

MonthlyUpdate

04 – September 2019



School of Medicine and Public Health university of wisconsin-madison

REMINDER

Monthly Coordinator Call

The coordinator call is scheduled for September 19^{th} at 10.30am

NEW!!! Neuro Teleconference Line:

1) Call into 733-4000 if calling from a UW Health phone, call (608)733-4000 if not

calling from a UW Health phone 2) Enter the 4-digit Meeting ID (**9909**) followed by #

PLEASE NOTE NEW DIAL-IN INSTRUCTIONS

Enrollment Update (as of 09/03/2019)

• CREST 2 - 1492/2480

Whealth

- ARCADIA 289/1100 randomized; 1144/4400 consented/not randomized
- CREST-H 103/500
- Sleep SMART -36/3062
- TRANSPORT2 0/129

REMINDER

Please remember to complete your **Annual Clinical Site Survey** – return at your earliest convenience – we are aiming to have them completed at the end of the month This survey uses your data for site selection and participation in clinical trials for StrokeNet.

RCC Contact Information 600 Highland Avenue Madison, WI 53792

PI Robert J. Dempsey, MD Office 608.265.5967 Dempsey@neurosurgery.wisc.edu

Co-l

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Clinical Research Manager

Stephanie M. Wilbrand, PhD Office 608.265.9248 wilbrand@neurosurgery.wisc.edu

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Research Coordinator Jenna Bock Office 608.261.1577 bock@neurosurgery.wisc.edu

FAX 608.263.1728

At the end, please find the latest bi-weekly StrokeNet newsletter and the dashboard.



Biweekly Update 30-August 2019

http://nihstrokenet.org/coming-events

ARCADIA Sleep SMART TRANSPORT2
 StrokeNet Enrollment Update

 289/1080
 CF

 36/3062
 CF

 0/129
 CF

Update CREST 2 CREST H

1492/2480 103/500

StrokeNet Trial Updates



- >1000 patients consented
- >25% (n=275) of target randomized
- Canadian Stroke Consortium approved participation in ARCADIA
- Next DSMB meeting Sept 3, 2019

As of August 28, 2019, 1141 subjects have been consented and 289 participants have been randomized at 87 sites. This is an increase of 61 consented and 24 subjects randomized in the past 4 weeks! Our enrollment is at 26.31% of the overall enrollment goal! Last summer (June, July & August) we randomized 55 subjects and this summer we randomized 68 participants. Despite vacations, everyone did a great job randomizing for ARCADIA – thank you!

During the last four weeks, 43 sites have consented and 21 have randomized eligible subjects - thank you all!

Congratulations to the following 4 sites for randomizing their first subjects: OSF St. Francis Medical Center, IL; Chandler Regional Medical Center, Good Samaritan, CA and St. Louis University Hospital, MO. Thank you!

The competition on the leader board is ongoing. United Hospital (13 participants randomized) has pulled ahead of University of Cincinnati (11 randomized subjects). There is still room for a tiebreaker between the University of Iowa and OHSU to enroll beyond 9 subjects.

We have now released to enroll a total of 131 sites, 121 are active, and we are still working on adding other qualified sites to the ARCADIA roster. Our randomization rate sits at **0.19** patients/ site/ month based on our active sites. Please let us know of any excellent stroke sites that are interested in participating in this important trial.

Enjoy the last days of summer and please keep approaching ESUS patients about the ARCADIA trial at your sites – Remember, every site's best effort is necessary for the trial to succeed!

Webinar: Our next PI and coordinator webinar will be September 24th at 2 PM Eastern--save the date! We're asking that at least 1 person from each site attend the monthly webinar and pass the information along to their team. Also, please send suggestions for topics you'd like discussed.

If you miss out on a webinar, you will soon be able to find the slides on the StrokeNet website (https://nihstrokenet.org/intranet/minutes/trial-webinars).

Sleep SMART

We now have 113 subjects enrolled and 36 subjects randomized.

