NIH StrokeNet

PREVENTION | TREATMENT | RECOVERY

Biweekly Update
19-June 2020

StrokeNet Enrollment Update

ARCADIA	443/1100	CREST 2	1670/2480
Sleep SMART	253/3062	CREST H	143/500
TRANSPORT2	12/129	MOST	38/1200
I-ACQUIRE	22/240	ARCADIA-CSI	52/500
ASPIRE	1/700	SATURN	0/1480

StrokeNet Trial Updates

TRANSPORT2

Our next PI and Coordinator call will be on **Monday, 6/22/2020 at 11am ET.** If anyone has topics they would like to discuss during the call, please send them to Julia Gonzalez, (Julia.jackson@duke.edu).

The Reactivation Risk Mitigation Plan for reopening Transport2 at sites has been approved by the Central IRB. This letter was distributed to sites from Dr. Feng on Friday, May 15th, 2020. This document must be submitted to sites local IRB's for approval prior to restarting any study activities. Additionally, sites will need to complete the **COVID-19 Impact Assessment** in WebDCU under the **Project Management** tab. Upon completion of this assessment, sites will be reactivated within WebDCU for study enrollment. Each site should complete this form, regardless of the fact that enrollment is halted for all StrokeNet studies. The purpose of this tool is for us to know the individual restrictions at each site in response to COVID-19.

Please note: this assessment only needs to be completed for sites that were previously released to enroll. If you already completed this assessment, please edit your initial entry to answer the new questions that have been added. For questions or concerns, please reach out to Patty Hutto huttoja@musc.edu

As sites are planning to reopen to enrollment, please take inventory of your supplies and contact either Julia Gonzalez or Kristina Balderson for restock. When reaching out, please indicate the number of supplies needed, contact, and shipping location with confirmation that someone will be able to receive these shipments. Home addresses are approved for receiving shipments during this time of remote working or limited time at the site. For other questions or concerns, please contact Julia or Kristina.

Please make sure you have completed your BlueCloud recertification training by logging into the website: http://duke-transport2.trainingcampus.net. Individuals who have expired or about to expire training have been sent reminder emails. **Note this is for the scoring of the Fugl Meyer, not the video training.** Annual renewal is now being tracked in WebDCU, which will notify coordinators directly when any of their staff have outdated training.

To date, Moss Rehab, University of Kentucky, University of Southern California, Medstar, Emory University, and University of Cincinnati have randomized subjects. MUSC, Barnes Jewish, Burke, University of Texas, University Alabama, and Baystate are all open to enrollment. Cleveland VA has a fully executed CTA and CIRB approval, and currently working through their local IRB submission. Duke has received IRB approval, and had their first set of training subjects 6/12/20. UPMC has received CIRB approval and is still pending a signed CTA. There are 12 subjects randomized in the trial. Five have completed the study, and six have completed the intervention phase and are in the follow-up period.

Thank you for your continued effort and flexibility during this time!

Thank you for your participation in Sleep SMART. We hope you are doing well, especially during this difficult time.

AMENDMENT: Amendment v5.0 changes to your site-specific ICD were in most cases already made by the NCC, and submitted to the CIRB on your behalf. Most have already been approved. Once you receive your site CIRB approval letter with the approved ICD, please upload those to WebDCU as soon as possible and submit to your local IRB for acknowledgement, if required.

RE-OPENING: On May 15, 2020, the CIRB approved our request to end the study-wide hold on in-person interactions, including enrollment, in Sleep SMART. Please report this to your local IRB, if appropriate. In WebDCU, please update the COVID Impact Assessment survey to reflect the current status of research at your institution and, if you are ready to re-start enrollments, to indicate confirmation (in 'general comments') of the statements in the memo dated May 15, 2020. Email Joelle to let her know when your local IRB has acknowledged the recent amendment. Pending NDMC queries may delay our ability to release you, so please catch up on these. You will not be released to enroll until you receive official permission through a WebDCU email. Since our re-opening, 7 sites have been re-released to enroll and have in-person interactions.

