



Biweekly Update 12-March 2021

StrokeNet Enrollment Update

ARCADIA	599/1100	TRANSPORT2	28/129
ARCADIA-CSI	145/500	I-ACQUIRE	46/240
Sleep SMART	460/3062	MOST	136/1200
SATURN	72/1456	CREST H	186/500
ASPIRE	18/700	CREST 2	1798/2480

*Enrollment as of 12-March 2021

StrokeNet Trial Updates



Congratulations to the Boston Site for randomizing 15 participants so far!

We now have **46** study participants enrolled. Everyone's hard work is greatly appreciated!

- Ann Arbor, MI – **6** participants randomized (**3** in the past 90 days)
- Boston, MA – **15** participants randomized (**3** in the past 90 days)
- Cincinnati, OH – **4** participants randomized (**1** in the past 90 days)
- Columbus, OH – **5** participants randomized (**1** in the past 90 days)
- Chicago, IL – **1** participant randomized
- La Jolla, CA – **5** participants randomized
- New Haven, CT – **3** participants randomized
- Philadelphia, PA – **2** participants randomized (**1** in the past 90 days)
- Roanoke, VA – **4** participants randomized

Save the dates: Upcoming **2021** PI/Co-I/Coordinator Webinar:

Thursday 11 March (12-1pm ET)
Thursday 22 April (12-1pm ET)
Thursday 13 May (12-1pm ET)
Thursday 10 June (12-1pm ET)



Our next PI and Coordinator call will be on **Monday, 3/15/2021 at 11am ET**. If anyone has topics they would like to discuss during the call, please send them to Kristina Balderson (Kristina.balderson@duke.edu).

13 sites have reopened to enrollment! Congratulations to MUSC, Burke, Baystate, Medstar, UAB, USC, Kentucky, Houston, Cincinnati, Moss, Emory, UPMC, and Duke for being open to enrollment amidst the COVID-19 restrictions. There are 28 subjects randomized in the trial, 16 have completed the study and we have several subjects we are hoping to randomize this month.

-TRANSPORT2 Team



ARCADIA•CSI
Cognition & Silent Infarcts

Enrolled 145/500

Sites active: 73/108

We are so appreciative for all your screening and enrolling efforts. Keep up the great work!

Review:

Thank you for completing and submitting your continuing review documents! If you have not returned your documents, please send them to Tashia at your soonest convenience.

Reminders:

- Complete Form 515 in the ARCADIA database as soon as possible after obtaining consent, determining that the patient does not qualify or if the patient declines participation.
- Check WebDCU regularly for past due CRFs and open DCRs. Please resolve outstanding items as soon as possible.

Please contact Tashia Harris, herndotl@ucmail.uc.edu or Stephanie Kemp, skemp@stanford.edu if you have any questions:



ARCADIA: Spring is almost here, let's keep enrollment blooming! Almost at 600!

What a year this has been, but we have Spring just around the corner and ARCADIAans have continued to screen, enroll, randomize and conduct study visits despite this pandemic's many challenges. We're grateful for your commitment to ARCADIA!

ARCADIA randomized a total of 597 participants since the study started, an increase of 12 in two weeks at eleven sites. Remember that we still have a pool of 49 subjects eligible and pending randomization --please continue to conduct randomization visits safely and as per protocol. A special thanks to the eleven teams that provided the last randomizations during this period: Intercoastal Medical Group - Hyde Park, Sarasota, FL; Mayo Clinic Saint Mary's Campus, Rochester, MN; New York-Presbyterian Brooklyn Methodist Hospital, Brooklyn, NY; North Shore University Hospital, Manhasset, NY; Ochsner Medical Center - Main Campus, New Orleans, LA; St. Joseph's Hospital and Medical Center, Phoenix, AZ; UCSD Health La Jolla, La Jolla, CA; United Hospital, St. Paul, MN; University of Utah Healthcare, Salt Lake City, UT; Yale New Haven Hospital, New Haven, CT and a special thanks to the team at Methodist University Hospital, Memphis, TN for randomizing TWO subjects in this period. Thank you all for your dedication!

We are currently at 2,283 subjects enrolled/consented, an increase of 38 in less than 2 weeks, thanks to 27 sites. This also means we have sites that have enrolled multiple subjects over the past 2 weeks - thank you to all the teams making each enrollment possible!

