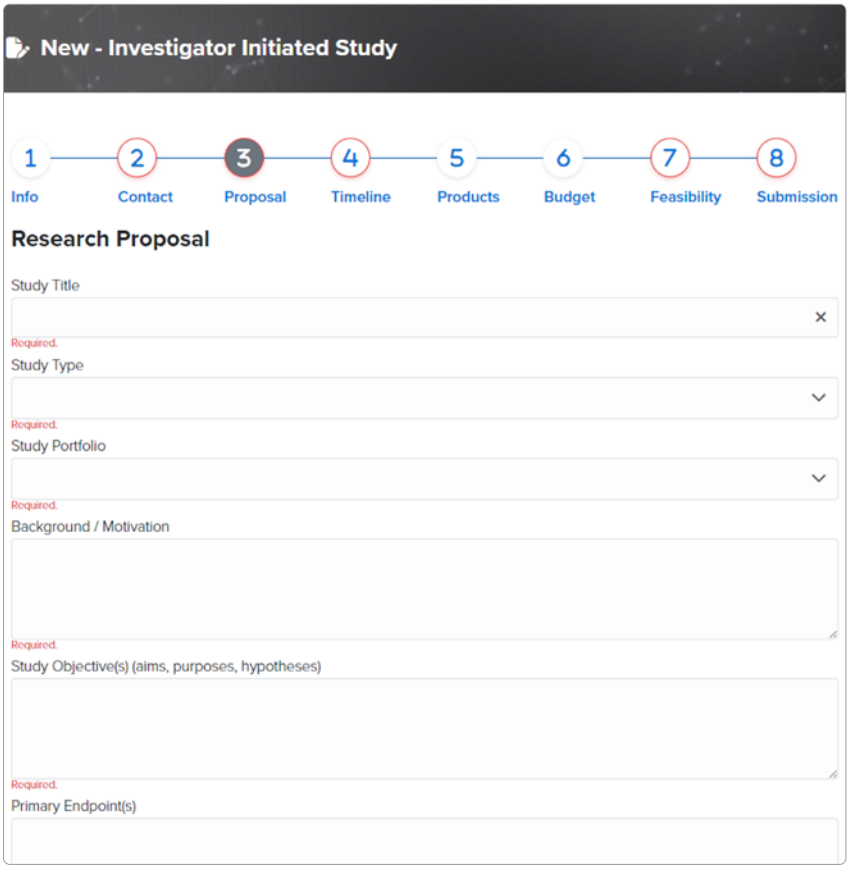
Please add all other individuals that have a major role in the research in the Co-Investigators section.



Research Proposal

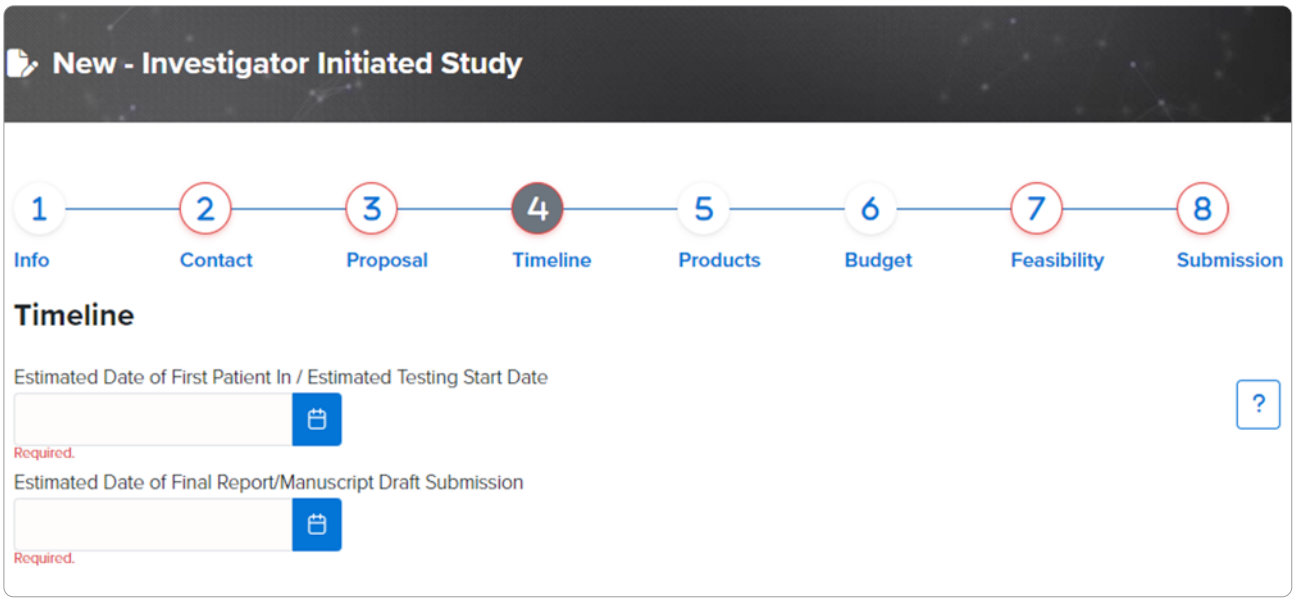
The **Research Proposal** page includes fields regarding the study design, eg, Study Objective and Materials & Methods.

