

NETT=WORKINGS

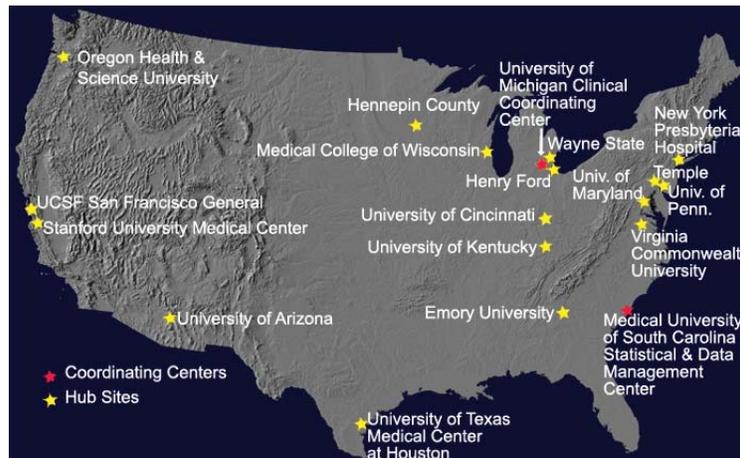
NEUROLOGICAL EMERGENCIES TREATMENT TRIALS (NETT) NETWORK

JUNE 2008

VOLUME 2, NO. 1

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NETT RESOURCES

Need to find the answer to a question after hours and not sure who to ask or where to look? We have many tools at your disposal to get you started.

NETT Resources Web Page

The resources webpage found at http://sitemaker.umich.edu/nett/nett_resources includes links to many resources including:

- The RAMPART Toolbox. The toolbox contains templates and forms to get you started on IRB, EMS and EFIC endeavors.
- Frequently Asked Questions (FAQs). The FAQ list grows each week as we receive more great questions from you.
- Links and Downloads. The links and downloads page includes resources such as Power Point presentations from previous meetings and articles relevant to the NETT.
- NETT General Education. The education web page includes links to study-specific training, and boasts modules and links to enriching educational topics such as Good Clinical Practice.

NETT Google Groups

The NETT Google Groups chat rooms are a great place to pose a question or find out what other NETT members are doing. You can join the NETT groups via our website at http://sitemaker.umich.edu/nett/discussion_board

Do you have a question but aren't sure who to contact? Visit the NETT directory at http://www.nett.umich.edu/nett/_directory, or send an email to nett-contact@umich.edu and someone will reply to assist you.

NETT Journal Club

The NETT Journal Club encourages thoughtful discussion of current issues in emergency medicine with a special emphasis on neurological emergencies. The Journal Club is open to all who are interested. The Journal Club meets the **3rd Wednesday of every month at 1:00 PM EDT** in the NETT Journal Club virtual conference room. Journal topics for this month include Bacterial Meningitis (JAMA) and Bells Palsy (NEJM). For more information visit the NETT website at <http://sitemaker.umich.edu/nettjournalclub/>

**Visit the NETT web site at
nett.umich.edu**

PLEASED TO MEET YOU...

Kay Vonderschmidt, MPA, NREMT-P



NETT EMS Coordinator
University of Cincinnati

I have been involved in Fire/EMS since I was 16 years old (starting as a volunteer). My career has spanned over 25 years and includes all levels of EMS including EMS Instructor. I am dual certified in Kentucky and Ohio as well as an Instructor in both States. I am also a National Registry certified Paramedic. Three years ago I left "field" EMS

for a full time position in EMS Research with University of Cincinnati, Emergency Medicine. I have a "green" belt in Six Sigma, a Masters in Public Administration, and in May 2008 I finished my second Masters in Emergency Management. My academic interests include EMS, disaster medicine, emergency research, ethics, and emergency management.

Irene Ewing, RN, BSN

Research Coordinator
University of Cincinnati



Irene Ewing is the Project Coordinator for the Cincinnati Hub. She began her research career when she joined the Greater Cincinnati Northern Kentucky (GCNKY) Stroke Team in 1998. Prior to research, her background was in critical care nursing and hospital management.