We would also like to welcome new sites to the ARCADIA family – we're happy to have the teams at Scott & White Memorial Hospital - Temple, Temple, TX; Sunnybrook Health Sciences Center, Toronto, ON, Canada; and Sutter Medical Center, Sacramento, CA join us!

Reminders & Clarifications for Coordinators

ARCADIA has made a few protocol changes and v5.1 was approved on 2/24/2021 and is in effect from that date forward until any new amendments are approved. We want to make sure that sites know that outcome events still need to be reported for ALL randomized subjects. The protocol change means that "Other" Adverse Events (AE) or AEs of Special Interest will no longer need to be reported for subjects that have been permanently off study drug for 30 days or beyond. However, outcome events must continue to be reported within 24 hours of knowledge for all randomized subjects. We will review this in this month's Investigator/Coordinator webinar.

Besides enrollment, we want to remind sites that **retention** and **conducting visits** within the scheduled follow-up time window are also important. If a subject's window is closing, then please do the f/u window via EMR review and edit later if the subject returns your phone calls by noting the date they reached out in the f/u comment section so that you can obtain the rest of the f/u data. We understand that subjects do not always promptly return our calls; however, having the protocol ability to conduct the f/u via EMR means there is no excuse for an out of window visit (OOW). Remember that all OOW visits need to be reported as an UAE.

Please remember that you need to enter the Baseline form F503 Biosample Collection-Shipping, print it and send it with the sample shipment to CALM lab. The lab cannot enter their results without this.

Please continue to let us know if you know of a good site that would like to participate in ARCADIA.

Webinar: Our next PI and coordinator webinar will be March 23rd at 2 PM Eastern--save the date! We're requiring 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.

Thank you for your continued dedication to Sleep SMART. We truly appreciate all your hard work.

As of March 9, 2021, 1332 subjects have been enrolled and 452 subjects have been randomized.



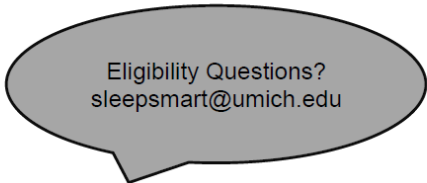
Congratulations to the following seven sites for randomizing in March 2021:

• R07 Maimonides Medical Center, Brooklyn, NY; Sanskriti Mishra, MD and Maryna Mootoo
• R27 Wake Forest Baptist Medical Center, Winston-Salem, NC; Cheryl Bushnell, MD and Krystal Schmidt
• R07 NYU Langone Medical Center-Tisch Hospital, New York, NY; Koto Ishida, MD and Julie Giles
• R06 George Washington University Hospital, Washington, DC; Kathleen Burger, MD and Chase Schertzinger
• R17 Henry Ford Hospital, Detroit, MI; Angelos Katramados, MD and Teresa Wiegand
• R04 The University of Vermont Medical Center, Burlington, VT; Christopher Commichau, MD and Nigel Miller
• R10 Providence St. Vincent Medical Center, Portland, OR; Biggya Sapkota, MD and Christine Spencer

CIRB APPROVED RECRUITMENT SCRIPTS:

You should have received an email asking you to submit the scripts document to your local IRB for acknowledgment, if needed. Use of the scripts will standardize information provided to subjects and language used across all sites. Please reach out to Kayla or Joelle, if you did not receive the email.

IMPORTANT INFORMATION TO REMEMBER:



Eligibility Questions?
sleepsmart@umich.edu

The 3-month mRS is a primary outcome for Sleep SMART. Please complete all 3-month assessments within window [90 days from randomization (-14 days, +30 days)]. These can be done by phone, if needed and should be completed by a blinded assessor if possible.

Corrective Action Plan (CAP): After one additional out of window or missed 3-month or 6-month visit, a CAP will need to be completed by your site. If an additional visit is missed while a CAP is ongoing, site probation will be triggered. Please try your best to obtain these critical outcome assessments.

End of Study (EOS): If you have a subject who moved to EOS, please document in WebDCU as soon as possible. Completing this CRF lets FusionHealth know the subject has completed participation. If not completed, you will likely receive emails from NDMC, Kayla, and the FusionHealth team asking about the subject's status.

SAVE THE DATE:

Virtual Investigator/Coordinator Meeting June 7, 2021 1-4 ET. Please save the date!