The size of the text fields can be enlarged by dragging the lower right corner of the text box.



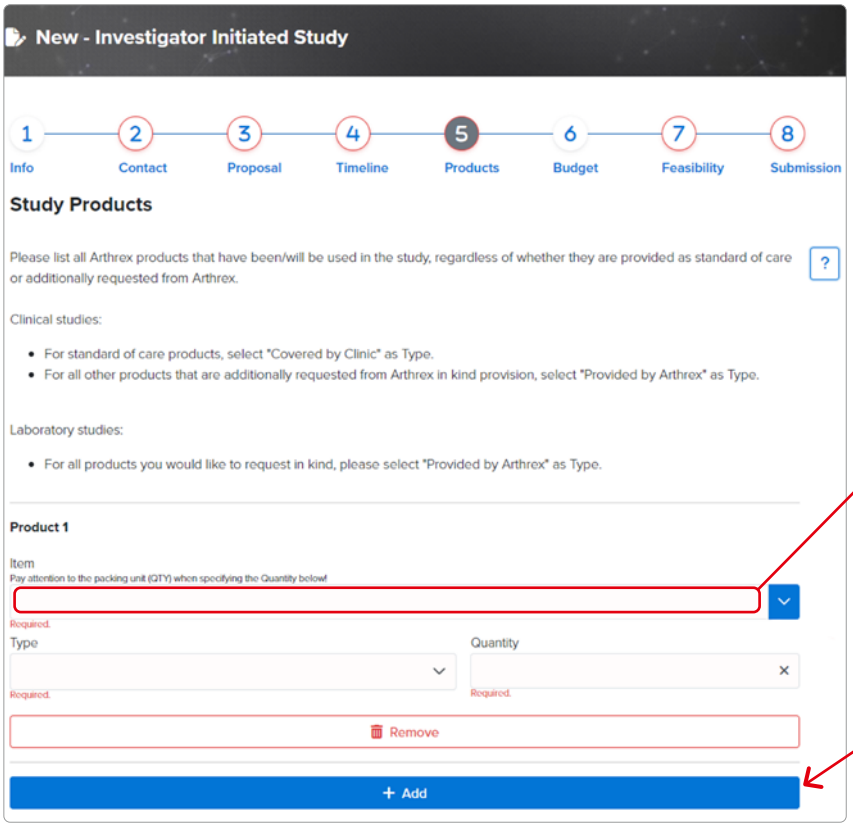
Timeline

Please select the expected dates for the timeline of the research proposal.



