

You have a Study Ready to open, Now What?

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CRP Committee Education Session

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Presentation Objectives

- Understand the Process of Preparing a Study for Accrual
- Develop Logistic Checklists for Your Individual Institution
- Documentation Examples to make your life easier



Background and Education

- BSN Nursing 1974 University of Pittsburgh
- 16 years in Clinical Research (Thoracic Surgery)
- 12 years combined with ACOSOG and Alliance
- Member of the Clinical Research Professionals Committee
- Surgical Liaison, Oncology Nursing Committee



Where do I Start?

- The IRB Approval has been Received
- Staff Implementation Meetings are Completed
- But if you have not planned ahead and put a process in place, this may be in your future...



Warning!





The time to start planning is before the study is opened.

- Review the protocol for study specifics
- Prepare a logistics checklist
- Review protocol required documentation
- Check CTSU website for any CRF's required by the study.



But Why?

- "First Patient-itis" is bad enough...why make it more difficult
- Makes the next patient process easier
- Another coordinator can step in with easy to follow instructions.
- No need to "re-invent the wheel" each time



Logistics Checklist

14-166 ALCHEMIST Screening Study Logistics Checklist for Preoperatively Consented Patients

| Patient Name | Initials | ID# |
|---|---|--|
| Pre-registration eligibility criteria: | | |
| Biopsy proven non-squamous NS differentiated carcinoma, favor including adenosquamous and adenocarcinoma. Clinical IB (≥ 4 cm), II, or IIIA NSC ECOG Performance Status 0-1 ≥18 years of age No neoadjuvant chemo or RT fo No prior or concurrent malignan skin cancer or in situ carcinomas considered a concurrent malign ineligible. No prior treatment w/agents targential potential patients who have had local geresult. | adeno OR suspeption of the suspection of the s | ected non-squamous NSCLC, ated carcinoma, favor er ars, except non-melanoma orimary lung cancer is d make the patient tation or ALK rearrangement oregnant or nursing |
| When presenting the study to the patient: | | |
| The purpose of the study is to identify por patient can be told that there are treatmentations, but they are not required to talk into detail about the treatment studies. If will present the appropriate study to the p | ent studies avail ce part in those patients are elic | able if they test positive for studies. There is no need to go |
| Consented pt w/ histologically con | firmed adenoco | arcinoma and tumor \geq 2 cm |
| Enter patient as screening in C Pre-register patient in OPEN or pre-registration for the chart; e Enter the patient into Rave – c Refer to Blood Specimen work | n CTSU website. enter ID number complete/enter | into CTMA page 3 of CRF packet |



Logististics Checklist

| Coi | nsented patients w/ suspected adenocarcinoma Enter patient as screening in CTMA. If patients meets the eligibility requirements on final path, the blood can be obtained at the postoperative visit |
|-------------------------|--|
| For Pre-regis | stered patients, after surgical resection, when pathology report has returned: |
| | atient meets the registration eligibility criteria: Completely resected non-squamous NSCLC (including adenosquamous and poorly differentiated NSCLC, as long as squamous is not favored) Pathologic Stage IIIA, II, or IB≥ 4 cm Adequate FFPE tissue available for central EGFR and ALK genotyping. (Tumor must be ≥ 2 cm in diameter) the above are met, order slides from pathology. (See pathology request structions). Register patient in OPEN. Print the confirmation of registration for the chart. Update patient's status in CTMA. Update patient in RAVE – complete/enter page 4 of CRF packet Submit slides (per Tissue submission Checklist) as soon as they are ready. |
| For consenter returned: | ed patients w/ suspected adenocarcinoma. When final pathology has |
| | ent meets the registration eligibility criteria: |
| | Completely resected non-squamous NSCLC (including adenosquamous and poorly differentiated NSCLC, as long as |
| | squamous is not favored) |
| | Pathologic Stage IIIA, II, or IB <u>></u> 4 cm |
| | Adequate FFPE tissue available for central EGFR and ALK |
| | genotyping. (Tumor must be ≥ 2 cm in diameter) |
| If the | above are met, order slides from pathology. (See pathology request |
| | ctions). |
| | Pre-register patient in OPEN. Print the confirmation for the chart; enter ID |
| | number into CTMA |
| | Enter patient into RAVE – complete/enter page 3 in CRF packet |
| | Register patient in OPEN |
| | Update patient in RAVE – complete/enter page 4 in CRF packet |
| | Submit slides (per Tissue submission Checklist) as soon as they are |
| | ready. |
| | Obtain blood at patient's post-op visit. Enter order into EPIC prior to clinic visit. (See blood submission instructions) |



Add checklists as needed

- Pre vs Post operative consent
- Tissue Sample/Blood Draw checklists
- Radiology



Study Required Documentation

- Study Specific Documents for Eligibility Criteria, Adverse Events, Study Visits
- Forms can be completed by hand or on the computer
- Signatures of Coordinator and Physician



Supporting Documentation

| Patient Name: Study ID# Treating Physician: Study Number: 07-150 CALGB 140503 Principal Investigator: Matthew Schuchert, MD | | | | |
|---|--|--|--|--|
| Visit: 6 month 12 month 18 month 24 month 3 year 4 year 5 year | | | | |
| 7 year Interim | | | | |
| Visit Date: | | | | |
| Radiologic Studies: Date: $\ \ \Box$ Chest CT through adrenals $\ \ \Box$ PET/CT $\ \ \Box$ Out of window (see note) | | | | |
| Results: No Evidence of Disease Possible Recurrence | | | | |
| Site of Recurrence: ☐ Local ☐ Regional ☐ Distant ☐ See note | | | | |
| Pulmonary Function Testing (Due at 6 month only) Date: ☐ Out of window (see note) | | | | |
| Physical Exam ECOG Performance Status: See note | | | | |
| Vital Sign: Temp: Pulse: Blood Pressure: Weight: | | | | |
| Surgery indicated for recurrent disease: N/A Yes See note | | | | |
| Chemotherapy since last visit for this lung cancer? | | | | |
| Where was treatment received? Start of treatment date | | | | |
| Chemotherapy agents | | | | |
| Radiation Therapy since last visit for this lung cancer? | | | | |
| Where was treatment received? Start of Treatment date | | | | |
| New Primary Cancer diagnosed since last visit? | | | | |
| Site of new primary Where was diagnosis made? | | | | |
| RN/CRA Signature Date | | | | |
| Physician Signature | | | | |



Supporting Documentation

| Patient Name: | Study ID# | |
|--------------------------|-----------|-----|
| | | |
| Notes: | | |
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Consent Packets

- Consent
- Logistics Checklist/s
- CRF Packet
- Eligibility Supporting Documentation



Summation

- Although it may seem to add extra work, pre-study preparation can be a time saver
- Having checklists for studies you may not be familiar with can prevent eligibility mistakes and future Audit nightmares



Conclusion

- Questions
- Further questions?
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