Plan Overview

A Data Management Plan created using DMPTool

Title: Mean arterial pressure reduction during the first ten minutes after general anesthesia induction using propofol bolus or triated target-infusion: superiority randomized controlled trial.

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Project abstract:

This study will test the hypothesis that the incidence of significant hypotension during the first 10 minutes, defined as drop in mean arterial pressure of 20% or more, is greater when using a general anesthesia induction using 2mg/kg of propofol followed by 2% of sevoflurane when compared to a general anesthesia using target-controlled infusion (Marsh model) followed by a 30% increase in target levels.

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Copyright information:

Mean arterial pressure reduction during the first ten minutes after general anesthesia induction using propofol bolus or triated target-infusion: superiority randomized controlled trial.

We expect to collect data from 120 patients using google forms and exporting to a XLSX format. Data will also be exported to CSV for long-term acceess.

All data will be collected using structured google forms, which will handle versioning and folder.

The study data scientist will check for consistency by verifying the range of numerical values (age must be included in 18-60 interval, MAP must be between 20 and 200mmHg, HR must be between 20 and 200, BIS must be between 0 and 100 and SR must be between 0 and 100).

A readme file will be published with the individual patient data, containing variables names and description.
Our data scientist will write the readme file and describe the study methodology. An RPubs link with a statistical analysis plan will be informed.

We predicted and informed about individual patient data sharing to the ethics comitee and we discuss about it with our voluntary patients. To protect all patients, the only way to identify an individual patient's data is by looking for his specific ID code printed in the informed consent. The ID code is mantained for posterior data withdraw purposes before IPD publication. No sensitive data will be stored.

Research team will own the data until it is published. We plan to publish under CC BY 4.0.

During the research, data will be backed up in paper forms and google forms by the data scientist. After it is published by Mendeley Data, paper backup will be destroyed.

No sensitive data will be collected and all data collected will be anonymized. Only data we intend to publish will be collected.

Data may be reused for sample size calculations, prior probabilities for future studies, systematic meta-analysis of IPD or any other health-related science improvement. All the data will be kept for as long as Mendeley data can. In case of Mendeley Data failure, we plan to share it again in another server.

Mendeley Data, free repository.

In Mendeley Data

CC BY 4.0

The study data scientist. Data will be open.

No additional resource.