Thirty-four sites are released to enroll and fourteen sites have randomized at least one subject. Congratulations to the following sites for all their hard work and dedication:

- 1. Brooks Rehabilitation Hospital, Jacksonville, FL-Parag Shah, MD and Taisiya Matev-9 subjects randomized
- Prisma Health Midlands (Palmetto Health), Columbia, SC-Souvik Sen, MD and Phil Fleming-7 subjects randomized
- Cedars-Sinai Medical Center, Los Angeles, CA-Oana Dumitrascu, MD and Vicki Manoukian-4 subjects randomized
- 4. Barnes-Jewish Hospital, St. Louis, MO-Eric Landsness MD, William Holt, and Jill Newgent-3 subjects randomized
- 5. UCSD La Jolla, La Jolla, CA-Dawn Meyer, NP, PhD, Theresa McQuaid, and Karen Rapp-2 subjects randomized
- UCSD Medical Center Hillcrest Hospital, San Diego, CA- Dawn Meyer, NP, PhD, Theresa McQuaid, and Karen Rapp-2 subjects randomized
- University of Utah Healthcare, Salt Lake City, UT-Jana Wold, MD, Theodore Rock, and Kinga Aitken-2 subjects randomized
- 8. Harborview Medical Center, Seattle, WA-Sandeep Khot, MD and Allison Kunze-1 subject randomized
- 9. St. Joseph's Hospital and Medical Center, Phoenix, AZ-Supreet Kaur, MD and Kelly Sims-1 subject randomized
- 10. Hospital of the University of Pennsylvania, Philadelphias, PA-1 subject randomized
- Saint Luke's Hospital of Kansas City, Kansas City, MO-Suzanne Crandall, DO and Debbie Summers-1 subject randomized
- 12. University of Alabama Hospital, Birmingham, AL-Soo Young Kwon, MD and Tammy Davis-1 subject randomized
- Mayo Clinic Saint Mary's Campus, Rochester, MN-Eugene Scharf, MD and Amy Headlee-1 subject randomized
- 14. Yale New Haven Hospital, New Haven, CT-Klar Yaggi, MD and Radu Radulescu-1 subject randomized

In order to schedule your site readiness call and release your site to enroll, the following need to be completed:

- FusionHealth Consignment and DUA executed
- CTA executed
- CIRB approval
- KOEO access confirmed and equipment received
- All required training completed and uploaded in WebDCU-<u>https://webdcu.musc.edu/campus/</u>

Please remember to submit AEs through WebDCU.

Between the time of consent and randomization, only the following AEs must be reported:

- All SAEs (fatal and non-fatal) that are definitely related or stand a reasonable possibility to be related to the Nox T3 sleep apnea test or the aCPAP run-in night procedures (within 5 days of awareness if nonfatal; within 24 hours of awareness if fatal)
- All non-serious AEs of special interest* that are definitely related or stand a reasonable possibility to be related to the Nox T3 sleep apnea test or the aCPAP run-in night procedures (within 5 days of awareness of event)
- Primary outcome events (ischemic stroke and ACS) (within 5 days of awareness of event)

After randomization, the following must be reported:

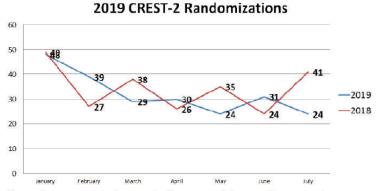
- All non-fatal SAEs (within 5 days of awareness of event)
- All non-serious AEs of special interest* (within 5 days of awareness of event)
- All fatal SAEs (within 24 hours of awareness of event)

*AEs of special interest, whether serious or not, include: pneumonia, intubation for respiratory failure, hemicraniectomy/suboccipital craniectomy, pneumothorax, car crashes or other physical injury related to sleepiness, skin infection on face caused by CPAP mask that requires treatment.