As a member of the GCNKY team she has been involved in a variety of research studies ranging from epidemiology to acute stroke trials. She is a member of the on-call team which covers all current acute stroke trials at 16 area hospitals through the GCNKY stroke team. She coordinated the NIH funded neurosurgical trial COSS, a multi-center randomized trial evaluating the efficacy of EC/IC bypass surgery in patients with carotid occlusion who have experienced a stroke. She also co-coordinated a large NIH-funded Epidemiology project which examined the incidence rates, causes, and treatment of ischemic and hemorrhagic stroke among different races. This trial involved coordinating a team of nurses who interviewed stroke patients and abstracted charts at 16 area hospitals. Irene has coordinated the Cincinnati effort for the NIH funded "Specialized Programs of Translational Research in Acute Stroke (SPOTRIAS)" grant. As part of her role in SPOTRIAS, she was the project manager for Dr. Pancioli's CLEAR Trial (The Combination approach to Lysis utilizing Eptifibatide And rt-PA in acute ischemic stroke). CLEAR was recently completed. The trial was a multi-center safety study of the combination of IV eptifibatide and IV low-dose rt-PA given to acute ischemic stroke patients within 3 hours of symptom onset.

Cheryl Herrmann, RN, BSN, JD, CNRN

Research Coordinator
Henry Ford Health System



Cheryl is the multi-site Research Coordinator for the Neurological Emergencies Treatment Trials for the Henry Ford Health System. She has worked for Henry Ford Hospital since earning her baccalaureate degree in Nursing from Michigan State University in 1987. Cheryl is extremely passionate about the Neurosciences, and has a certification in neuroscience nursing. Prior to working on the NETT project, she was the Nursing Director for the Acute Stroke Unit at Henry Ford Hospital, and played a lead role in assisting Henry Ford Health System in achieving JCAHO Primary Stroke Center Certification. In 2006, she received Henry Ford Health Systems' Focus on People Award for her role in achieving certification. In the same year, she was also nominated for the Nightingale Award for Community Service.

Cheryl also earned a law degree from the University of Detroit Mercy School of Law, and as such, has a strong interest in patient advocacy.

**WE'LL BE LOOKING FOR
YOU IN OUR NEXT ISSUE!**



There are various levels of EMS certification and it is important to the researcher to understand the educational and level of care differences between them.

First Responder – The First Responder is a 40-hour class and these individuals have a basic knowledge of CPR and AED, basic airway control, splinting and basic bandaging. Other specialty classes that build on the initial training include Advanced Cardiac Life Support, Advanced Medical Life Support, Basic or Pre-Hospital Trauma Life Support, Traumatic Brain Injury, Advanced Burn Life Support, Basic and Advanced Disaster Life Support and many more. All levels of EMS are heavily regulated with continuing education that is mandated to continue their certification every two or three years depending on the state where they are certified.

Emergency Medical Technician – Basic (EMT-B or EMT) is a 130 hour class with 20 hours of practical “ride time” with an ambulance service. This class is taught at the freshman college level and the person has to be 18 years old to enroll for the class. The EMT is taught CPR, AED, and Airway with many systems adding Advanced Airway such as supra-glottic airways and intubation. Other skills are splinting, hemorrhage control, checking a blood glucose level before administering oral glucose, about to assist a patient with their NTG or inhaler and in some states able to administer CPAP and “nebs” such as Albuterol.



EMT – Intermediate or Advanced EMT – as each level builds on the next these students have 400 – 500 hours of classroom and the ride time varies by state. They get a better understanding of anatomy and physiology, airway with intubation skills, CPR with AED, IV and IO skills with the ability to give Dextrose and Glucagon IM. They are also able to give ASA and NTG to cardiac patients and in some systems Narcan for overdoses, CPAP and Albuterol “nebs” also.

