REMINDER!!!
Monthly Coordinator Call
The next Coordinator call is scheduled for Thursday, March 16th at 10.30am
Neuro Teleconference Line: USA Toll-Free: (877)848-7030
Access Code: 3386580

Enrollment Update
- iDEF – 229
- MISTIE III – 450
- CREST 2 – 515
- Telerehab in Stroke – 79
- DEFUSE 3 – 134
- POINT – 4132

Reminder to review and complete SOPs forms!
We will also be in touch to have Conflict of Interest forms updated.
RCC24 is currently enrolling in Defuse 3, MISTIE III, POINT and Crest-2

Everyone has been busy with enrollments and activating new studies.
Keep up the momentum!

We will continue schedule satellite site visits. We have two coming up within the next two months, and three more being scheduled!

The renewal grant will be submitted in the fall. Participation is more important than ever!

At the end, please find the latest bi-weekly StrokeNet newsletter. National Coordinating Center.
## Trial Proposal Status

<table>
<thead>
<tr>
<th>Project Name</th>
<th>Protocol PI</th>
<th>Prevention/Acute/Recovery</th>
<th>Status Update</th>
</tr>
</thead>
<tbody>
<tr>
<td>ARCADIA</td>
<td>Hooman Kamel, David Tirschwell, Mitch Elkind, Will Longstreth</td>
<td>Prevention</td>
<td>Approved for funding 2017</td>
</tr>
<tr>
<td>MOST</td>
<td>Opeolu Adeoye, Andrew Barreto, Joe Broderick, James Grotta</td>
<td>Acute</td>
<td>March re-submission; currently revising the grant</td>
</tr>
<tr>
<td>ALISAH 2</td>
<td>Jose Suarez</td>
<td>Acute</td>
<td>Pending score/critiques</td>
</tr>
<tr>
<td>IMPACT</td>
<td>Andrew Naidech</td>
<td>Acute</td>
<td>Discussing reviews with their team via teleconference 17-April.</td>
</tr>
<tr>
<td>CREST-P</td>
<td>Brajesh K Lal, Ronald Lazar, Randolph Marshall</td>
<td>Prevention</td>
<td>Pending score/critiques Score not in funding range</td>
</tr>
<tr>
<td>CREST-T</td>
<td>Brajesh K Lal, Ronald Lazar, Randolph Marshall</td>
<td>Prevention</td>
<td>Pending score/critiques Score not in funding range</td>
</tr>
<tr>
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<td>Protocol PI</td>
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<td>Status Update</td>
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</tr>
<tr>
<td>CREST-H</td>
<td>Randy Marshall</td>
<td>Prevention</td>
<td>Brief presentation at the Houston Network Meeting in February; likely to be funded.</td>
</tr>
<tr>
<td>STEPSS (Dose Response Aerobic Exercise in Subacute Stroke)</td>
<td>Sandra Billinger</td>
<td>Recovery</td>
<td>Submitted October 2016; March 2017 study section</td>
</tr>
<tr>
<td>SATURN</td>
<td>Magdy Selim</td>
<td>Prevention</td>
<td>Submitted October 2016; March 2017 study section</td>
</tr>
<tr>
<td>TRANSPORT</td>
<td>Wayne Feng, Gottfried Schlaug</td>
<td>Recovery</td>
<td>Submitted October 2016; March 2017 study section</td>
</tr>
<tr>
<td>I-WITNESS</td>
<td>Lee Schwamm, Ona Wu, Steve Warach, Larry Latour, Shlee Song</td>
<td>Acute</td>
<td>February 2017 submission</td>
</tr>
<tr>
<td>Sleep SMART (C-PAP)</td>
<td>Devin Brown</td>
<td>Prevention</td>
<td>March 2017 re-submission</td>
</tr>
<tr>
<td>ARREST</td>
<td>Robert Brown, James Torner, David Hasan</td>
<td>Prevention</td>
<td>July 2017 re-submission</td>
</tr>
<tr>
<td>VERITAS II</td>
<td>Sepideh Amin-Hanjani</td>
<td>Prevention</td>
<td>June 2017 grant submission</td>
</tr>
<tr>
<td>ASPIRE (formerly SCORPION)</td>
<td>Kevin Sheth</td>
<td>Prevention</td>
<td>June 2017 grant submission</td>
</tr>
<tr>
<td>IRIIS</td>
<td>Warren Lo, Sharon Ramey</td>
<td>Recovery</td>
<td>Targeting June 2017 submission</td>
</tr>
<tr>
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<td>Protocol PI</td>
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</tr>
<tr>
<td>PICASSO</td>
<td>Marc Chimowitz</td>
<td>Prevention</td>
<td>Redesigning as Phase I, with plan to submit in either June 2017 or October</td>
</tr>
<tr>
<td>PHAST</td>
<td>Kate Amlie-Lefond, Michael Rivkin, Joan Cox Gill</td>
<td>Acute</td>
<td>Targeting June 2017 submission</td>
</tr>
<tr>
<td>CRISIS</td>
<td>Brian Hoh</td>