From the CREST-2 Clinical Coordinating Center:

CREST-2		CREST-2	CREST-2 StrokeNet
	CEA	786	282 (36% of total)
	CAS	706	104 (15% of total)
	Total	1492	386 (26% of total)

Recruitment: The CREST-2 Clinical Coordinating Center would like to thank all of the StrokeNet sites for their contributions to the trial thus far. As a reminder, our next recruitment milestone is **1700** randomizations by **February 28**, **2020**. To achieve this goal we need **208** additional patients, which will require us to average **35** randomizations per month. In 2019, we have averaged 30 randomizations per month - significantly below target - necessitating incremental focus to be placed on screening and enrollment moving forward. Please see below our recruitment trends from 2018 vs. 2019.



If you have noticed any challenges with enrollment, please partner with the CREST-2 Recruitment Team to identify best practices and resources to enhance recruitment at your site. You can also visit the CREST-2 website at **crest2trial.org** > For **Medical Professionals** > Password: stroke > **Recruitment**. There you will find content including screening strategies and tips on how to engage stakeholders at your institution as well as in your community.

We need your help to get to 1700!







Site Startup and Enrollment Updates: sites: 50; enrollments: 104

Welcome Stanford, St. Joseph's Barrow, and Kaiser San Diego. That makes 50 sites!

We had another good month in August, with 9 enrollments.

Thanks to Stanford (green lighted and 2 enrollments!), Huntsville, Mayo Rochester, Morton Plant, Univ Florida Shands, and Utah, who all enrolled this month.

CREST-H needs to recruit nearly 1 of every two CREST-2 patients to meet our recruitment goals. We are making a big push to get all sites approved for CT perfusion as well as MR perfusion. Having CTP available as a backup will allow you to capture all potential CREST-H patients! Thanks. If you have not done so already please submit your test images for CT perfusion.

We are still recruiting additional sites. Contact Randy Marshall rsm2@columbia.edu, Ron Lazar rlazar@uabmc.edu, Jaya Vijayan vijayan.jaya@mayo.edu, or Kevin Slane KJS4@columbia.edu with any questions.



Congratulations to Moss Rehab who was released to enroll this week! We appreciate all the effo you have put forth. We hope to have our first randomized subject very soon!

Reminder that our next PI and Coordinator call is scheduled for **Friday, August 30 at 11am ES**[•] We will be back to our regular schedule on Monday September 16th at 11am EST for those you who cannot attend Friday's call. If anyone has topics they would like to discuss during th call, please send them to Kristina at Kristina.Balderson@duke.edu.

REMINDER: Please make sure that you are using the most recent ICDs (v4.0) that have been distributed to ϵ sites.

We now have Moss, Barnes Jewish, Burke, Emory, MUSC, and the University of KY released to enroll and ca use the main trial consent. We look forward to the first randomized subject soon!!!



Thank you to those who were able to join the Protocol Update and Refresher Webinar, we appreciate the involvement and feedback. The following is a summary of the call, outlining the planned protocol changes and timeline for getting MOST started.

- MOST will move from a double-blind to single-blind design due to issues encountered during the study drug manufacturing process causing unusable product
- Protocol Changes:
 - o Single-blind (patient and family remain blinded, study team will know treatment assignment)
 - o 2 and 6-hour aPTT and 2-12 hour infusion titration protocol only for argatroban arm subjects
 - The 24-hour NIHSS assessor should be blinded to treatment assignment
 - All other components of the protocol remain unchanged
- Logistical Changes:
 - Site pharmacies will be responsible for reconstituting argatroban kits before dispensing, eptifibatide and placebo kits do not need to be manipulated
 - For all arms: the bolus will be pulled from a glass vial, the same glass vial will be hung for the 0-2 hour infusion, and a 250ml bag will be hung for the 2-12 hour infusion
- Amended protocol has been submitted to the FDA and CIRB anticipate FDA approval mid-September when we will re-start site readiness activities (site CIRB amendment submissions, readiness calls)
- Updated Protocol and Pharmacy training videos and tests will be released mid-September
- We will schedule a dedicated pharmacy webinar within the next few weeks
- Anticipate first sites up in October

