Biweekly Update
29-January 2021

StrokeNet Enrollment Update

ARCADIA	573/1100	TRANSPORT2	22/129
ARCADIA-CSI	135/500	I-ACQUIRE	41/240
Sleep SMART	409/3062	MOST	126/1200
SATURN	51/1456	CREST H	177/500
ASPIRE	13/700	CREST 2	1773/2480

*Enrollment as of 28-January 2021

StrokeNet Trial Updates

SATURN

SATURN has 93 sites open for enrollment and has randomized 51 patients! We want to thank everyone for their efforts to screen recruit and randomize! We ask that sites continue to screen every ICH daily!

Reminder: it is important to communicate the subject's randomization assignment to the clinical team once randomization is completed to ensure the patient will be discharged with the proper medications and instructions.

SATURN held the monthly PI/Coordinator webinar 1/28/2021

Please find the recording here: https://www.nihstrokenet.org/saturn-trial/webinars

The next monthly SATURN PI/Coordinator webinar will be held 2/25/2021 at 12:30pm EST

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

SATURN has received approval for central REDCap eConsent and **Remote Implementation and eConsent Forms** were distributed to all US Sites for completion. **Please complete and return these forms as soon as possible**. The site-specific eICF templates are pending one final cIRB approval and then they will begin to be distributed.

SATURN has received approval on a recruitment video.

The video may be viewed here: https://www.nihstrokenet.org/saturn-trial/home

Sites were sent a communication with all available links to the SATURN Video as well as the regulatory approval documents.

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 STAURN 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.

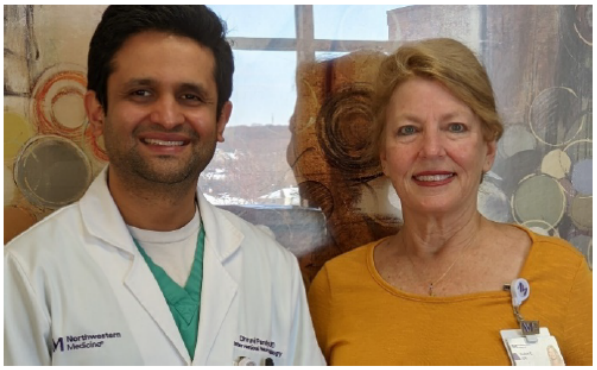
***Please tell the operator that you are calling about the SATURN trial.

ASPIRE

Anticoagulation in Intracerebral Hemorrhage Survivors for Stroke Prevention and Recovery

ENROLLMENT:

Congratulations to **Dr. Dhruvil Pandya** and **Robin Schmidt** at **Central DuPage Hospital, Winfield IL** for enrolling lucky number 13 into ASPIRE last week!



STUDY NEWS:

A protocol modification was submitted to the cIRB on 1/27. Changes include:

- Removal of exclusion for life expectancy <1 year.
- Addition of procedures to minimize losses-to follow up and ensure ascertainment of vital status for all subjects.
- Several measures have been moved from baseline to screening (after informed consent obtained). These changes have been made to reduce the amount of time required to complete the baseline/randomization visit and to clarify sequence of study activities.

When screening ICH patients for the study, please remember:

- Although a majority of patients with ICH will rule-out for ASPIRE, eligible patients are there!
- ICH patients with atrial fibrillation are often elderly and frail and may not seem like a good RCT candidat e. But this is the population of interest for ASPIRE and exactly who we want to enroll.
- If you find a patient who qualifies for the study, we recommend you consent the patient or LAR prior to hospital discharge and work out the logistics for randomization in 14-120 day post-ICH window.

STUDY NETWORK

92 sites have been released to enroll and **38 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 February 24, 2021 3:00p-4:00p EDT.

Congratulations to the Boston Site for randomizing 14 participates so far!

We now have **41** study participants enrolled. Everyone's hard work is greatly appreciated!

- Ann Arbor, MI – **5** participants randomized
- Boston, MA – **14** participants randomized
- Cincinnati, OH – **4** participants randomized
- Columbus, OH – **5** participants randomized
- La Jolla, CA – **5** participants randomized
- New Haven, CT – **3** participants randomized
- Philadelphia, PA – **1** participant randomized
- 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, 2/1/2021 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) or Julia Gonzalez, (Julia.jackson@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 re-open to enrollment amidst the COVID-19 restrictions. Cleveland VA has received IRB approval and are finalizing study start-up activities. We are hopeful that our last pending site will open in the next month. There are 22 subjects randomized in the trial, 15 have completed the study and we have several subjects we are hoping to randomize this month.