Arthrex Study Products

Please list all Arthrex products that will be used in the study, both **requested products** and **products covered through standard of care**. Refer to the Arthrex website for product information: [www.arthrex.com.](http://www.arthrex.com)



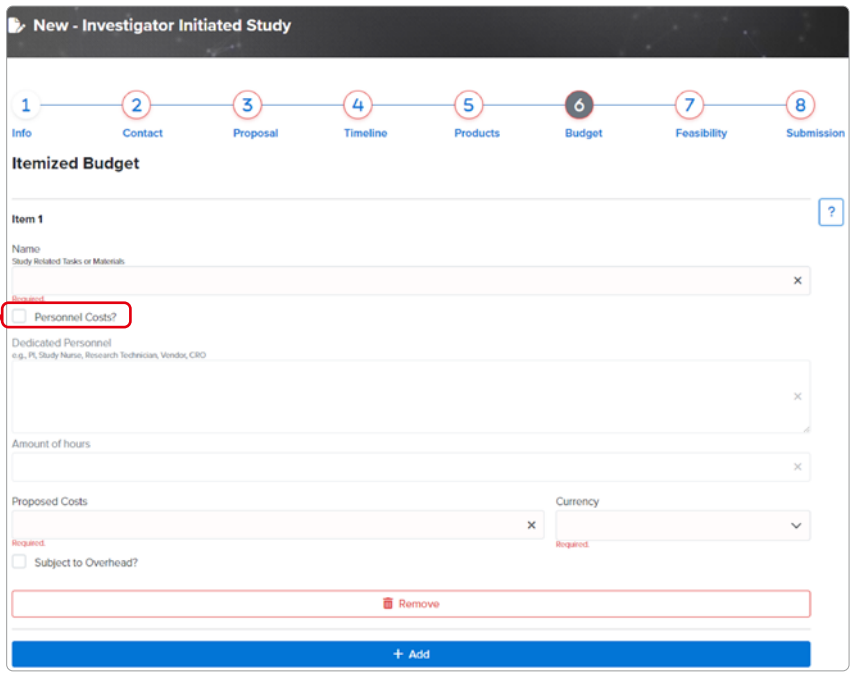
Please select the respective **products** from the **dropdown list**. You can search for products by typing in the AR number or the name. Please pay attention to the packing unit when calculating the quantity.

Click to add more items.

Itemized Budget

This may include clinical study-specific efforts that are not standard of care or reimbursed.
For laboratory studies, this may include required materials. **Please do not list Arthrex products in this area.**

If the budget item refers to personnel cost, please tick the box and specify the dedicated personnel and the amount of hours.

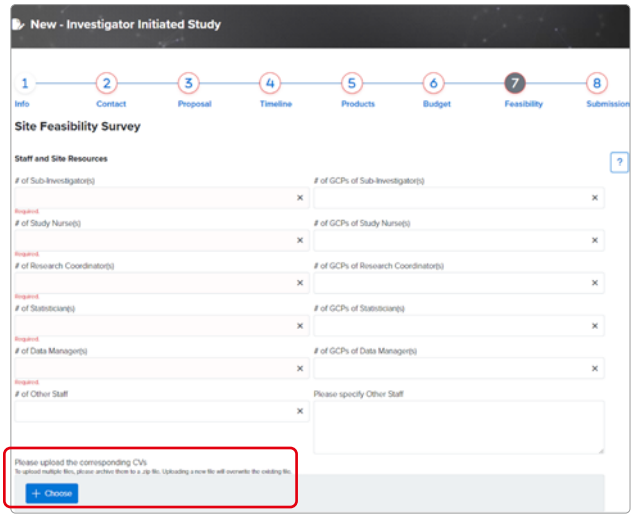


Site Feasibility Survey

For requests with **study type clinical** (defined in Section 3, Proposal) a site feasibility survey will be mandatory. You will be asked to provide information on staff and site resources, your clinical research experience, patient population and recruitment, and a possible conflict of interest.

You will also be asked to provide the CVs of your staff.

To upload multiple documents, please archive them to a .zip file. Uploading a new file will overwrite the existing file.



Submission

The application can only be submitted once all required fields have been filled out correctly.

Saving a draft of the application is possible at any time.