The webinar recording and the slide set is available: http://nihstrokenet.org/most/most



We are excited to announce that Stanford has received the Notice of Award, and sites should be on the lookout for their CIRB packets. The CTAs will also be coming very soon! Please contact Stephanie Kemp, skemp@stanford.edu, or Tashia Harris, href="">href="href="href="href="href="href="href="href="href="href="href="href="href="href="href="href="href="href="">href="hr



The Notice of Award was released last week, and we are eager to hit the ground running! CIRB packets and CTAs will be pushed out to sites in the next few weeks. Stay tuned!

Steering Committee Call

Steering Committee Calls are a requirement for all NIH StrokeNet RCCs (one representative per RCC required)

The next Steering Committee call is scheduled for **11-September 2019, at 12 noon ET.** Teleconference details: 1-877-621-0220, passcode 434578.

Reminder: StrokeNet MTA Process Update

Key points:

- RCCs will continue to have MTAs
- Satellites will no longer have MTAs
- StrokeNet CIRB Reliance Agreements (RAs) MUST be fully executed prior to participating in a StrokeNet trial

RCCs will submit an <u>Annual Site Report</u> to the NCC (NCC Contracts Mgr. Diane Sparks, cc: Wren Hanson), beginning 30-August, 2019 (and by 1-August every year after), with the following information listed:

RCC information:

- RCC WebDCU™ Number and Name
- RCC PI Name and Email Address
- RCC Coordinator Name and Email Address
- RCC Clinical Performing Sites, including WebDCU™ Number and Name

For each Satellite include the following information:

Satellite WebDCU™ Number and Name

Satellite PI and Satellite Coordinator name and contact information

Satellite Clinical Performing Sites, including WebDCU™ Number and Name

*Additions or deletions should be communicated to the NCC (not the NDMC) as they occur. To add a satellite or CPS to your RCC, include info as above, and *NEW*. Please include the FWA# and the DUNS# for all new sites.

More information/clarification:

- Send an email to the NCC (Diane Sparks, cc: Wren Hanson) each year with your annual report; the annual report should include a list of your current Satellite sites and CPS. The first annual report is due by 30-August, 2019, and 1-August every year after.
- The NCC will verify the FWA# and DUNS# on any new sites prior to finalizing them as a new site.
- Send site additions/deletions as they occur.
- Send any PI or coordinator name changes to the NCC as they occur.
- · Send any site name changes to the NCC as you become aware.
- Send any site ownership changes, acquisitions or mergers to the NCC as you become aware.
- The NCC will communicate all changes to the NDMC. Do not contact Jessica Griffin with new or deleted site information.
- Allow 4-6 weeks to see WebDCU[™] changes.

Coordinator Webinar

Coordinator Webinars are a requirement for the NIH StrokeNet RCC Coordinators/Managers

Wednesday, September 25, 2019 - 1:30 PM ET

Topic TBD

Topic:

To join the meeting: <u>https://nihstrokenet.adobeconnect.com/coordinator/</u>. Please enter as a guest, then your email address or your first and last name.

To take part in the conversation you MUST dial in. 1 (877) 621-0220 Passcode: 434578

Professional Development Webinar

Professional Development Webinars are a requirement for the NIH StrokeNet Trainees

Thursday, October 17, 2019 - 12:00 PM ET How to Give an Effective Scientific Presentation

Presenters: Farhaan Vahidy, MD, PhD, University of Texas, Houston

Moderator: N/A

To join the meeting: <u>https://nihstrokenet.adobeconnect.com/pdw/</u>. Please enter as a guest, then your email address or your first and last name.

To take part in the conversation you MUST dial in. 1 (877) 621-0220 Passcode: 190825

Grand Rounds

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

Thursday, September 26, 2019 - 4:00 PM ET

Topic: Applications of Brain Stimulation for Aphasia

Presenters: Peter Turkeltaub, MD, PhD, Georgetown University

Moderator: Randy Marshall, MD, Columbia University

To join the meeting: <u>https://nihstrokenet.adobeconnect.com/grandrounds/</u>. Please enter as a guest, then your email address or your first and last name.