A new protocol amendment has been approved through the CIRB as of 12/10/2020. Changes include a clarified schema and schedule of activities, allowing sites to use video for prescreening, and an increase of the number of training subjects for more efficient site training.

-TRANSPORT2 Team

ARCADIA

ARCADIA: Gratitude and Momentum

Thank you for joining us for our virtual ARCADIA Investigator Meeting this past Tuesday January 26. It's always good when we can get together as a team! We were able to summarize what we have achieved, what we've learned from you all, and share the experiences and ideas from various experts. We hope you found the event educational and enjoyed the presentations.

The slide sets and links to the recorded Investigator Meeting will soon be available in the StrokeNet website. Please feel free to share with your team. In the meantime:

- Full meeting: https://youtu.be/LanlWUZMius
- Coordinator Breakout Room: https://youtu.be/gyAzizY-hBk

Enrolment highlights: In 2020, you randomized 171 participants at 77 sites during a global pandemic! Let's keep up the enrollment momentum and continue to work on ways to also increase our retention of the subjects you've worked so hard to enroll in the trial. You have proven your commitment. If anyone can do this, it's YOU!

You have randomized a total of 571 participants since the study started, an increase of 6 in less than two weeks. A special thanks to the six teams that provided the last randomizations during this period: Barnes Jewish Hospital, St. Louis, MO; Medical University of South Carolina University Hospital, Charleston, SC; Montefiore Medical Center, Bronx, NY; University of Michigan University Hospital, Ann Arbor, MI; UPMC Presbyterian Hospital, Pittsburgh, PA and Wake Forest Baptist Medical Center, Winston-Salem, NC – what a way to start the first month of the year!

We still have a pool of 44 subjects eligible and pending randomization. We understand that not all can be randomized immediately; however, please continue to conduct randomization visits safely and per protocol.

We are currently at 2180 subjects enrolled/consented, an increase of 38 during this period, thanks to 30 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! A special thanks to the following teams for enrolling multiple subjects during this period:

- Enrolling 3 participants:
  - Emory University Hospital, Atlanta, GA
- Enrolling 2 participants each:
  - Cox Medical Center South, Springfield, MO; Hospital of the University of Pennsylvania, Philadelphia, PA; McLaren Macomb, Mount Clemens, MI; Memorial Hermann Texas Medical Center, Houston, TX; Methodist University Hospital, Memphis, TN and North Shore University Hospital, Manhasset, NY

Bon Secours St. Mary's Hospital, Richmond, VA enrolled their 1st subjects during this period. A new 2020 site showing their commitment and perseverance – great job Bon Secours Team!

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

We hope to continue to re-start sites as per the ARCADIA re-start plan for the 7 sites still pending re-release to enroll. We understand some of the sites cannot yet re-start, but those that can re-start enrollment, even if only remotely, please reach out to Rebeca (ra2356@cumc.columbia.edu) to review any pending items needed for your re-release. PLEASE do not start enrolling new subjects until your site has been officially re-released to enroll.

Webinar: Our next PI and coordinator webinar will be February 23rd at 2 PM Eastern--save the date! We're asking that at least 1 person from each site to 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://www.nihstrokenet.org/intranet/minutes/trial-webinars

ARCADIA•CSI
Cognition & Silent Infarcts

Site Startup and Enrollment Updates

Sites: 72/108 **Subject Enrollment: 134/500**
Enrollment has been challenging in the wake of Covid19, however the use of eConsent has alleviated some of the burden. We look forward to working with sites to institute eConsent at most, if not all of our sites.

Congratulations to the following sites who have agreed to join CSI:

Vanderbilt University Medical Center
Lenox Hill Hospital
NYU Langone Medical Center - Brooklyn

Important Updates

Continuing Review: The continuing review for CSI is now underway. Please send in your fCOI forms (PI only) and a completed CR form. We have just a few sites that still need to send in information. Please let us know if you have any questions.

eConsent: Please complete and return the Remote Implementation form for your site, if you haven't done so already. This form lets us know if your site will need an eConsent database in RedCAP.