<td>Prevention</td>
<td>Targeting June 2017 submission; going back to ESC with revisions sometime in March.</td>
</tr>
<tr>
<td>ETHER</td>
<td>Stephan Mayer</td>
<td>Acute</td>
<td>Targeting June 2017 submission</td>
</tr>
<tr>
<td>iTREAT</td>
<td>Andrew Southerland</td>
<td>Acute</td>
<td>Targeting June 2017 submission</td>
</tr>
<tr>
<td>RAFT</td>
<td>Truman Milling, Steve Warach</td>
<td>ACUTE</td>
<td>Targeting June 2017 submission</td>
</tr>
<tr>
<td>CAVIS</td>
<td>Mark Harrigan</td>
<td>Prevention</td>
<td>Targeting June 2017 submission</td>
</tr>
<tr>
<td>PreLIMBS II</td>
<td>Sebastian Koch, Nestor Gonzalez, Neeraj Chaudhary</td>
<td>Acute</td>
<td>In concept development</td>
</tr>
<tr>
<td>SEACOAST 1</td>
<td>Radoslav Raychev, Dimitar Arnaudov, David Liebeskind, Jeffrey Saver</td>
<td>Acute</td>
<td>In concept development</td>
</tr>
<tr>
<td>TESLA</td>
<td>Albert Yoo, Sam Zaidat</td>
<td>Acute</td>
<td>In concept development</td>
</tr>
<tr>
<td>ASSIST</td>
<td>David F. Kallmes, (Radiology) Alejandro Rabinstein, (Neurology) Jeffrey Pasternak, (Anesthesiology) Rickey Carter, (Biostatistics)</td>
<td>Acute</td>
<td>In concept development</td>
</tr>
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<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>DEFUSE 4</td>
<td>Maarten Lansburg, Greg Albers</td>
<td>Acute</td>
<td>In concept development; ASWG scheduling discussion.</td>
</tr>
<tr>
<td>PRECISE MRI-T2</td>
<td>Natalia Rost, Shyam Prabhakaran, Rebecca Gottesman, Clinton Wright</td>
<td>Prevention</td>
<td>In concept development</td>
</tr>
<tr>
<td>RISiS</td>
<td>Julius Fridrikkson, Ron Lazar, Ed Jauch, Jordan Elm, Leonardo Bonilha</td>
<td>Recovery</td>
<td>PPIs unsure whether they will resubmit.</td>
</tr>
<tr>
<td>Tempo-EMS</td>
<td>Nerses Sanossian, William Meurer, Jeffrey Saver, David Hess</td>
<td>Acute</td>
<td>Triaged at November 2016 Study Section</td>
</tr>
<tr>
<td>FURRThER</td>
<td>Bernadette Boden-Albala</td>
<td>Prevention</td>
<td>Discussed with ESC, have not received permission to move forward in its current form</td>
</tr>
<tr>
<td>PreLIMBS</td>
<td>Sebastian Koch</td>
<td>Acute</td>
<td>Possible July 2017 re-submission with PreLIMBS II</td>
</tr>
<tr>
<td>Bozoki study</td>
<td>Andrea Bozoki</td>
<td>Prevention</td>
<td>Discussed with ESC, have not received permission to move forward in its current form</td>
</tr>
<tr>
<td>DOSER</td>
<td>Alex Dromerick</td>
<td>Recovery</td>
<td>Discussed with ESC, have not received permission to move forward at this time Deferred</td>
</tr>
<tr>
<td>Contralateral Rehab</td>
<td>Jayme Knutson</td>
<td>Recovery</td>
<td>Discussed with ESC, have not received permission to move forward at this time More discussion needed</td>
</tr>
<tr>
<td>Ankle rehabilitation in acute stroke</td>
<td>Li-Qun Zhang</td>
<td>Recovery</td>
<td>In early stages of concept development Requested update 21-Sep Requested update 4-Nov</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>*After RWG review, Dr. Cramer indicated this is in the PIs court;</td>
</tr>
<tr>
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</tr>
<tr>
<td>PATCH</td>
<td>Maarten Lansberg</td>
<td>Prevention</td>
<td>Inactive due to non-response from device company.</td>
</tr>
<tr>
<td>URIC</td>
<td>Enrique Leira</td>
<td>Acute</td>
<td>Inadequate data to support the trial in its current form. Needs published work prior to submission.</td>
</tr>
<tr>
<td>ICTuS 3</td>
<td>Pat Lyden</td>
<td>Acute</td>
<td>Indefinite hold.</td>
</tr>
<tr>
<td>NORRIS</td>
<td>Walter Kernan</td>
<td>Prevention</td>
<td>Not approved to move forward at this time.</td>
</tr>
<tr>
<td>ETOSHA</td>
<td>Tanya Turan</td>
<td>Prevention</td>
<td>Will not move forward in its current form.</td>
</tr>
<tr>
<td>Acute Biomarker</td>
<td>Robert Meller</td>
<td>Acute</td>
<td>Not coming into StrokeNet</td>
</tr>
<tr>
<td>SOPRANO</td>
<td>Karl Meisel, Wade Smith</td>
<td>Prevention</td>
<td>Not approved to move forward</td>
</tr>
</tbody>
</table>
### E. New Project Development Progress