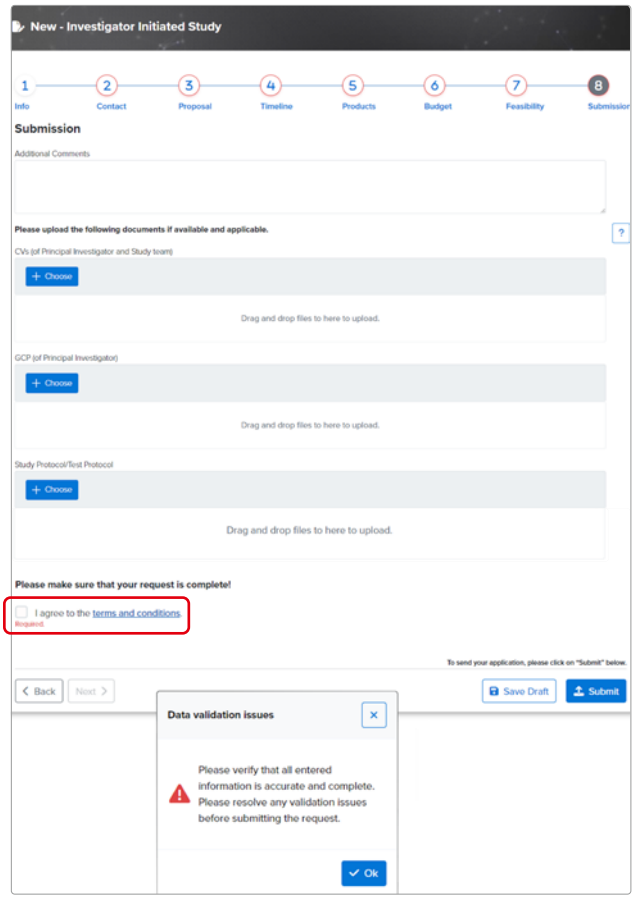
You can leave additional comments if required.

Please upload applicable documents in this section.

To upload multiple documents, please archive them to a .zip file. Uploading a new file will overwrite the existing file.

Before submitting the application, please read and agree to the terms and conditions.

If you attempt to submit the request without completing all required fields, you will receive a notification. By selecting Ok, you will be automatically directed to the fields that require your attention.



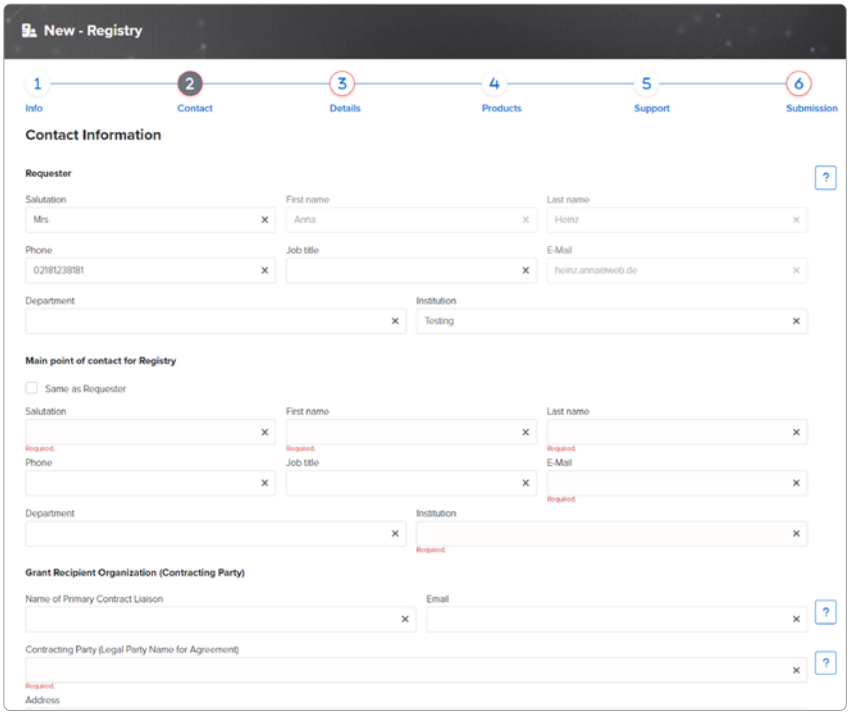
Registry Request

Contact Information

Please enter all required information about the requester, the registry's main point of contact, and the grant recipient organization.