Form 515: We have several sites that have enrolled subjects into CSI but have not completed Form 515. The form is found in the ARCADIA database and must be completed within a few days of enrollment into the study. If the subject declines, you will still need to complete the form.

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

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

We have surpassed 400 subjects randomized! As of January 27, 2021, 1198 subjects have been enrolled and 408 subjects have been randomized.

Congratulations to the following award-winning sites for being our top randomizers of 2020:

Moses H. Cone Memorial Hospital, Greensboro, NC; PI Pramod Sethi MD, coordinators Glynda Reaves and Rizwan Sabir	**28 subjects**
Brooks Rehabilitation Hospital, Jacksonville, FL; PI Parag Shah MD, coordinators Taisiya Matev and Eileen Daugherty	**25 subjects**
Sarasota Memorial Hospital, Sarasota, FL; PI Mauricio Concha MD, coordinator Jeanette Wilson	**9 subjects**
University of Cincinnati Medical Center, Cincinnati, OH; PI Natalie Kreitzer MD, coordinator Sadie Caldwell	**7 subjects**
North Shore University Hospital, Manhasset, NY; PI Rohan Arora MD, coordinators Prat Subramaniam and Kirendra Pasram	**7 subjects**
Oregon Health & Science University Hospital, Portland, OR; PI Hormozd Bozorgchami MD, coordinator Amber Lee	**7 subjects**
Prisma Health Richland Hospital, Columbia, SC; PI Souvik Sen MD, coordinator Phil Fleming	**7 subjects**
McLaren Flint, Flint, MI; PI Mahmoud Rayes MD, coordinator Marci Roberts	**7 subjects**

There was a 5-way tie for 4th place.

IMPORTANT INFORMATION TO REMEMBER:

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.

A "warm transition" for intervention (CPAP) subjects should be completed sometime prior to discharge. This contact between intervention subjects and the FusionHealth Care Team helps facilitate CPAP adherence post-discharge.

End of Study (EOS): If you have a subject who moved to EOS, please document in the 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.

Don't forget to ask each subject (or LAR) who is eligible for randomization based on aCPAP run-in night, if he/she agrees to randomization (may not wish to be randomized to CPAP if had unfavorable experience or may not wish to be randomized to control arm if had very favorable experience).

Re-Opening: If your site is ready to be re-released to enroll please email Kayla or Joelle for further instructions.

SAVE THE DATES:

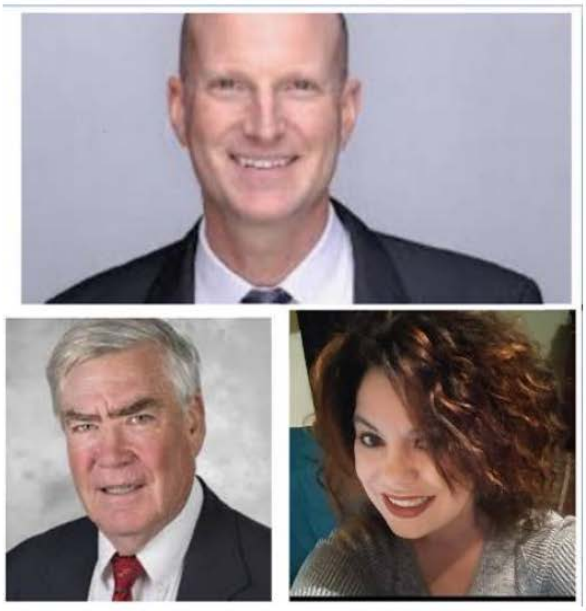
PI/Coordinator webinar February 1, 2021 2-3 EST

Virtual Investigator Meeting June 7, 2021 1-4 EST

From the CREST-2 Clinical Coordinating Center:

1773 Overall	934 CEA	839 CAS

Great Progress! We've had 14 randomizations this month, with **50%** of them being from StrokeNet sites! Congratulations to **Novant Health, Oregon Health & Science University, Ochsner Health, Columbia University, OhioHealth, and Mercy Health St. Vincent** for their contributions for the month of January! We would also like to give a special shout-out to the CREST-2 team at The Miriam Hospital for randomizing 4 patients between December and January! Pictured: **Dr. Herb Aronow (Principal Investigator), Dr. Robert Patterson (Surgeon), and Lina Felix (Coordinator).**



Site Startup and Enrollment Updates: sites: **56**; enrollments: 177/**350**

WE HAVE PASSED 50%!!

