# Overview

The Vivli-AMR Data Request Form is used to inform data contributors about your proposed analysis. Most data contributors do not require an approval step for accessing their AMR surveillance datasets, see our [Member’s pages](https://amr.vivli.org/members/ourmembers/) for more information.

Once your data request has been processed and you have downloaded the requested datasets, Vivli will publish on the [AMR website](https://amr.vivli.org/):

* Project Name
* Summary of the research
* Purpose(s) of analysis

If your analysis is published or presented, please inform Vivli by using the ‘Chat’ function in the data request or by emailing [amr@vivli.org](mailto:amr@vivli.org) and Vivli will publish a link to your publication on the AMR website. Please ensure you acknowledge the data contributors and Vivli in any public disclosures. We also periodically sweep the literature to confirm that public disclosures are not missed through self-disclosure and these are also disclosed through this process.

Additional information and videos on how to request datasets and get started is available here: <https://amr.vivli.org/resources/how-to-guides/>

When you have completed the form and are ready to move your data request forward, you must click the “Submit” button on the top right. If the Submit button is not enabled, that indicates that you haven't filled out all the required fields.

The button will be dark blue if you can submit  or light blue if it isn’t enabled.  If it is not enabled, look for a field description with red text which indicates that a required field needs to be completed.

**You will need the following information to complete your Vivli-AMR Data Request Form on the platform. Optional fields are italicized. Use this worksheet to collate all the necessary information with the help of your research team. If you have any questions, please submit them to the Vivli team via email** [**amr@vivli.org**](mailto:amr@vivli.org)**.**

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| --- | --- | --- |
| **Field** | **Details & Notes** | **Response to be entered into the online form** |
| Project Name | The Project name appears on the top of the data request |  |
| Lead Researcher  First and Last Name | Please provide the full name. |  |
| Lead Researcher  Email | A valid email address must be provided |  |
| *ORCID ID # - optional* | ORCID ID # is a persistent digital identifier that distinguishes you from every other researcher, and, through integration in key research workflows such as manuscript and grant submission, supports automated linkages between you and your professional activities ensuring that your work is recognized. |  |
| Lead Researcher Affiliation  Employer, Company, Research Institution or Primary Affiliation |  |  |
| Lead Researcher Location | Select the country where the analysis will be conducted  from the drop-down list |  |
| Summary | Provide a summary of your research in up to 300 words. |  |
| Purpose(s) of Analysis | Choose from the available categories – select all that apply.   * AMR trends for a country/region * AMR trends for a pathogen * AMR trends for a specific resistance mechanism including phenotype to genotype comparison * AMR trends for infection type of indication * AMR trends over different years * PK/PD * Inform Antimicrobial Stewardship * Other (elaborate below)   If you select ‘Other’, a separate box will open to allow free text |  |
| **Attestations -** You cannot submit your data request until you have checked the attestation checkboxes. | | |
| Terms of Use | Recipient agrees to the terms of use for using the AMR register platform | Checkbox |
| Public Disclosures Acknowledgement | Recipient agrees to include the following acknowledgement in any publication or presentation of the Analysis results. “This [publication or presentation] is based on research using data from \**data contributors name(s)*\*, obtained through <https://amr.vivli.org> | Checkbox |