Sites not yet released to enroll:

If your site is not yet released to enroll, please work toward site activation:

- CIRB submission
- Finalize the Clinical Trial Agreement and FusionHealth DUA and Consignment agreement
- Upload site and people documents to WebDCU
- Complete online trainings (https://webdcu.musc.edu/campus/)
- Complete readiness call
- Please review the site to-do checklist found in the WebDCU toolbox

Sites that have already enrolled:

Don't forget these important reminders:

1. Who is considered a proxy in Sleep SMART (for the outcome assessments)? Someone who spends enough time with subject in the opinion of the study team member and proxy to estimate how the subject would have answered the question. Proxies should leave blank any question to which they don't feel capable of providing an informed response.
2. Please perform the 3- and 6-month follow-up visits by telephone within the assessment window(!), by a blinded study team member: 90 days (-14 days, +30 days), 180 days (-14 days, +60 days).
    - If a blinded study team member is not available, but the assessment can still be done within window by an unblinded study team member, please take advantage of that opportunity and report performance by the unblinded investigator.
3. If the window for the 3-month visit ends and you have not been able to reach a subject, please continue to reach out to him/her until the 6-month window begins. Please pursue 6-month assessments out to 3 months past the 6 month assessment time point before considering the subject lost to follow-up.
4. If you can't get in touch with the subject by phone to schedule the outcome assessment, please check the consent form to see if you have permission to contact him/her by text or email. Alternative contacts may also be found in the back of the consent. Sleep SMART also has a letter template available on our website (https://www.nihstrokenet.org/sleep-smart-trial/research-team "unable to reach letter template") and for those on the verge of being lost to follow-up, a lost to follow-up letter.
5. As a reminder, please ask subjects to answer PROMIS questions as they are written (do not provide specific instructions to attempt to eliminate the influence of COVID).

6. Please check “Alerts” in WebDCU to find unresolved queries.
7. Visit our website: www.nihstrokenet.org/sleep-smart-trial/research-team to review helpful materials.
8. If you missed one of our webinars, they are all available here: https://www.nihstrokenet.org/sleep-smart-trial/webinars
9. Please remember to report AEs. If you need guidance, please refer to the Sleep SMART protocol or MOP.
10. All responses to Data Clarification Requests (DCRs) must be submitted within 5 days of query generation, except those associated with Serious Adverse Events, which must be answered within 24 hours of query generation. Site payments are contingent upon the subject’s data being entered, submitted, and all DCRs addressed.
11. For stroke outcome events, please be sure to upload documentation in the outcome packets that provides information about new stroke symptoms, including focal neurological symptoms and signs on exam, and associated dates.

Re-Opening: On Wednesday, June 16 the Central IRB (CIRB) at the U of Cincinnati approved our re-opening plan. On clinicaltrials.gov, we will remove the “trial suspension” designation and restore the open and “recruiting” designation.

In the next few days, Max Mays from the National Coordinating Center (NCC) at the U of Cincinnati will send to each site the specific details for how your local site can “open up” by reviewing the guidelines and then entering your “plan” agreement on the WebDCU. Remember that if your site will not comply with or is adding extra elements to your plan, you must submit this to Laura Bateman for our leadership team to review and approve.

A copy of the letter of acceptance and a copy of the plan for the overall trial for safe and healthy guidelines for re-opening was e-mailed to each site. We will follow-up with each site to be sure the communication is clear and you are comfortable with taking the next steps.

Thanks for your contribution of ideas and information in the formulation of this plan.

Save the date: Our next PI/Co-I/Coordinator Webinar will be Thursday 09 July (12-1pm ET).

Site Startup and Enrollment Updates: sites: **54**; enrollments: **143**

WE ARE BACK IN BUSINESS! We have 22 of our 54 sites that have been “unpaused” although 4 of them are still waiting for research imaging to resume. Thanks to Mayo Rochester and Novant Forsythe for enrolling in the past week, bringing our total to 143, **41%** of our target. We are looking forward to reopening of the remaining 32 sites. We have 6 additional sites in the onboarding pipeline.

Please also continue to be vigilant about cognitive visits. Because the 1-year cognitive test is the primary outcome in CREST-H, it is critical to obtain the **1-year telephone cognitive test** for CREST-H patients. The Survey Research Unit at University of Alabama Birmingham has resumed operations. PI’s and coordinators, please make sure the cognitive exams – as part of the CREST-2 protocol -- are done for the 1-year time point.