<table>
<thead>
<tr>
<th>Project</th>
<th>Type</th>
<th>Concept Synopsis Approved by NINDS ESC</th>
<th>Feasibility Assessment</th>
<th>Grant Submit to NINDS</th>
<th>Scientific Peer Review</th>
<th>Awarded</th>
<th>Protocol Submit to IRB</th>
<th>IRB Approval</th>
<th>First Site Released</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DEFEAS 3</strong></td>
<td>5/7/2014</td>
<td>32</td>
<td>31</td>
<td>102</td>
<td>11/10/2014</td>
<td>57</td>
<td>1</td>
<td>15</td>
<td>18</td>
</tr>
</tbody>
</table>

**Prevention (31.0%)**

- **VERTIC II**: 8/10/2015 | 84 | 11/15/2016 | 11/15/2016

**Recovery (15.0%)**


Legend:
- **Active**
- **Inactive**
- **Awarded**
- **# of days since previous milestone**

Monthly Update

8-March 2017
StrokeNet Enrollment Update

Telerehabilitation in Stroke – 79/124
DEFUSE 3 – 130/476
iDEF – 229/294 subjects
MISTIE III – 450/500 subjects
CREST 2 – 515/2480 subjects

StrokeNet Trial Updates

From the DEFUSE 3 Team: Thank you to all those who attended the DEFUSE 3 IM in Houston. It was a great turn-out, and nice to see everyone!