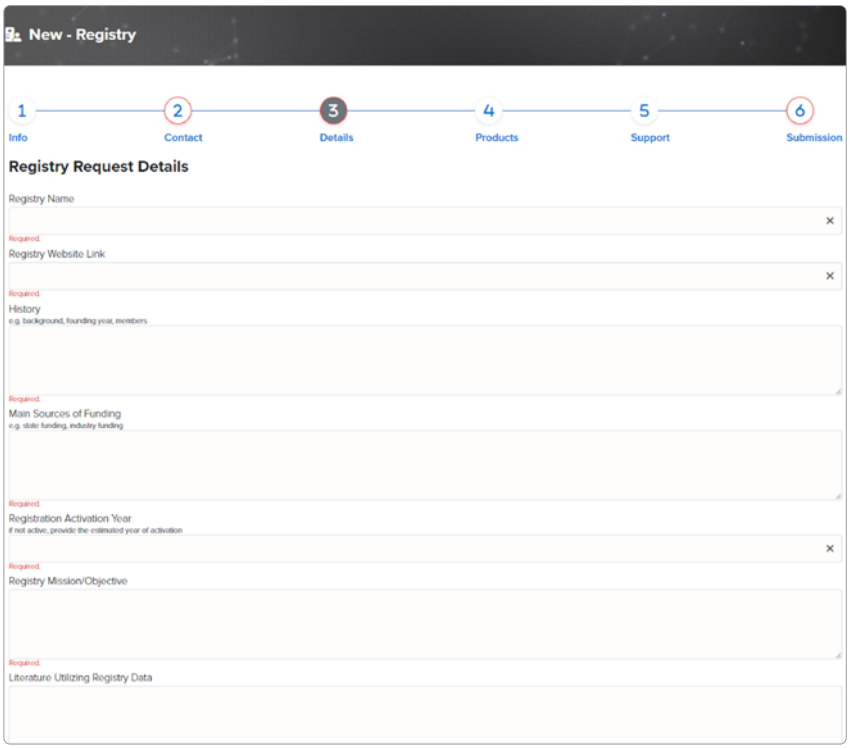
Name and email for the requester are automatically pre-filled from your account.

If the registry's main point of contact is the same person as the requester, tick the checkbox Same as Requester, and the information will be automatically filled in for you.



Registry Request Details

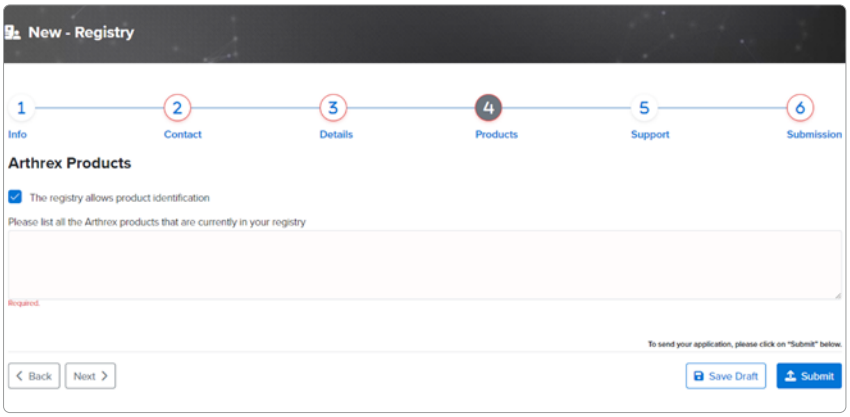
Please provide detailed information on the registry, including registry metrics, data quality measures, and output.



Arthrex Products

If the registry allows product identification, please check the box and list all Arthrex products that are currently in the registry.