**CREST-H**

Overall Enrollment Summary: sites: **56**; Total Enrollments: **186/350**
(**53.1%** of target)

Number of enrollments in the last 2 weeks = 8

We would like to thank **USC/Keck, Hartford Hospital*, University Hospitals Cleveland Medical Center, Mayo Clinic Florida, University of Iowa, University of Utah Hospitals and Clinics, Tennova Healthcare/Turkey Creek Medical Center* and Novant Health/Forsyth Radiology** for enrolling subjects in the past 2 weeks!

*These centers enrolled their first patients.

Top Enrolling Centers:

Novant/Forsyth Radiology: 15

Mayo Clinic Rochester: 12

Kaiser Permanente Los Angeles: 10

Columbia University Medical Center: 9

University of Iowa: 8

University Hospitals Cleveland Medical Center: 8

Maine Medical Center: 7

Rhode Island Hospital/The Miriam Hospital: 7

UPMC Presbyterian University Hospital: 7

We greatly appreciate your efforts, especially during these difficult times! Please keep up the good work and feel free to contact us if you need any assistance along the way.

Interested in becoming a CREST-H site? 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:

1798 Overall

949 CEA

849 CAS

With the end of the first quarter quickly approaching, our monthly recruitment numbers are steadily rising! We ended January with 15 randomizations and February with 17 – and we're already making good progress in March! In 8 working days, we've had 7 randomizations. Congratulations to the following StrokeNet sites who have put patients into CREST-2 this month: **Novant Health, Oregon Health & Science University, Houston Methodist Hospital, and the University of Utah**. A special shout-out to the CREST-2 team at **Massachusetts General Hospital** for randomizing back-to-back patients this month as well! We are only 2 patients away from the next recruitment milestone of 1800 patients. As a reminder, continuing review is here and **due next week!** Please see below the following documents that must be submitted to the CIRB by **March 17th**:

1. Updated StrokeNet COIs from everyone listed on your eDOA log signed on or after February 16, 2021 and uploaded into WebDCU.
 - o Please indicate the expiration date in WebDCU as April 14, 2022.
2. Completed continuing review form
3. Current eDOA log generated and printed from WebDCU in PDF format

Please send item #s 2 and 3 to your site manager by **March 17th**. Once the above documents have been sent, your site manager will submit the documents to the CIRB on your behalf. Please note that due to the continuing review, the deadline for site submissions (personnel changes, site specific consent changes, etc.) was March 1, 2021. If you have any of these types of submissions, we will have to wait until the continuing review has been reviewed and approved (anticipated to be in mid-April) to submit. If you have any questions, feel free to reach out to the CCC.



MOST Enrollment Update:

Total randomizations: **136**

Randomizations between 24Feb2021 and 09Mar2021: **2**

Sites released to enroll with at least one subject consented: **37**

There are now **71** sites that have been released to enroll, **57** of which are actively recruiting!

Congratulations to the following sites for randomizing a subject this period!

1. Wake Forest Baptist Medical Center - Dr. Bushnell and Karin Haski (**1 new subject, 9 total subjects!**)
2. McLaren Flint - Dr. Majjhoo and Marci Roberts (**1 new subject, 9 total subjects!**)

NEW PAYMENT INFORMATION - MOST Payment for Enhanced Enrollment: As a hyperacute, time-sensitive trial, MOST requires prioritized time and effort from study teams for successful enrollment. The era of COVID has impacted research and pharmacy staffing, and availability of families/legally authorized representatives at the bedside. In acknowledgement of these challenges, MOST will implement the following payment structure for enhanced site enrollment:

1. \$5,000, inclusive of indirect costs, will be paid to the enrolling site if two eligible MOST subjects are randomized within 60 days of each other.
 - a. The payment eligible window opens on the date of the site's last enrollment if it was within 60 days of 10Mar2021.
 - b. If there has been no enrollment in the past 60 days, the payment eligible window opens on the day of the site's next enrollment.
 - c. The payment eligible window closes after 60 days if a second randomization does not occur.
 - d. If two subjects are randomized within 60 days of each other, a new payment eligible window opens the date that a third subject is randomized.
2. The payment will be issued upon completion of the 90-day follow-up for both subjects.
3. **This payment is separate from and in addition to the existing per subject monies.**

Please remember to keep your **Investigational Product Shipping Contact Information** current within WebDCU™ (Site Management → Site Address → Address category → Investigational product shipping address → Attn full name; Phone; Fax; Email).