*Reminder to all investigators who perform the DEFUSE 3 endovascular procedures - **IA tPA is prohibited in DEFUSE 3**. There have been 2 reported cases of use of IA tPA thus far. We are developing a Corrective Action Plan (CAP) to help avoid any future non-compliance. Sites should be receiving the CAP details soon.

From the Telerehab Team: Thanks to all who participated in-person and via teleconference at our Investigator Meeting in Houston. Enrollment continues to move forward; we are halfway to our targeted goal! Watch for a new telerehab system software update to stabilize system performance, if you have not received this already.
Randomizations (236 CEA; 279 CAS) as of 1-Mar 2017

Centers of which 44 are StrokeNet Sites

SAVE THE DATE – CREST-2 Medical Management Physicians

The iDEF Executive Committee would like to thank ALL iDEF investigators for their hard work & commitment to the study. As of March 2nd, 228 subjects have been enrolled. We are on target to finish recruitment before the end of this year. Only, 66 more subjects to go. Please, continue your hard work!

NINDS News

PROCESS FOR REQUESTING CARRYOVER

WHEN TO SUBMIT
When funds are needed and FFR/FSR has been received and accepted. Since there is often some time lapse between FFR/FSR submission and acceptance, it may be helpful for grantee to send the GMB specialist an e-mail when the FFR/FSR is submitted. Requests are reviewed and processed as they are submitted. For end of FY requests, submissions should be submitted by the end of August to ensure processing before the close of FY.

WHAT TO SUBMIT
Email an attachment signed by Business Office & PI to the NINDS GMB Specialist with a copy to the Administrative Program Official to include the following:

• Scientific Justification (explain scientific need for $ requested)
• Plan for use of funds (including timeline for use of requested funds)
• if request is for >25% of current yr $, explain why funds were not fully expended in the prior year

Detailed budget for carryover requested amount only (including F&A) with itemized budget justification indicating how the funds will be spent - use budget form pages http://grants.nih.gov/grants/funding/phs398/phs398.html

APPROVAL PROCESS
GMB Specialist will review & obtain the Administrative Program Official’s concurrence.
PLEASE NOTE: This process may take up to 60 days.

PROCES FOR REQUESTING RELEASE OF RESTRICTED FUNDS

WHEN TO SUBMIT
• When the performance milestone specified in your NGA has been reached.

WHAT TO SUBMIT
• Email an attachment signed by Business Office & PI to the NINDS GMB Specialist with a copy to the Administrative Program Official.

• Include the following:
  a) Specify the milestone(s) accomplished.
  b) Indicate when the milestone was reached and provide supporting documentation (eg. enrollment reports or other related materials).
  c) Request release of funds or lift restriction.

APPROVAL PROCESS
• GMB Specialist will review and obtain the Administrative Program Official’s concurrence.

• If approved, a revised NGA will be issued removing restrictions.

PLEASE NOTE: This process may take up to 30 days.

Upcoming Conferences and Seminars

EXTENSION FOR COMMUNITY HEALTHCARE OUTCOMES

Project ECHO

Attention MD’s, DO’s, APC’s, RN’s, EMS services and other allied health professionals!! In association with the UUHC Department of Neurology – Stroke Center, two former StrokeNet fellows, Dr Peter Hannon and Dr. Lee Chung (both faculty at University of Utah), are hosting a COST FREE, quarterly, interactive, live video conference to review interesting, recent stroke cases that will provide clinical insights across the care spectrum and other educational opportunities for interested providers. Sessions will be hosted by
Stroke Center experts. Providers may claim 1.0 AMA PRA Category 1 CME credit per session attended. Nursing Contact hours are also available.

To join the mailing list for these video conferences, please email Justin Shofner at Justin.shofner@hsc.utah.edu or Jaleen Smith at jaleen.smith@hsc.utah.edu.

