



Canadian Society of Surgical Oncology

Canadian Surgical Oncology Research (CanSOR) Consortium

Terms of Reference

December 2020

Purpose

The Canadian Surgical Oncology Research (CanSOR) Consortium was created to foster and facilitate research initiated and completed by Canadian Surgical Oncologists and Trainees.

Responsibilities

The responsibilities of CanSOR members include fostering and mentorship, attained through discussions regarding prospective or potential project designs, sharing previous experiences or contacts regarding research methodologies and analyses, advice regarding managing barriers to study initiation or completion, identification of appropriate funding sources, and guidance regarding abstract and manuscript submission for greatest impact. Additionally CanSOR members will facilitate research success through sharing research ethics board applications for submissions at other centers, streamlining data-sharing agreements between institutions, sharing deidentified retrospective data, discussion of appropriateness of recruitment of patients from various centers to pilots or trials, referrals to specific renowned experts (clinical, statistical) for additional guidance or project development, and to act as a pathway towards larger trials and grant applications.

The disease site focus will include: breast cancer, soft tissue sarcoma, cutaneous malignancies, gastrointestinal cancers, hepatobiliary and pancreatic cancers, and peritoneal-based malignancies. All research methodologies will be supported.

Composition

CanSOR members must be active Canadian Society of Surgical Oncology (CSSO) members or active fellow/resident members. Trainees participating in meetings must have a staff surgeon who is a member of CSSO directly supervising the proposed project. Staff surgeons must hold privileges at a Canadian Health Care Facility.

Members of CanSOR must virtually attend at least 7 of 12 monthly meetings.

Each new study will have a Principal Investigator (PI), responsible for initial presentation to the group, updates or interim presentations, preparation and dissemination of abstracts and manuscripts, and final submission to a journal.

Co-investigators may have direct input into study design and execution, contribution of patients, analyses and will directly be involved in abstract/manuscript writing and editing.

Collaborators may have input into design, analyses and approval of final abstract/manuscript drafts.

All group members will be expected to partake in professional discussions regarding research projects, providing respectful comments and appropriate feedback to facilitate improvement of the project or manuscript. Members will also provide timely feedback to the PI for abstracts and manuscripts.

Meetings and Quorum

Virtual meetings will be scheduled on a monthly basis. A meeting link will be sent out in advance to members only. The meeting agenda will be set, finalized and approved by the Director and Co-Director and then circulated between the preceding meeting and 1 week before the upcoming meeting by the CSSO Executive Director. Last minute changes to the agenda will be minimized to allow for preparation/participation. Quorum for a given meeting will be = or > 50 % of membership for voting purposes.

No more than 2 projects/ideas will be discussed in any given meeting to allow for adequate time and focus. Summary/minutes of the meeting will be recorded by the CSSO Executive Director, and circulated to the membership in advance of the next meeting for review.

The first order of business at the next meeting will be approval of the summary/minutes from the prior meeting

Responsibilities and Terms (Director and Co-Director)

CanSOR will have a Director and Co-Director. Terms for each position will be three years. Both the Director and Co-Director must be staff physicians. The position of Director will be chosen by the voting members every three years. The Director will become the Co-Director following their term.

The Director and Co-Director will set meeting dates for the year, send out links for virtual meetings (facilitated through the CSSO Executive Director), set the meeting agenda, identify and address concerns with conduct and comments during meetings, confirm membership requirements, take attendance at meetings, and facilitate and moderate discussions. The Director and Co-Director will report directly to the CSSO Executive regarding progress of CanSOR at least twice annually.

Reporting and Publication

All publications of studies discussed as part of CanSOR society meetings will include the statement “and members of CanSOR (Canadian Consortium for Surgical Oncology Research)” in the author line.

The study’s Principal Investigator (PI) will choose authorship order.

The study PI’s institution will be allowed three authors to be specifically named (first author, and two other authors at the PI’s discretion).

All other centers that have contributed the most patients/content to the study may include up to two authors each (Co-investigators), and this will be confirmed by the PI.

All other group members that have contributed to the study may be authors or will be included in the “members of CanSOR” line (collaborators). All authors will provide edits and approve the final manuscript prior to publication.

Any publication or presentation related costs will be managed by the PI or PI’s institution.

Conflict of Interest

Members will abide by the CAGS conflict of interest policy and abide by it for the duration of their time involved in the consortium. At the beginning of each new governance term (2 years for new Director), the Conflict of Interest Policy will be reviewed with the consortium members and existing conflicts will be declared and addressed.

Review

The Terms of Reference above are subject to approval by the CSSO Executive. The CanSOR Consortium will review and make recommendations for changes every 2-3 years.

Date Created: December 3, 2020

Approved: ___May 6, 2021___

Next Scheduled Review: ___December 2023_____