

News

It has been another good month for REVIVED. Congratulations to John Greenwood, Mark Kearney, Michelle Anderson, Kathryn Somers and the rest of the team at Leeds General Infirmary who recruited their first patient. Site visits were held at Pinderfields Hospital, Yorkshire and Northern General Hospital, Sheffield. Both sites are now ready and eager to recruit. R&D approval was gained at Portsmouth and they are now screening and awaiting site initiation. Finally, Matthew and Rebecca from the CTU observed a PCI being performed to better understand what happens to patients in the trial. *“It was fascinating to see a PCI first hand and we both learned a lot from it” Matthew Dodd, Data Manager.*



Patient Tracking Month

November is Patient Tracking month. This month the focus will be on the different ways of tracking patients as they progress through the screening process. With the removal of the screening log last month, there are also details of the new screening requirements. See page 2 for details.

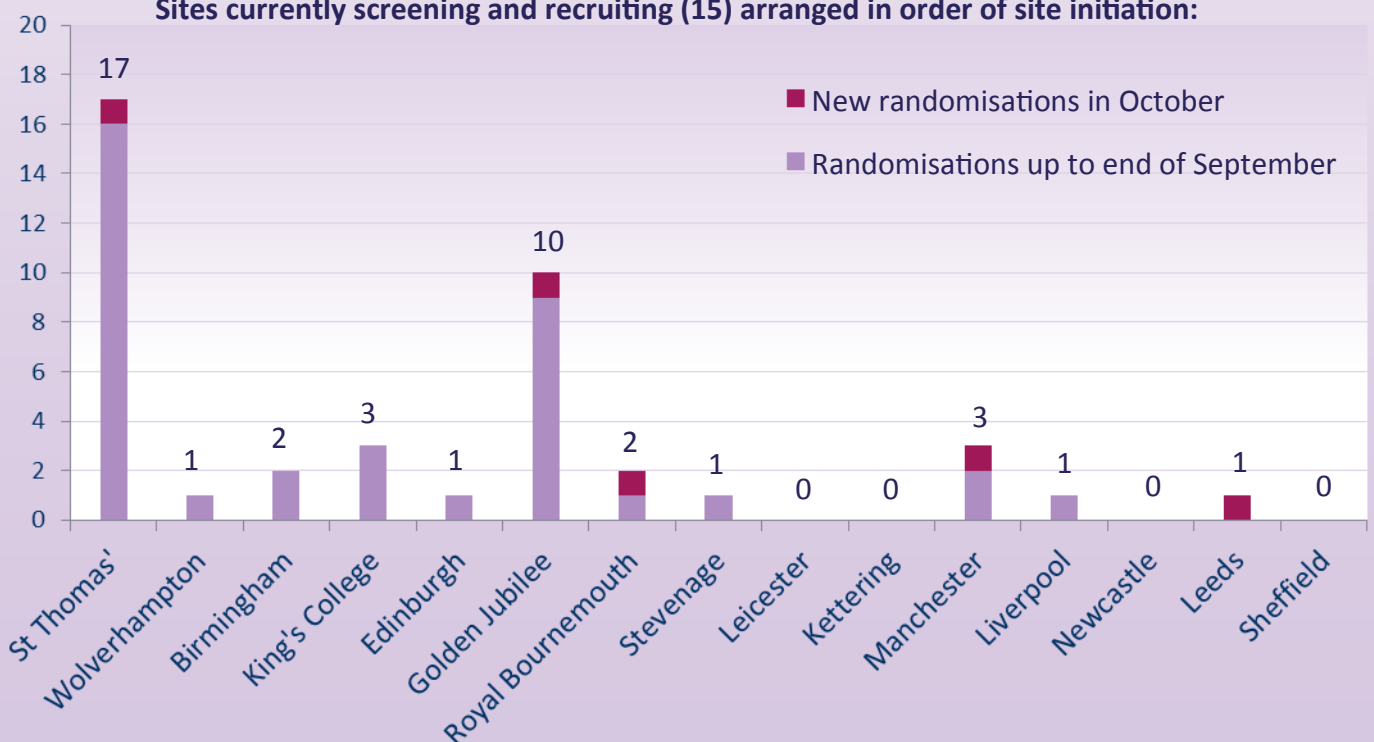
New Specialist Registrars

As you know, this is the time of year for the new intake of SpRs. They have now had a few weeks to settle in, so it is a good time to introduce REVIVED and let them know who to contact if they identify a potentially eligible patient.

Site Progress Summary

42 patients recruited

Sites currently screening and recruiting (15) arranged in order of site initiation:



Screening Record

Although the requirement for monthly screening logs has been removed, information on your screening is still useful. To collect this information, a brief screening record has been created. Information will be collected by email on your monthly screening to complete the record using the following questions:

1. How many patients are currently on your tracking log and which sources have they come from?
2. Do you have any likely randomisations in the next 6 months and if so in which months?

An email with these questions will be sent to the main nurse contact of each site at the beginning of each month. The information should be provided ideally within one week .

The aim will be to review the status of screening as it stands. There is no need to separately record patients that have been added and removed from your tracking system within the month.

It is important that the monthly screening record questions can be answered easily from whichever tracking method you use.

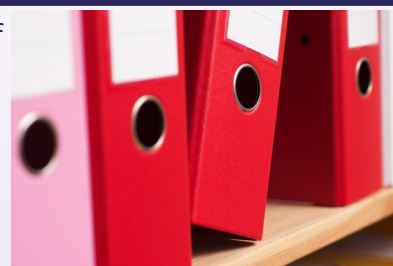
Patient tracking log

The recommended method of patient tracking is the patient tracking log. It takes the form of a spreadsheet with separate columns for all the screening tests, key dates and any comments. This organisation makes it easy to see which tests are still outstanding and the next opportunity to approach the patient.

A template for the tracking log is provided by the CTU at site initiation and it can be adapted to fit any local procedures.

Folder tracking

Another method of tracking patients is using a folder with separate tabs for patients in each stage of the



screening process. For example, there could be tabs for patients awaiting ICD, angiogram or viability assessment. This method can be very effective but can also get confusing as patients may be awaiting more than one screening test.

What to do with your tracking system

Once you have developed your tracking system, it is important to arrange regular meetings between the PI, Co-I and main nurse contact(s) to review the patients and the progress they are making. It is normal for a patient to be in your tracking system for several months while the necessary tests are performed. These meetings should be used to plan out the next stage for your potential patients to ensure that the tracking period is as short as possible.

As a guide, at any one time there should be about 10 patients in your tracking system. It will take some time to build up an initial pool of patients but once this is established, it is much easier to manage incoming and outgoing patients.

Contact information


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