If the registry does not allow product identification, please do not check the box and proceed to the next section.

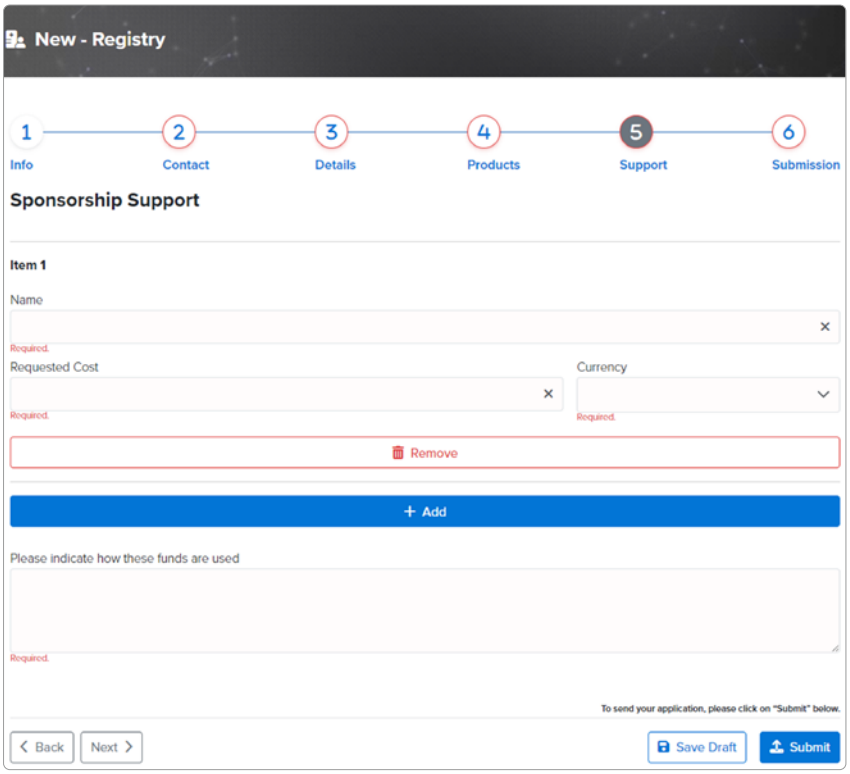


Sponsorship Support

If required, you can request sponsorship support. Please specify a name, the requested cost, and the currency for each item.

You can add several items using the + Add button.

If support is requested, please indicate how these funds are used.