Also, due to **restrictions on research imaging** at some medical centers are still on hold at the moment, so **1-year CREST-H perfusion scans** may be delayed. We have gotten approval to delay the 1-year scans until after your site reopens its scanners to research. You will have up to 3 months from that point to complete the scan.

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.

From the CREST-2 Clinical Coordinating Center:

	CREST-2	CREST-2 StrokeNet
CEA	878	382 (44% of total)
CAS	792	134 (17% of total)
Total	**1670**	**516 (31% of total)**

Reminder that CREST-2 is re-initiating enrollment! Currently, **25 of 57** StrokeNet sites have communicated to their respective site managers that they have completed the steps to re-initiate CREST-2 enrollment at their institution. We encourage you to reach out to the Clinical Coordinating Center to let us know the status of your institution opening up research operations and specifically CREST-2. **Starting June 1st, we will need to enroll a minimum of 15 patients per month through October 2020, 25 patients per month through May of 2021, and 30 patients per month until target completion of 2480 patients in December of 2022.** We would like to congratulate the following StrokeNet sites for randomizing in June thus far: **Novant Health, Mayo Clinic Rochester, Mayo Clinic Jacksonville, UPMC Hamot, & UPMC Altoona**. If your site has re-initiated research operations, please continue to search for CREST-2 patients!

ARCADIA•CSI
Cognition & Silent Infarcts

The ARCADIA-CSI Study Team like to say thank you to all our sites for participating in the CSI study.

Amendment V2 has been approved by the cIRB. The approved protocol and protocol signature page can be found in WebDCU in the toolbox.

As some sites have transitioned their staff over to work on Covid 19 trials, we ask that sites update their DOA in WebDCU to reflect the changes in the study team. If there are any questions regarding this, please let the study team know.

All sites must complete the Covid 19 Impact Assessment Form in WebDCU prior to re-opening.

Sites still pending activation:

- Update **all** regulatory documents in WebDCU
- If you need to schedule your site readiness call – do so by contacting study team members below

Sites who were open prior to the Covid-19 pause:

- Update all regulatory documents
- Upload the approved continuing review documents

Please contact Tashia Harris, herndotl@ucmail.uc.edu or Stephanie Kemp, skemp@standford.edu with any questions.

ARCADIA

Working towards a re-start of enrollment!

We have been able to capture three of our pending randomizations bringing us to 443 subjects randomized – thank you Stanford University and Maimonides teams! We hope to continue to do so as per the re-start plan and as possible at all the sites with the pending subjects.

Although the cIRB has approved our site by site re-start plan, we're still waiting for permission from Columbia's IRB to have CALM lab receive our samples needed for new subject enrollments. In the meantime, we continue to re-release sites that have pending randomizations as these are not new subjects, and we will let everyone know when we can re-release sites to enroll new subjects. We hope that we will be able to begin recruiting/consenting new patients soon and we ask that you continue to complete/update the requirements for re-release of your sites. We will provide an update as soon as possible.

In the meantime, please continue your site's process for re-start by completing the following (if you haven't already done so):

- COVID-19 Impact Assessment with the General Comment PI attestation. The specified phrase confirms local institutional ability to re-open and that you will follow the ARACADIA re-start plan
    - Email Rebeca (ra2356@cumc.columbia.edu) when your site is ready to be considered for re-release to enroll even if only doing remote screening, enrollments and follow ups.
- Upload the cIRB site-wide approval letter dated 4/29/2020 (Protocol v5 - 16APR2020)
- Upload Protocol Signature Page (Protocol v5 - 16APR2020) – this can be digitally signed by the PI
- Once you receive the new consent forms from Pam, then upload:
    - CIRB Approved Administrative Amendments – the cIRB site-specific consent approval letter for your new consent forms
    - CIRB Approved Informed Consent Form (v7) – the PDF document and don't worry about translations for re-start, but please request them if you haven't already done so
- Also, let Rebeca know if you need to submit to your local IRB before using the new consent forms

In the meantime, please continue screening/keeping lists of potential participants that we can contact after the consent/randomization pause is lifted and stay in touch with patients to be sure they are weathering the crisis, and that their study-related medications continue.