The March **MOST Trial Investigator Call** is scheduled for Monday, 15Mar2021 at 2:00 PM ET. Please see below agenda items:

1. MOST Updates
2. MOST Payment for Enhanced Enrollment
3. Modified Rankin Score Recording at Day 90

Please be sure to update the email address for Dr. Opeolu Adeoye (adeoye@wustl.edu) and Iris Deeds (irisdeeds@wustl.edu). Please begin using their respective Washington University in St. Louis email addresses.

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



FASTEST is excited to continue study start-up! We would like to thank you for your continued efforts and hard work getting FASTEST ready to launch.

Our next webinar will be **Tuesday, March 16th at 1:00 pm ET** (change of day/time due to ISC). Prior presentations and slides are available -- please contact the FASTEST team for access, as the FASTEST StrokeNet website, <https://www.nihstroke.net.org/fastest/webinars>, is under maintenance.

The ABC/2 and IVH Score Imaging Training is available, <http://fasteststudy.com>. Team members will need to register for an account, which can take up to 24 hours to activate.

Approved EFIC community-facing template materials, English and Spanish, are available in WebDCU™, in the Toolbox under Project Documents. For the EFIC video, please reach out to the FASTEST team. The EFIC video in Spanish is coming soon! **The updated EFIC forms for local context, community consultation, and public disclosure are now available in WebDCU™.**

A few helpful reminders:

- If you have not submitted an EFIC plan for review, please reach out to the NCC with an update on your site's progress. We would like to hear from sites, even if your site is still developing a plan.
- When you are ready to initiate your EFIC plan, update your DOA log with your EFIC team.
- Reach out if you plan to use the central REDCap survey(s) and need access.

Congratulations to our **23** sites that have submitted EFIC plans to Advarra and are taking next steps to implement them!

Upcoming Advarra EFIC Panel meeting dates -- March 22nd, April 12th and 26th

Please contact Pooja Khanolkar (Prime Project Manager), khanolpa@ucmail.uc.edu or Julie Denlinger (NCC Project Manager), denlinik@ucmail.uc.edu with any questions.



SATURN has 98 sites open for enrollment and has randomized 72 patients!

SATURN would like to recognize **Dr. Shapshack** and **Tammy Davis** at the **University of Alabama Hospital**, Birmingham for being the top enrolling site with 5 randomizations!

We would also like to recognize both **UPMC** and **Kaiser Permanente LA** for having 4 randomizations!

Keep up the great work!

We want to thank everyone for their efforts to screen recruit and randomize! We ask that sites continue to screen every ICH daily!

Reminder: Sites must confirm the clinician prescribing the statin prior agrees with trial participation prior to randomizing a patient. This is part of inclusion criteria #5 and should be documented in the patient record.

Reminder: it is important to communicate the subject's randomization assignment to the inpatient clinical team as well as the PCP to ensure the patient will be discharged with the proper medications and instructions. An amended Provider Follow Up Letter has been cIRB approved, distributed to sites and added to the project toolbox; this updated letter includes a place to note the randomization assignment.

The next monthly SATURN PI/Coordinator webinar will be held 3/25/2021 at 12:30pm ET

SAVE THE DATE: SATURN INVESTIGATOR MEETING (VIRTUAL) will be held April 8th 12:30p-3:30p ET
Invitations went out to site PIs and Primary Study Coordinators; we welcome anyone from your site study team who would like to join, you may forward the Zoom invitation.

SATURN is actively looking to **add motivated sites**; please reach out for further details.

Please complete your **Remote Implementation and eConsent Forms** and return to the NCC for cIRN submission. **REMINDER:** this is required for every SATURN site regardless of whether or not you choose to use remote consent.

SATURN recruitment video may be viewed here: <https://www.nihstrokenet.org/saturn-trial/home>

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

IMPORTANT SATURN CONTACTS:

- **Questions regarding eligibility or protocol implementation**
 - Email: SATURN@bidmc.harvard.edu
- **SATURN Clinical Hotline**
 - Call 617-667-7000 and ask to page beeper #39636.
Please tell the operator that you are calling about the SATURN trial.