To take part in the conversation you MUST dial in. 1 (877) 621-0220 Passcode: 190825

StrokeNet Network Meetings and Important Info

Tuesday, 29-October, Atlanta, Georgia. We anticipate up to **four** seats per RCC, with extra seats opening up after RSVPs are in, as in the past. There will NOT be a trainee meeting. We anticipate the meeting to conclude by 3:30pm.

The RCC Network Coordinator should RSVP for all of the RCC members who will be attending. Each RCC may invite up to FOUR PARTICIANTS, however, after RSVPs are in, additional spots will likely become available. Please RSVP to Rose, <u>no later than 6-September 2019</u>, noting your four participants and any names you would like to place on the wait list.

The NCC will reimburse two people from each RCC one-night room and tax only.

While same day travel is possible in most cases, we have reserved a block of rooms for Monday, 28-October at the Atlanta Airport Marriott, on Best Road. We have negotiated a room rate of \$149 per night plus tax. Please book by <u>4-October 2019</u>. After that time, the group rate may not be available. These rooms are first come, first served, so act quickly. <u>Rooms not canceled 72 hours prior to arrival will</u> incur a (*non-reimbursable*) cancellation fee.

Please book your room via the reservation link below or call the hotel and ask to book in the StrokeNet Meeting room block:

https://book.passkey.com/e/49950416

NIH StrokeNet Employment Opportunities

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

Duke University School of Medicine Vascular Neurologist (2)

The Department of Neurology at Duke University School of Medicine is seeking two additional Vascular Neurologists to join its growing faculty and new Division Chief. Individuals with strong interest in telestroke, outpatient sub-specialty clinic and stroke research are strongly preferred. Hired faculty will join an active clinical practice and vibrant research community at Duke University Hospital, a 938-bed JCAHO Advanced Comprehensive Stroke Center. The stroke center also has a growing telestroke network with seven sites. Excellent opportunity to develop and advance an academic career through numerous opportunities in education, clinical and translational research, global stroke care, plus programmatic leadership. Junior faculty candidates demonstrating strong research potential can be appointed with protected time to ensure success with federal grant submission and career development.

The candidate must be BC/BE in Neurology with fellowship training in Vascular Neurology. Academic rank and salary will be determined based on individual qualifications. Duke faculty also enjoy an exceptional Benefits package, including college tuition assistance for up to two children, plus an excellent retirement package.

The Triangle Area of North Carolina, which includes Raleigh, Durham, and Chapel Hill, is consistently rated among the best areas in the country to live. With its array of family-friendly activities, exceptional schools and universities, premier shopping, and Research Triangle Park's high-tech research and development center, Raleigh/Durham has something for everyone.

Interested candidates should apply with CV and letter of interest via the following link https://pdc.dukehealth.org/careers/duke-vascular-neurology

Or contact Christy Gannon, FASPR Physician Recruiter, Medical Staff Recruitment

Duke Box 3810|4825 Creekstone Drive, Suite 250, Durham, NC 27703

Office: 919-681-7224 Cell: 919-943-5753 Email: christy.gannon@duke.edu

UPMC

NIH StrokeNet Research Training in Fellowship

The University of Pittsburgh, Department of Neurology is now accepting applicants for a year 2020-2021 research training fellowship supported by the NIH StrokeNet program (NIHStrokeNet.org). StrokeNet is a research network of 29 regional stroke centers funded by the NIH/NINDS, these centers work with nearby satellite facilities and have teams of researchers representing every medical specialty needed for stroke care. The network addresses three areas of stroke research: prevention, treatment and recovery.