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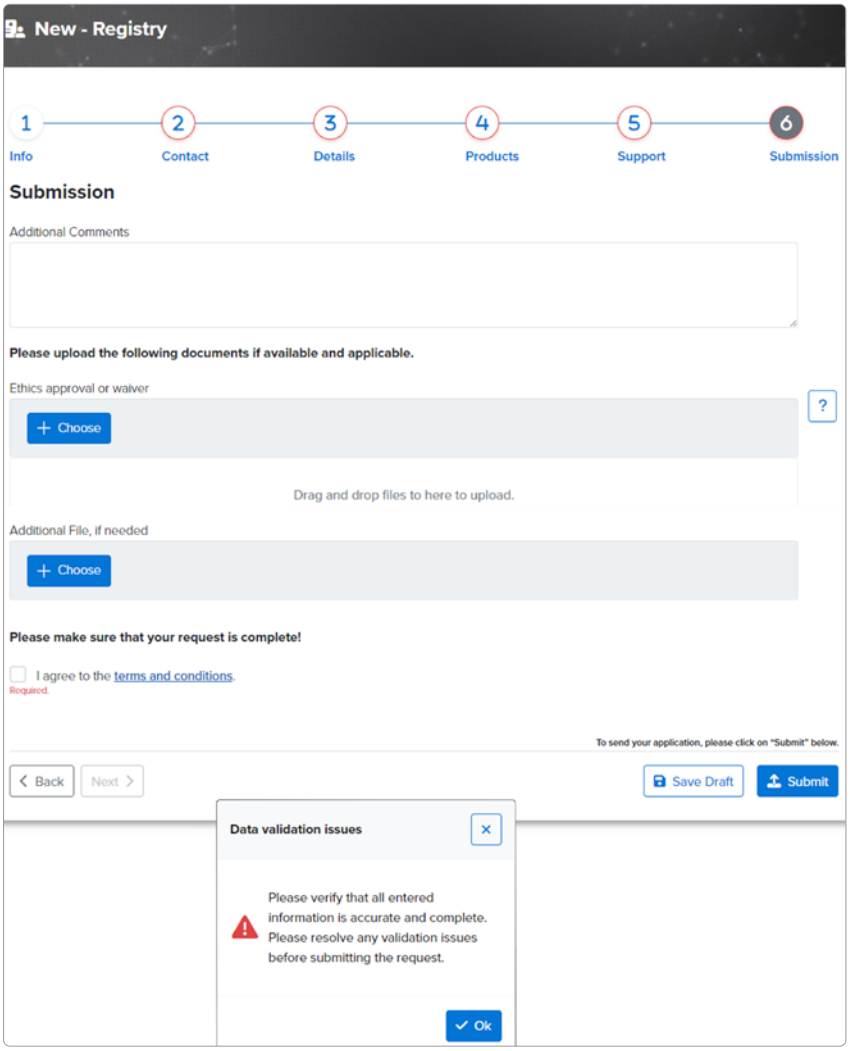
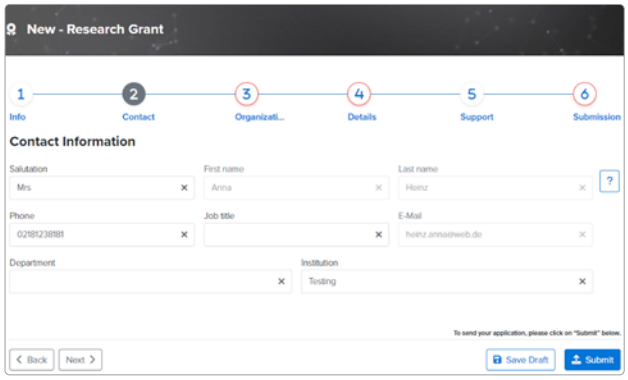


Research Grant Request

Contact Information

Please enter all your required contact information.

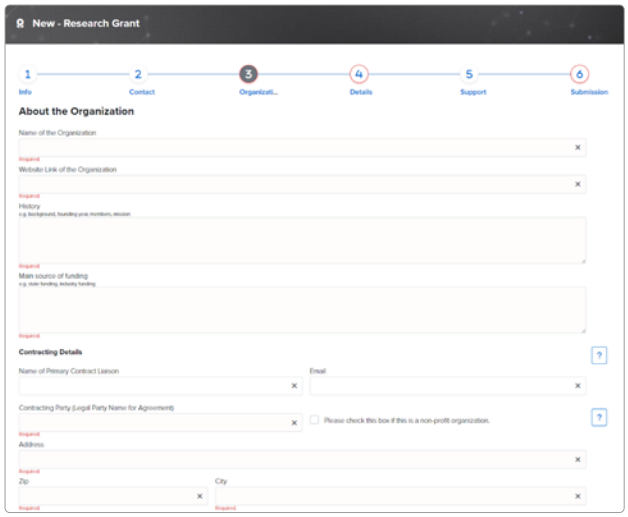
Name and email are automatically pre-filled from your account.



About the Organization

Please provide information about the organization.

We also ask you for contracting details, including a primary contract liaison and the contracting party.