**This is an easy and FREE way for your facility’s staff and physicians to earn Continuing Education credits over a lunch hour!**

http://www.healthcare.utah.edu/echo

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**Upcoming NIH Seminars:**

May 3-5, 2017  
New Orleans 2017 – NIH Regional Seminar  

October 25-27, 2017  
Baltimore 2017 – NIH Regional Seminar  
[https://regionalseminars.od.nih.gov/baltimore2017/](https://regionalseminars.od.nih.gov/baltimore2017/)

*For more information on these and other conferences and seminars, please see:  
[http://nihstrokenet.org/in-the-news](http://nihstrokenet.org/in-the-news)*

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**Training – Programs and Courses**

**TRANSCENDS Scholars Program**  
(Training in Research for Academic Neurologists to Sustain Careers and Enhance the Numbers of Diverse Scholars)

The AAN is collaborating with the Medical University of South Carolina (MUSC) to offer the **TRANSCENDS** (Training in Research for Academic Neurologists to Sustain Careers and Enhance the Numbers of Diverse Scholars) Scholars program. This program is funded by a National Institutes of Health (NIH) R25 grant and is being administered by MUSC and the AAN. The TRANSCENDS program is designed to train and mentor promising early-career neurologists to conduct high-quality neurologic research and achieve a successful academic career. Eligibility is limited to those who are disabled and/or belong to an underrepresented minority in neurology including Black/African American, Hispanic, Latino, Native American, Pacific Islander, Native Alaskan, or Hawaiian, and are in any of the following career stages: a) **Fellows in a formal neurology sub-specialty training program;** b) **Neurology faculty three years or less from first academic appointment,** or c) **Neurologists five years or less from completion of residency.**

- Application Deadline: February 22, 2017, at 11:59 p.m. ET.
- Applications received after February 22 will not be considered.
• New scholars will be notified by March 15, 2017.

Please find more information and application details at: https://www.aan.com/research-and-awards/transcends-scholar-program-application/?utm_source=Informz&utm_medium=Email&utm_campaign=17+TRANSCE_NDS+1&_zs=h8mgd1&_zl=qDCX3

**NIH StrokeNet Employment Opportunities**

**AUGUSTA UNIVERSITY MEDICAL CENTER (FORMERLY MEDICAL COLLEGE OF GEORGIA) - NEUROINTENSIVIST POSITION**

The Department of Neurosciences at the Augusta University Medical Center (former Medical College of Georgia) is looking for a neurologist at the Assistant, Associate or Professor level who is board eligible/certified in neurocritical care to join our growing Division of Neurocritical Care, which is a collaborative effort between the Departments of Neurology, and Neurosurgery. This position requires clinical skills and training in primary neurocritical care management. It involves attending on a busy academic neurocritical care service in AUMC’s Neuro-ICU, which provides primary management for all ICU-level neurology and neurosurgery patients, as well as consults for trauma patients. The candidate will participate in the teaching and training of trainees on the Neurocritical care service, including neurosurgery, and neurology residents, anesthesia and pulmonary critical care fellows, and stroke fellows. Augusta University Medical Center has a 20-bed state of the art Neuro-ICU in Augusta, GA. The unit is outfitted with multimodality monitor and continuous EEG, and is staffed by the neurocritical care attending, vascular neurosurgeons, stroke neurologists, critical care pharmacists, nutritionists, and rehab specialists. Candidates should have completed a Neurocritical care fellowship in an accredited institution and be board certified or board eligible in Neurocritical Care, and must hold an active Georgia medical license at the time of appointment. Candidates will be appointed in the Department of Neurology. Our departments are committed to teaching and research, in addition to providing outstanding patient care.

Interested candidates should send a CV and brief statement of interest, and three letters of reference to:

David Hess, M.D.
Department of Neurology - Chairman
dhess@augusta.edu

or

Klepper Alfredo Garcia, M.D.
Neurocritical Care Division
klgarcia@augusta.edu
ASSISTANT PROFESSOR OF CLINICAL VASCULAR NEUROLOGIST  
Department of Neurology, Stroke Division  
UNIVERSITY of CINCINNATI, College of Medicine

The Department of Neurology and Physical Medicine and Rehabilitation at the University of Cincinnati has an exciting opportunity for an outstanding clinically-oriented Vascular Neurologist at the level of Assistant Professor. The practice will consist of outpatient clinic, inpatient service, stroke call (including telemedicine), and teaching of residents and fellows from several different disciplines. Collaborative research opportunities are also available, but are not required.