CREST-2 has just over 700 patients left to recruit. We need 173 them for CREST-H. Let's continue the pace to meet our target. Keep an eye out for asymptomatic carotid patients and let's keep the enrollment going!

Enrollment tip, although signed consent for CREST-H must take place after CREST-2 randomization occurs, you can minimize the number of visits for your patients by verbally consenting the patient for CREST-H at the time of the discussion of CREST-2 imaging. Then, schedule the MR or CT scan and have them sign the consent form when they come in for the scan.

Interested in becoming a CREST- 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.

MOST
Multi-Arm Optimization of Stroke Thrombolysis

MOST Enrollment Update:
Total randomizations: **126**
Randomizations between 12Jan2021 and 26Jan2021: **3**
Sites released to enroll with at least one subject consented: **36**
There are now **71** sites that have been released to enroll, **29** of which are actively recruiting!

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

- Barnes Jewish Hospital - Dr. Panagos and Jennifer Babka. **(1 new subject, 2 total subjects!)**
- Abington Memorial Hospital - Dr. Choe and Ashley DePalmo **(1 new subject, 4 total subjects!)**
- Wake Forest Baptist Medical Center - Dr. Bushnell and Karin Haski **(1 new subject, 8 total subjects!)**

Sites are required to obtain HIPAA authorization for each subject at the time of consent. Each site must use their CIRB approved standalone HIPAA document. Please also ensure the site's **CIRB approved Participant Study Information Sheet** is provided to the subject or the subject's legally authorized representative at the time of consent. All sites will be required to upload the signed Informed Consent (IC) document and the signed standalone HIPAA document for remote monitoring by the NDMC, effective immediately. The two signed documents must be uploaded into WebDCU™ as a single PDF file.

Sites must use their CIRB approved PDF version of the IC for consenting subjects. The Word version of the IC should only be used when a site specific update is required to be submitted to the CIRB for review/approval. The Word version of the IC should not be used for consenting subjects.

Please continue to work diligently to complete the study drug administration retraining and upload the **Study Drug Administration Retraining Attestation** form in WebDCU™. This is a requirement to be re-released to enroll. Please note, reviewing the study drug administration retraining slides via email satisfies the retraining requirement. Thank you to those 29 sites who have already completed this prerequisite for reactivation.

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.

Thank you to everyone that attended, and contributed, during our January monthly PI/coordinator webinar, with the focus on **EFIC**. Our next webinar will be **Wednesday, February 17th at 2:00 pm ET**. Prior presentations and slides are available on the StrokeNet website, https://www.nihstrokenet.org/fastest/webinars.

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 on WebDCU™, in the Toolbox under Project Documents. We hope you enjoy and find useful the FASTEST EFIC video, now available! The FASTEST EFIC video in Spanish is coming soon!

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 and need access.

Congratulations, we now have **23** sites that have submitted EFIC plans to Advarra and are taking next steps to implement them! Since the last update -- **The Queen's Medical Center and Wake Forest Baptist Medical Center!**

Upcoming Advarra EFIC Panel meeting dates -- February 8th and 22nd, March 8th and 22nd

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

ACTIV-4
Acute Inpatient Anti-Thrombotic Study

ACTIV4-A is currently on hold. Arm A was closed due to futility and potential harm for severely ill patients (ICU level of care). Arm B has been closed as well based on the interim results of more than 1,000 moderately ill patients admitted to hospital, findings showed that full doses of blood thinners, in addition to being safe, were superior to the doses normally given to prevent blood clots in hospitalized patients—with regard to the primary endpoint which is the need for ventilation or other organ supportive interventions. A trend in possible reduction of mortality was also observed and is being studied further.

The trial investigators are now working as fast as possible to make the full results of the study available so clinicians can make informed decisions about treating their COVID-19 patients.

Additionally, they are looking at options for the addition of Arm C – more information will be provided in the coming weeks.

We have 12 sites in start-up with a target of 20 sites. While waiting for a revised protocol sites have been instructed to prepare all other documents for submission to WIRB. Subaward agreements have been sent to 9 of 12 sites, the other 3 will be sent once the decide who will be the PI. eSOCDAT training for PIs and Lead Coordinators will be held next week on Monday and Thursday so they can start uploading required documents and normal lab ranges for their site.