As personnel changes and new staff comes onboard often, we ask that you communicate with all of your team members regarding ARCADIA emails sent to the site's PI & PSC.

We thank you for your continued support and effort during these challenging times, but together we can move forward in ARACADIA.

In solidarity with all, we hope you will all keep safe!

Webinar: Our next PI and coordinator webinar will be June 23th 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).

MOST
Multi-Arm Optimization of Stroke Thrombolysis

Sarasota Memorial and **Wake Forest Baptist Medical Center** have enrolled **one** subject and **Greenville Hospital** has enrolled **three, yes three!** subjects post-COVID enrollment suspension. Well done MOST Teams!

- Congratulations to **University of Cincinnati Medical Center, University of Alabama Hospital, University of Minnesota Medical Center** and **Temple University Hospital** who have been released to enroll!
- There are now **60** sites that have been released to enroll, **26** of which are actively recruiting!

MOST Enrollment Update:

- Total randomizations: **38**
- Sites released to enroll with at least one patient consented: **18**

MOST Appreciated:

- For sites that are released to enroll please continue to complete screening logs in WebDCU™.
- For sites that have not been reactivated, please continue to update the COVID Impact Assessment in WebDCU™ with information on anticipated timelines for resuming research activities.

Thank you all for your efforts!

The PI hotline is available 24/7 for any questions: 1-833-229-MOST

ASPIRE

- On May 12, 2020, the cIRB approved out plan to **re-open the trial to enrollment** and procedures for remote consent, randomization, and participant follow-up.
    - Suspended sites have been contacted to enquire if they are able to resume enrollment.
    - Before being re-released to enroll, the site PI must attest that resumption can take place safely, in conformity with local restrictions, and without contributing to shortage of resources needed for care of COVID-19 patients.
    - All sites must complete a Remote Informed Consent Implementation form to be submitted to the cIRB via the ASPIRE NCC Project Manager.
    - The cIRB approved **ASPIRE Remote Study Procedures** and **Remote Informed Consent Implementation form** are posted in WebDCU > ASPIRE Toolbox and will be reviewed in detail during the ASPIRE Webinar on May 27, 2020
- Screening activities are continuing as permitted by local institutional policies.
- Please remember to update the **COVID-19 Impact Assessment v2** in WebDCU to alert us to any changes in local restrictions on screening or enrollment.
- For sites still pending activation, please:
    - Upload/waive pending regulatory documents.
    - Enter addresses for study drug and lab kit shipments.
    - If CTA and cIRB approval in place, schedule readiness call.
- ASPIRE next Webinar is June 24, 2020 3:00p-4:00p EDT https://nihstrokenet.adobeconnect.com/trials/ To take part in the conversation dial 1 (877) 621-0220 Passcode: 745694

SATURN

SATURN is open for enrollment!

We recently amended the study protocol to allow for obtaining remote consent from potential subjects or their surrogates to minimize in-person exposure. Protocol and ICF v4 were distributed to all sites.

Procedures for reopening SATURN enrollment were distributed to all sites.

In order to restart enrollments for sites that were previously released to enroll:

- Site must be approved on Protocol v4, Informed Consent Form v4.
- Indicate on the COVID Impact Assessment in WebDCU that your institution allows subject enrollment.
- Notification will be sent when site enrollment suspension is lifted in WebDCU

Sites that have not yet been released to enroll should follow the steps outlined above once they have been activated. This requires reconciling all regulatory documents in WebDCU. The COVID Impact Assessment will only be accessible to the sites that have been activated.

SATURN will host the next PI/Coordinator webinar on Thursday June 25th.

To join the meeting: ***https://nihstrokenet.adobeconnect.com/trials/*** - Enter as a guest, then your first and last name.

To take part in the conversation you MUST dial in. 1 (877) 621-0220 Pass Code: 745694

Please continue to update the COVID Impact Assessment with information on anticipated timelines for resuming research activities.

MGH has resumed shipping lab kits out to sites who have completed a readiness call. Please remember to confirm receipt of the lab kits in WebDCU once you are able to do so.