The specific aims of this project include promoting stroke related research and developing future practitioners who are interested in promoting and participating in stroke related research. Goals

also include fostering the development of close mentorship ties, protection of research time, pursuit of research training, and generation of preliminary data necessary to apply for additional scientist development training grants. This program is therefore aimed at promising applicants who are seeking a career that includes clinical or translational research in stroke. Unlike longer training programs, this program is focused on identifying a single year that will allow the time and support to compete effectively for longer training opportunities. It is expected that at the end of the fellowship, the trainee will be prepared to submit applications for national, peer-reviewed funding mechanisms and continue their research. The recipient will have the opportunity to work with the NIH StrokeNet to develop a research plan.

This opportunity is open to any fellow interested in stroke care. This is a research focused training opportunity and at least 75% of the recipient's time will be based in research training, project development and other activities supporting stroke research.

ELIGIBILITY

- 1. For the purpose of this fellowship, research includes specifically designed trials studying prevention, acute care, and rehabilitation in stroke and may include translational research.
- 2. The applicant should be interested in an academic career with independent research funding. The award is available for members in all disciplines (physicians, advance practice nurses, PharmD, DPT, PhD researchers, etc.) and is geared for fellows but early career individuals will also be considered who are interested in stroke research.

AWARD

The fellowship will be awarded to one (1) applicant for one (1) post-graduate year. Support for the applicant includes salary and training activities. Supplementation of the stipend with other grants, fellowships, or by the institution is permissible, but fellows may not accept another source of support for more than 25 percent of their salary.

Through University of Pittsburgh and UPMC resources we can provide:

- 1. Mentorship by an established investigator
- 2. Career development with specific goals and an identified research project
- 3. Research training through the Institute for Clinical Research Education
- 4. Protected research time by the department of at least 75%

APPLICATION REQUIREMENTS

- Applicants are asked to submit a letter of intent. The letter should include a description of the applicant's goals for a research career, their qualifications for beginning training in research, a description of their potential project, and a strategy for completing the proposed project.
- Identification of a potential mentor(s) including the mention of the mentor's qualifications and area of expertise. A description of how the mentor's expertise will tie into the project should be included if the mentor's area of research is dissimilar from the project. Mentors can be located at any institution as along as a clear mentorship plan is outlined.
- 3. A strategy for transitioning this work to a longer funding opportunity.
- 4. A letter of support (1 page) from a previous mentor.
- 5. Current CV including any publications from the last 2 years.

EVALUATION AND SELECTION

Letters of intent will be reviewed and selected by the StrokeNet University of Pittsburgh Training Director. Please send applications to:

Marcelo Rocha, MD, PhD Assistant Professor of Neurology Director Research Fellowship, NIH Stroke Trials Network University of Pittsburgh, School of Medicine UPMC Stroke Institute C-400 PUH 200 Lothrop Street, Pittsburgh, PA 15213 PH: 412-647-3030 FX: 412-647-8445

Please direct questions via email to rocham@upmc.edu

POSTDOCTORAL ASSOCIATE

Req ID: 4513

Location: Duke University School of Medicine, Durham, NC, US, 27710

Established in 1930, Duke University School of Medicine is the youngest of the nation's top medical schools. Ranked tenth among its peers, the School takes pride in being an inclusive community of outstanding learners, investigators, clinicians, and staff where traditional barriers are low, interdisciplinary collaboration is embraced, and great ideas accelerate translation of fundamental scientific discoveries to improve human health locally and around the globe.

Comprised of 2,400 faculty physicians and researchers, the Duke University School of Medicine along with the Duke University School of Nursing and Duke University Health System create **Duke Health**. Duke Health is a world-class health care network. Founded in 1998 to provide efficient, responsive care, the health system offers a full network of health services and encompasses Duke University Hospital, Duke Regional Hospital, Duke Raleigh Hospital, Duke Primary Care, Private Diagnostic Clinic, Duke Home and Hospice, Duke Health and Wellness, and multiple affiliations.