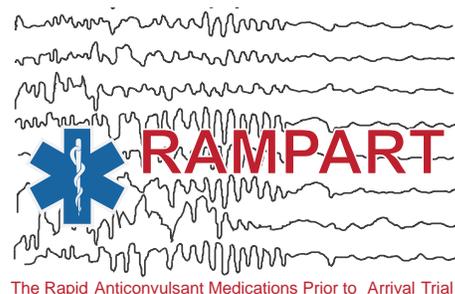
EMT-Paramedic or “Paramedic” – This is usually 800 to 1200 hours with 200 to 300 hours of practical time in the hospital and 200 to 500 hours of practical “ride time” depending on the state. Paramedics have more anatomy and physiology and many of these classes are taught within an Associate’s degree program

at a University. They may administer many medications, have the ability to manage an airway aggressively if needed, and have to follow ACLS guidelines for cardiac patients.

EMS Administration – Many EMS administrators are EMS providers with additional administrative classes. These classes can be part of a degree program or may be within a fire or EMS academy recognized class. There are new proposals that move towards associate degrees and above for EMS providers and administrators.



There is a lot going on here at the NETT-CCC preparing for RAMPART to begin and ALIAS to resume. We know that you have many things going on at your sites as well. In an effort to assist with anything sites need during this time, Donna Harsh and Erin Zaleski will be reaching out to Study Coordinator(s) at each site to set up an informational phone call. We hope to hear how things are going at the Hub-Spoke complexes and answer any questions you may have. Please look for an email from Erin in the coming weeks to schedule a time for your site.



**Have you completed a RAMPART milestone task?
Don't forget to tell us about it at nett-milestone@umich.edu**

I have completed 14 of 17 hub initiation visits and thank all of you for your hospitality and allowing me to gain a better understanding of your hub/spoke system. I will be on the doorsteps of the remaining sites in July and August. It has been a pleasure to get to know you and understand the complexities of your hub. In the NETT structure where all hubs build their own hub/spoke system I always leave an initiation visit with a new found admiration for your abilities to create a dynamic, working model. Each hub has found challenges along the way and has found creative ways to resolve these challenges. Keep up the good work!

There are a lot of amazingly organized study coordinators at these sites. So I thought we would pass on some of their great ideas.

- The CRF worksheets that need to be completed by the ED personnel are printed on one color paper, the CRFs to be completed in the inpatient area are another color paper and the study coordinator follow up visits are printed on a third color paper.
- Packets in file folders or large envelopes contain the informed consent form, CRF worksheets and orders for the first 24 hours.
- If pharmacy orders can not be kept in the ED file folders they can be attached to the drug box located in the pharmacy or the pharmacy file. The physician will have to complete the order before it is filled. Please don't store in study coordinator's office – adds time.

Preparing Your 1572's

Each spoke needs its own 1572. The only exception is if multiple spokes have the same PI and all the same Co-I's, AND have the same IRB. In this case, be sure to list all relevant facilities and labs in boxes 3 and 4. This helps assign roles and collect the appropriate documents to get your site regulatory-ready. When entering 1572's in WebDCU, please upload the document one time for the site PI. The Site Manager will then review the document. Once accepted, you can use the "Copy+Edit" function to save time when loading the 1572 for everyone else listed on the document. Simply return to the site PI's 1572 in WebDCU and Click on "Copy+Edit" to add the next person on the 1572, then save. Repeat until all individuals have a 1572 associated with their name for that spoke.

Teleconference and Virtual Conference Room Etiquette: Avoiding Faux Pas

- * When using a speakerphone please put the phone on mute to avoid background noise. If you are not able to mute the phone, consider closing your office door and avoid making disturbing noises such as shuffling papers, typing on a keyboard or talking to others in the room.
- * Consider your location or surroundings when using a cell phone. If the background noise is out of your control (i.e., airports, subways or the Starbuck's drive thru) mute your phone during the conference.
- * Turn off Blackberries or other PDAs during a conference call to avoid interference on the teleconference line. (Sorry to all the addicts out there).
- * If you need to take a call (during the meeting) do not keep the line open to the conference on hold as many phone systems will play music – I'd be willing to bet most of us are not fans of elevator music!
- * Resist the temptation to click on the windows known as "pods" in the Virtual Conference Room. Your actions affect everyone's view. This can be especially distracting when there is a presentation taking place.
- * You are more than welcome to explore the Virtual Conference Room when there is not a meeting scheduled – check the calendar in CTools for meeting schedules.