If you have any questions regarding SATURN and reopening enrollment at your site please contact:
Kimberlee Bernstein NCC Project Manager gammk@ucmail.uc.edu
Sarah Marchina Prime Project Manager (BIDMC) smarchin@bidmc.harvard.edu

NIH COVID-19 Research Opportunities

Dear StrokeNet Colleagues,

As part of NIH's multi-faceted response to the COVID-19 pandemic, we have launched an unprecedented four-pronged initiative, entitled Rapid Acceleration of Diagnostics, or RADx, to catalyze the scientific community to improve testing technologies, capacity, and accessibility for the country. As one of the four RADx components, RADx-Underserved Populations (RADx-UP) will establish a network of community-engaged projects to improve access to and acceptance of testing in underserved and vulnerable populations. As part of the RADx-UP initiative, NIH has released four funding opportunities to solicit community-engaged research on COVID-19 testing among underserved and/or vulnerable populations to both understand and close the disparity gap:

https://www.nih.gov/research-training/medical-research-initiatives/radx/funding

NINDS has signed on to the first three in BLUE. NINDS has specifically identified StrokeNet's eligibility in the first opportunity.

These funding opportunities include:

1. Emergency competitive revision applications to existing awards for large consortia, multi-site trials, centers and other current networks that have adequate capacity, infrastructure, and established community-engaged relationships to support large-scale testing interventions or have the capacity to ramp up quickly to reach underserved or vulnerable populations.
    a. https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-121.html
2. Second, complementary emergency competitive revision opportunity which shifts eligibility to collaborative and individual research awards, generally focused on smaller underserved or vulnerable populations.
    a. https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-120.html
3. Emergency competitive revisions to solicit research to understand the social, ethical, and behavioral implications (SEBI) of COVID-19 testing in these populations.
    a. https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-119.html
4. A new Coordination and Data Collection Center (CDCC) award (U24), a key component of the consortium. The CDCC will serve as a national resource, working with NIH scientific staff and consortium members to provide overarching support and guidance in the following four domains: (1) Administrative Operations and Logistics, (2) COVID-19 Testing Technology, (3) Community and Health System Engagement and (4) Data Collection, Integration and Sharing.
    a. https://grants.nih.gov/grants/guide/rfa-files/RFA-OD-20-013.html

Applications for this first phase will be accepted through August 2020 for FY20 funding. A second phase will be staggered to provide flexibility and to allow for adaption to the ever-changing needs that may be present as this pandemic evolves. Please visit Rapid Acceleration of Diagnostics (RADx) (https://www.nih.gov/RADx) to learn more.

We encourage you to share this information widely. If you have any questions, contact Scott Janis and Richard Benson at NINDS directly.

Best,

NINDS StrokeNet Team

Coordinator Webinar

Coordinator Webinars are a requirement for the NIH StrokeNet RCC Coordinators/Managers however, all are welcome to attend

Wednesday, 24-June, 1:30pm ET

Topic: RCC Manager Survey Summary

Presenter: RCC Managers Planning Group

Moderator: Dave Haney, Case Western Reserve University
To join the meeting: https://nihstrokenet.adobeconnect.com/coordinator/

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

Steering Committee Call

Steering Committee Calls are a requirement for all NIH StrokeNet RCCs
Please invite your satellite sites to attend

The next Steering Committee call is scheduled for **Wednesday, 8-July, 2020, 12 noon ET.** Dial in: 513-621-0220; 1-877-621-0220; Passcode 434578. Agenda to follow.

The webinar recording and slides from last month's call can be found at:
https://www.nihstrokenet.org/education/nih-strokenet-webinars-and-meetings

Grand Rounds

Grand Rounds are a requirement for the NIH StrokeNet Trainees, however all are welcome to participate.
Information for the next Grand Rounds will be available later this summer. Stay tuned.

Professional Development Webinar

Professional Development Webinars are a requirement for the NIH StrokeNet Trainees
Information for the next PDW will be available later this summer. Stay tuned.

NIH StrokeNet Employment Opportunities

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

Please share this update with your satellites and study teams!
Contact: Jamey Frasure, PhD, RN, Administrative Director · frasurjs@ucmail.uc.edu · 513-558 1742
https://www.nihstrokenet.org