The candidate will join an internationally renowned, highly collaborative multidisciplinary stroke program:

• Currently the team is comprised of 8 Vascular Neurologists, 5 Emergency Medicine Physicians who also take stroke call, 9 Neurocritical Care Intensivists, 4 Interventionists from Neurosurgery, Neurology, and Radiology, 2 Cerebrovascular/Endovascular Neurosurgeons, a large cohort of extremely experienced Research Coordinators, and many others. UC has a 20-bed NSICU as well as a 10-bed variable acuity unit, and is a Joint Commission-Certified Comprehensive Stroke Center.

• 400 ischemic stroke patients treated with reperfusion therapies in 2015 within our large network of hospitals within the Cincinnati region. Our multi-center approach to acute stroke treatment is unique and high-volume.

• A large, well-funded NIH-funded stroke research program, ranging from clinical trials in acute treatment, prevention, and rehabilitation/recovery, to epidemiology studies in health disparities, to molecular genetics stroke research. The University of Cincinnati is the National Coordinating Center for the StrokeNet under the leadership of Joseph Broderick, MD, and we are also a Regional Coordinating Center for StrokeNet as well.

MINIMUM QUALIFICATIONS: Must have an MD or DO, completed an ACGME-approved Vascular Neurology fellowship program, and be BE/BC.

APPLICATION PROCESS: Complete an Applicant Profile at https://jobs.uc.edu and upload your CV/Resume. Officially apply to Position # 15241 and include a brief statement of interest in the Additional Documents section.

INTERVENTIONAL NEUROLOGIST  
University of Cincinnati

UC is one of the largest employers in the Cincinnati region, employing over 15,000 full time and part time faculty, staff, and student workers. The College of Medicine, Department of Neurology and Rehabilitation Medicine is recruiting a full-time Assistant Professor of Clinical – Geo faculty member with training and proficiency in Neurointerventional procedures.
This individual will have a full faculty appointment at the University of Cincinnati, College of Medicine, with academic responsibilities to include: the teaching of medical students, and supervision of residents, fellows, and APPs. The faculty member will be expected to contribute to the group’s leading research in cerebrovascular disease.

This faculty member will be joining a growing neurointerventional team composed of an endovascular neurosurgeon, an interventional neuroradiologist, and an interventional neurologist. This team works collaboratively to care for patients with complex cerebrovascular disease as part of the University of Cincinnati Neuroscience Institute. This individual will work closely with hospital-based acute care teams, comprised of 8 vascular neurologists, 12 neurointensivists, 6 neurosurgeons, a growing team of APPs, and a robust academic training program. Our internationally-recognized stroke team combines multidisciplinary expertise across vascular neurology and emergency medicine to provide continuous acute stroke coverage for hospitals in the greater-Cincinnati/Northern Kentucky region. Our intervention team is the only team providing neuro-intervention in the region. The University of Cincinnati’s national coordinating role for StrokeNet places our team at the forefront of transformative stroke research.

Responsibilities: Neurointerventional clinical responsibilities will include daytime and overnight coverage of the neuro angiography suite, as well as backup coverage in accordance with comprehensive stroke center requirements. Anticipated call responsibilities for the successful applicant will be roughly 1:4 and every 4th weekend, though this may change as the team grows. Additional clinical responsibilities will depend on the successful applicant’s foundational clinical training.

Team: The University of Cincinnati Neuroscience Institute includes strong areas of Neurology, Neurosurgery, Neuroradiology, and Physical Medicine and Rehabilitation, which provides integrated care across the neurologic care continuum.