ACTIV-4 – In the News

Please visit the link below to the NIH press release in regard to the ACTIV-4 trial - A Multicenter, Adaptive, Randomized Controlled Platform Trial of the Safety and Efficacy of Antithrombotic Strategies in Hospitalized Adults with COVID-19 (ACTIV-4 ACUTE).

As you know, StrokeNet plays a role in this important trial, and Dr. Broderick thought you would be interested in reading about the progress:

Full-dose blood thinners decreased need for life support and improved outcome in hospitalized COVID-19 patients.
https://www.nih.gov/news-events/news-releases/full-dose-blood-thinners-decreased-need-life-support-improved-outcome-hospitalized-covid-19-patients

NIH News

Writing an Effective "K" Application: A Video Guide

Do you need some guidance on preparing a K Award application for the NIH? Dr. Kay Lund, Director of Division of Biomedical Research Workforce, gives some great tips in a 25-minute YouTube video, "Writing an Effective 'K' Application." It is designed for junior investigators and those who assist in the preparation of the scientific portions of an application.

The video covers points including:

- Currently active K award funding opportunity announcements & where to find them
- A breakdown of the different K awards
- Planning tips
- Application requirements
- Review criteria

You will also learn how to avoid the most common mistakes in writing K applications, as well as some typical misconceptions about the review process.

***NEW* COVID-19 Research Website**

The NIH has announced the new NIH COVID-19 Research Website, which launched last week https://covid19.nih.gov/. The site provides a central location for trusted, up-to-date, accurate information about NIH research and our strategic role in COVID-19 research. The site complements information made available on our COVID-19: Information for NIH Applicants and Recipients of NIH Funding webpage.

The new site includes information about key programs such as the Accelerating COVID-19 Therapeutic Interventions and Vaccines public-private partnership and the Rapid Acceleration of Diagnostics initiative to develop state-of-the-science diagnostic tests for COVID-19. Users are also able to search information on funded research by state, institution, Congressional district, and more.

Feasibility Survey Reminder

Just a reminder, the **PHENOM** Feasibility Survey must be completed in WebDCU™ by 11:59pm ET on Wednesday, **February 10th.**

An inpatient rehabilitation facility survey (IRF), that aims to measure how many inpatient rehabilitation facilities (IRF) are in your RCC was sent to RCCs earlier this month. This survey, created by Steve Cramer, Chair of the StrokeNet Recovery and Rehabilitation Working Group, is not mandatory, however greatly encouraged. It is due Friday, **5-February, 2021**.

Thanks in advance!

NIH StrokeNet Coordinator Webinar

Coordinator Webinars are a requirement for the NIH StrokeNet RCC Coordinators/Managers however, all are welcome to attend
Wednesday, February 24, 2021
1:30 pm ET

Topic TBA

Steering Committee Call

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

The next Steering Committee call is scheduled for **Wednesday, 10-March, 2021, at 11:00 am ET.** Join us for "StrokeNet Goes to the Movies"!

***Please note that the NIH StrokeNet Spring Network Webinar is scheduled for Wednesday, 14-April, 2021, from 12 noon – 3:00 pm ET.**

Grand Rounds

Grand Rounds are a requirement for the NIH StrokeNet Trainees, however all are welcome to participate.
Thursday, February 25, 2021
4:00 pm ET

Topic:	Robotics & Physiology of Recovery of Function after Stroke
Presenter:	George Wittenberg, MD, PhD, University of Pittsburgh
Moderator:	Farhaan Vahidy, 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

Professional Development Webinar

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

NIH StrokeNet Employment Opportunities

Data Management Director – Department of Public Health Sciences

Medical University of South Carolina - NIH StrokeNet National Data Management Center (NDMC)

The NDMC is searching for a Data Management Director. This person will serve as the Data Management Director for assigned StrokeNet studies, assist the NDMC StrokeNet Program Manager with network responsibilities, and assist with Site Monitoring Manager responsibilities for assigned StrokeNet studies.