A postdoctoral fellow position is available immediately in the Department of Neurology, Duke University Medical Center. Our research laboratory focuses on 1) understanding the trajectory of motor recovery and identifying targets for intervention; 2) development of imaging biomarker of stroke motor recovery; 3) use of non-invasive brain stimulation tools (transcranial direct current stimulation, transcranial magnetic stimulation, ultrasound stimulation, etc.). the lab has a robust funding track record from American Heart Association, National institute of Health, industry and philanthropic donations.

Currently we have a funded observational study to better understand the motor recovery trajectory after stroke using multiple measures, including behavioral assessment, genetic, neurophysiology (TMS) and neuroimaging (MRI). The project recruits stroke patients from the super-acute stage through to 6 months after stroke. The project spans 3 labs spaces across the acute hospital to inpatient rehab facility.

We are seeking a motivated and independent candidate with primary interest in post-stroke motor recovery. S/he must have a doctoral degree with experience in at least two areas of behavioral testing, neurophysiology/TMS, neuro-imaging/MRI and genetics. S/he must have the ability to work independently and collaboratively in an interdisciplinary team setting, and should be comfortable working with stroke subjects in both acute and chronic stage.

Specific responsibilities include, but not limit to:

- · Process and synthesize behavioral, neurophysiology, imaging and genetic data in humans
- Present findings at local and national scientific meetings
- Write and submit manuscripts to peer-reviewed journals
- · Contribute to various grant proposals
- Mentor students or residents or fellows at various levels

Salary and benefits commensurate with NIH standards and is also dependent on personal experience.

We will actively support the fellow's professional growth through individual development and mentoring plan, and professional skills workshops offered either through Duke University or external workshops. S/he will have opportunities to attend training in the areas s/he does not have expertise.

To apply:

https://careers.duke.edu/job/Durham-POSTDOCTORAL-ASSOCIATE-NC-27710/571843200/

Clinical Research Administrator, Outcomes Research Baptist Health South Florida

The Research Administrator will develop, implement and direct all research activities for the BHSF Centers of Excellence research programs. This individual will be accountable for overseeing execution of research deliverables and will lead the research team to achieve research goals and objectives. The individual will assist in the mentoring of medical and/or research students, residents, fellows and physicians working in research programs.

Qualifications:

PhD from an accredited Graduate School in North America. CITI certified. Experience managing clinical research trials (phases I-IV and registries; basic science to outcomes; Pharma, Medical Device classes I-III and Biologics) Experience creating, negotiating and managing research program budgets. Effective relationship management skills and ability to build successful collaborations across programs and multidisciplinary teams. Strong communication skills (including scientific and technical) – verbal, written and presentation; Strong knowledge of research regulations; Institutional Review Boards, Food and Drug Administration, Code of Federal Regulations and guidelines, etc. Must be extremely flexible with ability to multitask effectively. Must be willing/able to travel domestically and internationally. Skilled in SPSS and all Microsoft applications. Minimum Required Experience: 5 Years

Join our <u>Talent Community</u> and stay up-to-date on our career opportunities. We'll send you alerts of new jobs matching your interests as well as exciting news and events happening at Baptist Health South Florida.

To apply:

https://careers.baptisthealth.net/job/9788624/clinical-research-administrator-outcomes-research-ft-8a-4-30pmiami-fl/

Postdoctoral Research Fellowship in Motor Recovery after Stroke Focus: Probing motor recovery pathways with TMS and MRI PI: Heidi Schambra, M.D. A postdoctoral position is available Oct 1st in the Mobilis Lab of Dr. Heidi Schambra, in the Departments of Neurology and Rehabilitation Medicine at NYU. The Mobilis Lab aims to enhance motor recovery after stroke using targeted physical training, noninvasive brain stimulation, and neuropharmacology. See www.mobilislab.com for our research areas and publications.

We are currently studying the role of a descending pathway in motor recovery after stroke. We are longitudinally evaluating its neurophysiology and neuroanatomy using TMS and advanced imaging techniques, respectively, in relationship to motor recovery in the paretic upper extremity. We expect the postdoctoral fellow to lead and develop this NIH-funded project.