Anticoagulation in Intracerebral Hemorrhage Survivors for Stroke Prevention and Recovery

ENROLLMENT:

18 Subjects have been randomized in ASPIRE. 3 more have been consented are pending randomization!

Congratulations to the following sites for randomizing their first subject:

- **University of Cincinnati Medical Center** – PI: **Daniel Woo** Coordinator: **Jennifer Powers**
- **Kaiser Permanente Sacramento Medical Center** – PI: **Mai Nguyen-Huynh** Coordinator: **Patricia Zrelak**
- **Cedars-Sinai Medical Center** – PI: **Konrad Schlick** Coordinator: **Vicki Manoukian**

STUDY NEWS:

Protocol v1.3 was approved by the cIRB on 2/10/2021. The primary change is:

- Removal of exclusion for life expectancy <1 year.
 - Please review your screening logs from the last 1-2 months because patients previously excluded for this condition may now be eligible. Every patient counts!

SITE CHECK-IN CALLS:

We will be contacting sites to schedule check-in calls in the next few weeks. The goal of these calls is to receive feedback regarding the study and to learn about what your experience with the protocol.

INVESTIGATOR WEBINAR:

An online **Investigator Meeting** is being planned for **May 5, 2021 from 2:00p-4:00p EDT**. We hope at least 2 people from each site will be able to attend (preferably, the PI and primary study coordinator).

STUDY NETWORK:

98 sites have been released to enroll and **33 sites** are pending activation.

ASPIRE is looking to add new motivated sites. Please contact ASPIRE@yale.edu if your site would like more information about participating in the ASPIRE Trial.

Our next Webinar is March 24, 2021 3:00p-4:00p EDT.



ACTIV4-A (**INPATIENT STUDY**) is really making strides to help improve outcomes for COVID-19 **patients that have been hospitalized**. Arm-A has already resulted in important new knowledge for clinicians, showing that therapeutic-dose anticoagulation does not benefit patients who are already critically ill, but does help in other hospitalized patients by preventing worsening of disease and development of critical illness. This is a major advance! Arm B was closed in January and interim results indicate that therapeutic-dose anticoagulation benefits patients with approximately 99% superiority.

Arms C and D, which are looking at the use of a P2Y12 inhibitor (e.g., drugs like ticagrelor and clopidogrel) on top of either therapeutic- or prophylactic-dose anticoagulation are now open and are enrolling patients!

We would like to send a huge thank you to the following StrokeNet sites that have agreed to participate:

1. Kaiser Permanente Fontana*
2. Kaiser Permanente Los Angeles*
3. Swedish Medical Center
4. Queens Medical Center
5. Doctor Medical Center Modesto
6. Spectrum Health (Butterworth Hospital)
7. SUNY Upstate University Hospital*
8. St. Mary's Hospital & Regional Medical Center
9. Mercy Health St. Vincent Hospital*
10. Mercy Hospital Buffalo*

We are proud of how our network is stepping up and taking on this very important national priority while dealing with the stresses and challenges of clinical care during this pandemic.

We hope to have 5 of the sites above* activated and enrolling by no later than March 15. The remaining sites are finalizing startup activities and routing through their internal processes for approval and should be up in running no later than the end of March.

We will be sending out an email blast this week to try and recruit more sites for this exciting and important trial! If interested in participating please reach out to Amy Sulken, Project Manager (sulkenay@ucmail.uc.edu or 513-258-1876).



ACTIV4-C (**POST HOSPITAL**) is an adaptive, prospective, randomized trial designed to compare the effectiveness and safety of antithrombotic therapy with no antithrombotic therapy **after hospitalization** for 48 hours or longer for COVID-19. For Stage 1 of this study, participants will be randomized to either prophylactic anticoagulation or no anticoagulant therapy for 30 days, and then followed for an additional 60 days after the completion of treatment (total duration of follow-up, approximately 90 days). Biobanking of samples for future biomarker and mechanistic studies will be available for sites able to participate and collect samples from eligible participants. Samples will be collected at the time of enrollment and after the completion of 30 days of therapy. By participating in ACTIV4-A Inpatient Study, StrokeNet has discovered that in addition to cardiologists or internists, StrokeNet colleagues have also served as Site PIs and it is working well.

Study start-up packets will be distributed to 6 sites in ACTIV4-A interested in participating in ACTIV4-C later this week. If interested in participating or if you have any questions, please reach out to Amy Sulken, Project Manager (sulkenay@ucmail.uc.edu or 513-258-1876).

Feasibility Survey Reminder

The **ADIOSS Feasibility Survey** has been sent to RCCs for review and completion. This is an ancillary study to SleepSMART.

Surveys **MUST** be completed in WebDCU™ by 11:59pm ET on Monday March 29th.