The University of Cincinnati is a premier, public, urban research university; ranked as one of America’s top 26 public research universities by the National Science Foundation. U.S. News has ranked UC in the Top Tier of America’s Best Colleges. The Chronicle of Higher Education calls UC a “research heavyweight”. Forbes, Delta Sky and Travel + Leisure magazines have named UC one of the most beautiful campuses. #HottestCollegeInAmerica

The University of Cincinnati Medical Center is a 498-bed hospital, designated as both a Comprehensive Stroke Center and an Adult Level I Trauma Center. Emergency Department volume approaches 86,000 per year. There is a dedicated 20-bed Neuro Intensive Care Unit staffed by fellowship-trained neurointensivists and neuro critical care fellows. Infrastructure includes a GE Biplane neuro-angiography suite; a second dedicated Biplane suite has been approved by the hospital. Additional single-plane angiography suites are available for emergent use across the institution.

Minimum qualifications:
- M.D., D.O., or commensurate international medical degree
- Accredited fellowship training in vascular neurology or neuro critical care, followed by fellowship training in neuro interventional surgery
- Board certified/eligible in Neurology
If applicable, board certified/eligible in vascular neurology or neuro critical care.

Contact:

Dawn Kleindorfer, MD
Professor, Department of Neurology
University of Cincinnati
260 Stetson Street, Suite 2300
Cincinnati, OH  45267
Phone - 513.558.5478

Email: kleinddo@ucmail.uc.edu

For more information about StrokeNet employment opportunities, please visit http://nihstrokenet.org/education/employment-opportunities

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**Coordinator Webinar**

There next Coordinator Webinar will be Wednesday, 22-March, 2017. Topic TBA.

To join Coordinator Webinars: [https://nihstrokenet.adobeconnect.com/coordinator/](https://nihstrokenet.adobeconnect.com/coordinator/)

Please enter as a guest, then add your first and last name or email address. For Audio: Dial-In Number: (877) 621-0220 Passcode 434578.

Please send suggestions for future coordinator webinar ideas to beckmare@ucmail.uc.edu.

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**Professional Development Webinar**

*Professional Development Webinars are a requirement for the NIH StrokeNet Trainees*

**Presentations:**

1:00 PM – Omar Hussein – Ohio State University – Platelet Reactivity after Acute Ischemic Stroke Event (PRAISE)

1:30 PM – Neha S. Dangayach, MD – Mt. Sinai – Cognitive Reserve, Brain Reserve and Resilience as Determinants of Recovery after Severe Stroke

2:00 PM – Jessica Barth, MS, OTR/L – Medstar – Arm Movement after Acute Stroke (Tentative Title)

**When:**

Tuesday, March 14, 2017 – 1:00 PM ET

**Moderator:**

TBA
To join the meeting: https://nihstrokenet.adobeconnect.com/pdw/ To take part in the conversation you must dial in. 1 (877) 621-0220 Passcode Number: 190825

Grand Rounds

Grand Rounds are a requirement for the NIH StrokeNet Trainees, however all are welcome to participate.

Presenter: Pooja Khatri, MD – University of Cincinnati
Pat Lyden, MD Cedars Sinai

Presentation: Gloves Off for Acute Stroke Management; Fellow Case Presentations to two Stroke Experts

When: Thursday, March 23, 2017 – 4:00 PM ET

Moderator: Randy Marshall, MD

To join the meeting: https://nihstrokenet.adobeconnect.com/grandrounds/ Please enter as a guest, then your email address or complete name. To take part in the conversation you must dial in. 1 (877) 621-0220 Passcode Number: 190825

Steering Committee Call

The next Steering Committee call will be 8-March, 2017, at 12 noon ET.

StrokeNet Network Meetings 2017

The presentations from the 20-February Network Meeting in Houston are posted on the www.nihstrokenet.org website under the Education tab.

**Pencil us in for Tuesday, 12-September in Atlanta, GA, for the fall network meeting. Same location as last year, the Atlanta Airport Marriott. We have negotiated a very reasonable rate room rate, with details to come. We will keep you posted!**

Please share this with your clinical performing sites and satellite sites!

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