We are seeking a motivated and enthusiastic candidate with primary interests in neurophysiology and neurorecovery. S/he must have PhD-level experience with TMS and behavioral testing in humans. S/he must have the ability to work independently and with a collaborative interdisciplinary team, and should be comfortable working with healthy and stroke subjects. Experience with Matlab, Python, Igor, optical motion tracking, and/or Spanish language proficiency is a plus.

Specific responsibilities include:

- · Acquiring and processing neurophysiology and behavioral data in human subjects
- Data analysis and synthesis
- Presenting findings at scientific meetings
- · Writing and submitting manuscripts to peer-reviewed journals
- Contributing to grant proposals
- Mentoring students or visiting fellows

We will actively support the fellow's professional development of her/his academic research career. The postdoctoral fellow will also have the opportunity to learn about wearable sensor technologies, machine learning, diffusion kurtosis imaging, and transcranial electrical stimulation.

Interested candidates should submit (1) a CV, (2) a brief (2 pages or less) cover letter explaining their research experience, interests, goals, and available start date, and (3) the names, contact information, and roles of three references familiar with their research and academic work to Dr. Heidi Schambra at Heidi.Schambra@nyumc.org.

Wake Forest Vascular Neurologist

The Department of Neurology is seeking an exceptional Vascular-Certified Neurologist to join the team at Wake Forest Baptist Medical Center. This is an opportunity to be a part of a comprehensive, academic stroke program focusing on clinical, research, education and community outreach.

THE STROKE DIVISION AT WAKE FOREST BAPTIST HEALTH

PROGRAM HIGHLIGHTS

- > 7 vascular board-certified neurologists and 3 stroke Nurse Practitioners
- > Leading the way with the most advanced, trusted and successful stroke care
- Large academic practice with blend of acute hospital practice, telestroke consultation, and clinic practice
- > The largest network of telestroke hospitals in North Carolina, with 20 hospitals across the state

- Cutting edge stroke research across the continuum, with institutional (CTSA) and departmental infrastructures (StrokeNet) for supporting NIH and industry trials
- Interdisciplinary team approach to stroke care with Neurosurgery, Neurocritical Care, Emergency Medicine, and Rehabilitation Medicine.

REQUIREMENTS

- > MD/DO
- BC/BE Vascular Neurology
- ACGME accredited fellowship training in Vascular Neurology
- Successful record of clinical and service excellence, leadership and an interest in graduate medical education
- Strong interest stroke continuum of care, including inpatient stroke service, telestroke consults, and outpatient stroke follow-up
- Research experience is preferred
- North Carolina licensure or eligible

COMPENSATION

The successful applicant will be appointed to the faculty of Wake Forest University School of Medicine at a level commensurate with experience and academic achievement. An attractive salary, benefits, relocation allowance, and non-clinical time for academic development are offered. Board certification and eligibility for NC licensure is required.

WAKE FOREST BAPTIST HEALTH NEUROLOGY

Wake Forest Baptist Health Neurology is a multispecialty, well-established and highly regarded practice and academic department with a diverse team of 54 faculty members in the following areas:

- Vascular Neurology
- Neuro-Critical Care
- Alzheimer's Disease
- Neuromuscular Disease
- General Neurology
- Pediatric Neurology
- Multiple Sclerosis
- Headache

DEPARTMENT HIGHLIGHTS

- US News & World Report ranks Wake Forest Baptist #1 in NC and #47 in the nation for Neurology and Neurosurgery
- Joint Commission designated Comprehensive Stroke Center- one of just 33 centers in the United States designated to-date as comprehensive
- Movement Disorders Center- one of the oldest and most highly regarded programs in the country
- Comprehensive Epilepsy Center- ranked among the top epilepsy programs in the U.S.; one of the few Epilepsy Centers in the Southeast to have met the Level IV guidelines of the National Association of Epilepsy Centers
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