NIH News

REMINDER: Switch Early to the new Secure Two-Factor Authentication Required to Access eRA Modules!

Users of eRA Commons, ASSIST, Internet Assisted Review (IAR) and Commons Mobile are encouraged to begin their switchover to the new two-factor authentication (2FA) login method (via login.gov) required to access eRA modules before the mandatory **deadline of September 15, 2021** for all users. The authentication will help ensure the security of your personal and confidential information in these systems.

For a three-step guide to set-up, visit https://era.nih.gov/files/2FA_flyer.pdf. Tutorials are available at <https://era.nih.gov/era-training/era-videos.htm#2FA>.

FY 2021 Fiscal Policies for Grant Awards: Funding Levels, Salary Limits, and Stipend Levels

NIH issued guidance for NIH Fiscal Operations for FY 2021 including the following policies:

- **FY 2021 Funding Levels:** Non-competing continuation awards made in FY 2021 will generally be issued at the commitment level indicated on the Notice of Award.
- **Ruth L. Kirschstein National Research Service Awards (NRSA):** NIH will increase NRSA stipends by approximately two percent for predocs and two percent for postdocs.
- **Next Generation Researchers Initiative Policy:** NIH will prioritize meritorious R01-equivalent applications from Early Stage Investigator (ESI) PD/PIs.
- **Salary Limits:** Salary limit is set at \$199,300.

For additional information, please visit <https://grants.nih.gov/grants/guide/notice-files/NOT-OD-21-058.html>.

NIH StrokeNet Coordinator Webinar

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

Wednesday, March 24, 2021

1:30 pm ET

Topics: ASPIRE Updates
Study Manager Updates

Presenters: Laura Benken, ASPIRE NCC Project Manager
Catherine Viscoli, ASPIRE Prime Project Manager

Moderator: David Haney, RT, Case Western Reserve University

Steering Committee Call

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

The NIH StrokeNet Spring Network Webinar is scheduled for Wednesday, 14-April, 2021, from 12 noon – 3:00 pm ET. An agenda will follow soon.

Professional Development Webinar

Professional Development Webinars are a requirement for the NIH StrokeNet Trainees
The next PDW is TBD. We will keep you posted.

Grand Rounds

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

Thursday, March 25, 2021

4:00 pm ET

Topic: Gloves Off

Presenters: Dawn Kleindorfer, MD, University of Michigan
Lee Schwamm, MD, Massachusetts General Hospital

Moderator: Randy Marshall, MD

To join the meeting: <https://nihstrokenet.adobeconnect.com/grandrounds/>. 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. (877) 621-0220
Passcode: 190825

NIH StrokeNet Employment Opportunities

Medical University of South Carolina - Stroke Faculty Position in Charleston, SC

The Medical University of South Carolina (MUSC) Department of Neurology is recruiting a Vascular Neurologist as part of further expansion of our pre-eminent Comprehensive Stroke Program. The successful applicant must be board-eligible or board certified in general neurology and have completed ACGME-fellowship training in Vascular Neurology.

MUSC is one of the busiest stroke programs in the Southeast and is the tertiary referral center for most large artery strokes in the state. MUSC is a leader in the South Carolina Telestroke Alliance and currently provides acute stroke care to 30+ SC hospitals and admits over 1200 stroke patients annually. MUSC also has a robust clinical research enterprise and is a national leader in investigator-initiated research and clinical trials, including serving as a regional coordinating center in the NIH-funded StrokeNet.

The chosen candidate for this position will be appointed as an Assistant Professor (or higher commensurate with experience) on the Clinician Educator Track. He/she will participate in the clinical activities within the MUSC Stroke Program including rounding on the Inpatient Stroke Teaching Ward Service, the Stroke Consult Service, Outpatient Stroke Clinic, and the Telestroke consult program. Exposure and familiarity with tele-stroke and tele-neurology consultations and services is suggested. Excellent communication skills, ability to work collaboratively in an interdisciplinary setting, and experience teaching vascular neurology fellows, house-staff and medical students, as well as experience with clinical trials are desired. *Position available starting July 2021.*

For more information, please contact Dr. Tanya Turan, Stroke Division Director at turan@musc.edu or 843-792-3020.

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

Contact: Jamey Frasure, PhD, RN, Administrative Director · frasurjs@ucmail.uc.edu <https://www.nihstrokenet.org>