Job Duties:

- Serve as the Data Management Director for assigned DCU studies. Direct, implement, oversee, and manage all project specific data management activities for assigned projects. Provide comprehensive guidance and direction to collaborators pertaining to data management issues.
- Assess data management procedures with a focus on risk in accordance with the FDA policies and guidance on centralized monitoring and electronic health systems, and implement changes to ensure high quality data.
- Direct and oversee the activities of external site monitors. Coordinate all necessary contractual and financial paperwork for monitoring activities, ensuring that all required monitoring can be completed within the allowed budget. Work with study team and coordinate with external monitors to ensure study-specific monitoring plan is followed appropriately.
- Conduct post-installation studies and evaluations. Ensure system meets the requirements of the end users. Review software data. Design and write SQL code for data cleaning procedures.
- Perform and document on-going end-user database system validation. This includes validating the data entry screens and other system modules (such as regulatory document, drug tracking, randomization, and monitoring) to ensure accuracy and appropriateness of data fields, data types, codelists, and validation rules. Troubleshoot web pages, check grammar and spelling, and verify links during database validation.
- Coordinate the planning and development of database systems. Maintain good relations with the sponsor officials, vendors and users. Consult with sponsors on software packages and hardware. This includes providing information regarding the capabilities of the software and customizing the software to meet the needs of the sponsor. Provide comprehensive guidance and direction to users regarding clinical database systems and data management processes including user hardware and software training.
- Evaluate system for accuracy, efficiency, and intuitiveness. Survey users, including principal investigators, enrolling sites, central pharmacists, adjudicators, and safety monitors, regarding software satisfaction. Relay information to IS team for consideration and implementation.
- Coordinate and lead internal study meetings. Prioritizes the work being conducted in a constantly changing environment. Provide information regarding resource allocation and needs within the unit.

Link for more information and to apply: https://careers.pageuppeople.com/756/cw/en-us/job/526486/univ-data-management-director-dcu-public-health-sciences-phs

Please contact Jessica Griffin (simonsjl@musc.edu, 843-792-1677) at the NDMC with any questions.

University of Illinois at Chicago (UIC)
College of Medicine
Vascular Neurology Faculty Positions

The University of Illinois at Chicago (Department of Neurology) and the UI Hospital and Health Sciences System are undergoing a major Neurology expansion. Positions are currently available for Vascular Neurologists. Successful candidates will join a multidisciplinary team that treats a high volume of complex stroke patients as part of UI Health's Comprehensive Stroke Certified program. The ideal candidates should have completed an ACGME-approved fellowship and be board certified (or board eligible) in vascular neurology. In addition, the candidates should have a strong academic interest. A track record of leadership and research is preferred but not required. The new faculty will have access to cutting edge treatment modalities and will have a significant impact on building the program further. Salary/rank/tenure is commensurate with experience. A competitive start-up package including protected time for academic development is available to qualified
applicants.

Interested parties should send curriculum vitae and statement of interest to FD Testai, MD, PhD c/o David Katz at davkatz@uic.edu . Please call 312-355-1748 for additional information.

The University of Illinois at Chicago is an Equal Opportunity, Affirmative Action employer. Minorities, women, veterans and individuals with disabilities are encouraged to apply.

University of Chicago
Department of Neurology
Neurohospitalist Faculty Position

The University of Chicago's Department of Neurology is searching for a full-time faculty member at any rank who will provide direct patient care managing hospitalized patients with complex neurological sub-specialty needs. This position will be a mix of community hospital and academic medical center practice beginning initially at UCM's Ingalls Memorial Hospital but with effort at other community hospitals and at UCM's Hyde Park hospital as the group of neurohospitalists grows to a dedicated section in the department. This position will also encompass academic effort, including providing education and oversight to medical students, residents and fellows.

We especially welcome applicants with training in vascular neurology or neurohospitalist fellowships. Academic rank and compensation (including a generous package of fringe benefits) are dependent upon qualifications.

Prior to the start of employment, qualified applicants must: 1) have a medical doctorate or equivalent, 2) hold or be eligible for medical licensure in the State of Illinois, and 3) be Board certified or eligible in Neurology or equivalent.

To be considered, those interested must apply through The University of Chicago, Academic Recruitment

job board, which uses Interfolio to accept applications: http://apply.interfolio.com/82306. Applicants must upload: CV including bibliography and a cover letter. Review of applications ends when the position is filled.

For instructions on the Interfolio application process, please visit http://tiny.cc/InterfolioHelp.

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

Please share your satellites and study teams!

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