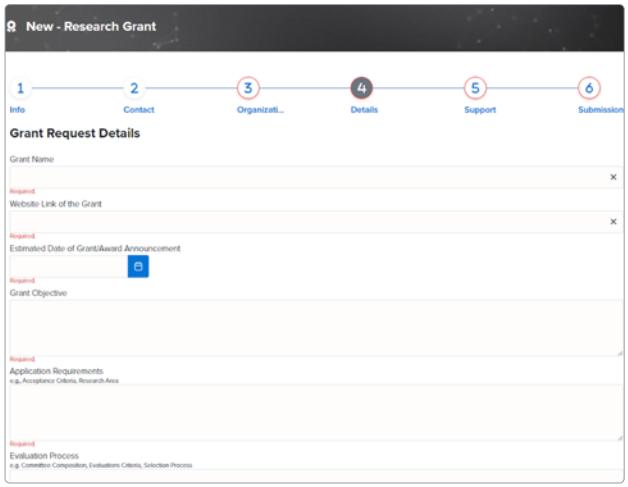


Grant Request Details

Please provide detailed information regarding the grant, such as the grant objective and application requirements.

Please also state what kind of output will be generated and shared with Arthrex.

For all requested dates, please provide estimates.



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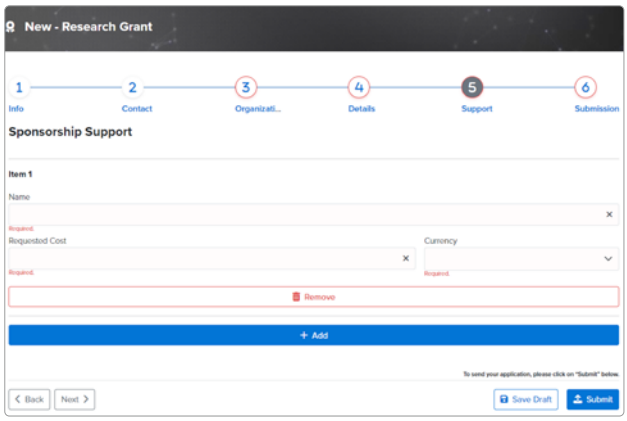

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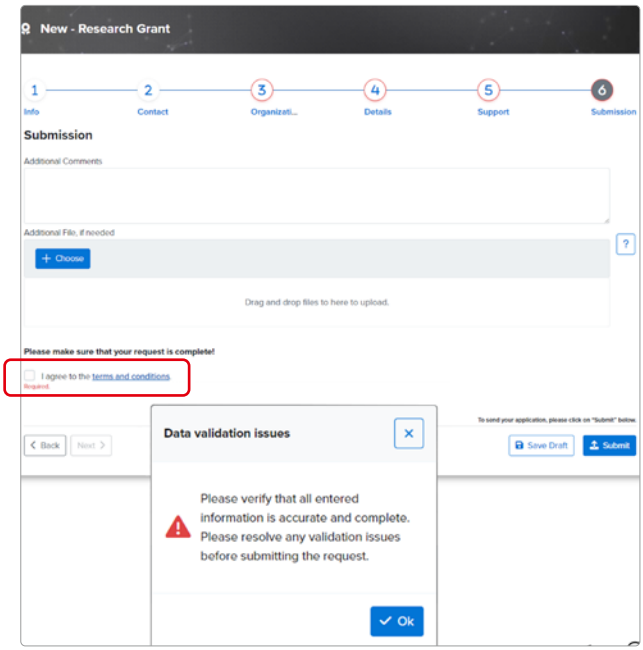

Review Process

What happens after submission of your request application?

- You will receive an **email** from the Arthrex Study Team **confirming your submission.**
- If clarifications are required, you will be notified by email.
- All **research requests will be reviewed by the Arthrex Global Grants Committee.**
  This process has been approved by the Arthrex Risk Management and Compliance Department.
  Decisions will be based on objective criteria such as, but not limited to, clinical relevance, scientific impact, methodological approach, proposed budget, study timeline, and overall compliance.
- An **email notification regarding the decision** will be sent after the Global Grants Committee meeting, usually within 12 weeks after submission.
- All **approved grant recipients are required to complete contractual agreement documentation.**

Questions?

If you need **help** with your research application, please contact the **Arthrex Study Team** at studies@arthrex.com.

Please be sure to include the **ID of the request** for which you need assistance.

Arthrex manufacturer, authorized representative, and importer information (Arthrex eIFUs)

US patent information