



# OHSU SIREN NETWORK NEWS

Issue: December 2017

## REMINDER: DID YOU REGISTER YOUR TEAM?

The CCC is collecting and creating a master list of network contacts at each site. Please add ALL team members at your site to this list (PI's, Co-I's, Coordinators, team leads, IRB coordinator, Grants & Contracts managers. Visit this link to update your site information:

[https://umich.qualtrics.com/jfe/form/SV\\_6DcghioXo3a8r2t](https://umich.qualtrics.com/jfe/form/SV_6DcghioXo3a8r2t)

If you are registered and are not receiving communications directly from the CCC please let Jenny know.

[cookjen@ohsu.edu](mailto:cookjen@ohsu.edu)

## Contact Us

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<http://www.ohsu.edu/emergency/research/siren/>

## OHSU SIREN NETWORK ALL SITE WEBINAR

When: January 8, 2018 @ Noon PST - e-mail appointment will be sent with webinar & call in line details.

## SIREN IN PERSON KICK OFF MEETING

**When:** March 5, 2018

**Where:** Saguaro Hotel, Scottsdale, AZ. <https://thesaguaro.com/scottsdale>

**Who:** All network PI's are invited to attend. If you have additional staff interested in attending, please e-mail [Jenny Cook](mailto:JennyCook@ohsu.edu) with the names and role of the additional staff. Space is limited so the CCC must pre-approve additional attendee's prior to registration.

**Registration:** Please register by February 2, 2018 by [clicking here](#).

## FAQ's

- 1. Do I need to make my own hotel reservations?**
  - a. **NO**, please complete the registration form so the CCC can make reservations for you and keep track on room availability. *Please note you will be responsible for the COST of the room which is \$229 + taxes and fees*
- 2. Do I need to make my own airline reservations?**
  - a. **YES**, participants are responsible for travel for to this meeting.
- 3. Are there any funds to help offset travel costs?**
  - a. The OHSU SIREN hub will provide a **\$500 stipend** to each sub-hub and spoke site within our network who attends this meeting, to help offset some of the travel costs.
- 4. Am I reimbursed for my lodging, airport parking, taxi fare and meals in route by the SIREN CCC for the SIREN SC meeting?**
  - a. **NO**, There is an **EXCEPTION** for those attending **BOTH** the **ESETT** and **SIREN** meetings. Contact [Valerie Stevenson](#) for details

## THE NATIONWIDE SIREN NETWORK WEBSITE IS LIVE

Announced this week; the SIREN website is up and running! Be sure to bookmark this important website for future use: <http://www.siren.network>

Remember the OHSU network has a site you can bookmark too:

<http://www.ohsu.edu/emergency/research/siren/>

## MASTER AND HOBIT AGREEMENTS DELAYED

SIREN master agreements and HOBIT agreements are now expected to be sent out sometime in December

## THE 411 ON UPCOMING AND POTENTIAL TRIALS

We received a request for brief summaries of the potential upcoming trials. Here's a rundown of what's been proposed.

### **HO<sub>2</sub>BIT**      *Funded, University of Michigan/SIREN CCC is in the process of developing/executing study contracts*

Hyperbaric Oxygen Brain Injury Treatment Trial (HOBIT) is a proposed adaptive clinical trial designed to answer these questions and to provide important data to plan a definitive phase III efficacy trial. Primary aims of this trial are to select patients with severe TBI, the combination of HBO<sub>2</sub> treatment parameters that is most likely to demonstrate improvement in the outcome of severe TBI patients in a subsequent phase III trial. This trial will enroll 200 subjects over 3 1/2 years. This trial is supported and sponsored by the SIREN-NETT Network which is funded by the National Institutes of Neurologic Disease and Stroke to conduct clinical trials such as the one described.

### **BOOST - 3**      *Scored well, awaiting funding decision*

Traumatic brain injury (TBI) is a major cause of death and disability in developed societies. This proposed study focuses on the most severely injured of this group, approximately 27,000 Americans each year who experience prolonged coma from a TBI, and require sophisticated care in neurological Intensive Care Units. This study proposes to determine whether a treatment protocol based on brain tissue oxygen monitoring, using technology that has been available for over 10 years, improves neurologic outcome in this most severely injured group of patients. BOOST-3 will enroll 1094 subjects.

### **ICECAP**      *Grant to be submitted in February 2018 for funding consideration*

The Influence of Cooling duration on Efficacy in Cardiac Arrest Patients (ICECAP) study will enroll comatose adult survivors of out of hospital cardiac arrest that have already been rapidly cooled using a definitive temperature control method. Those with and without initial shockable rhythms will be studied as distinct populations (maximum of 1800 subjects over four years). ICECAP will determine if identifying an optimal duration of cooling can improve outcomes, and if development of a duration response curve can substantiate efficacy in a wider patient population.

*If your site is likely to participate in ICECAP please be sure to submit your ICECAP survey [here](#), and e-mail [cookjen@ohsu.edu](mailto:cookjen@ohsu.edu) to confirm your potential participation status.*

### **TEMPO-EMS**

TEsting Multiple PrehOspital therapies – Emergency Management of Stroke (TEMPO-EMS) is a proposed Bayesian multi-arm multi-stage (MAMS) Phase 2B randomized controlled clinical trial of three treatments (a) transdermal glyceryl trinitrate (GTN), (b) minocycline, and (c) remote ischemic conditioning (RIC), initiated by paramedics in the field within 2 hours of symptom onset in 900 patients with suspected acute stroke. Primary objective is to evaluate the efficacy and safety of field-initiated glyceryl trinitrate (GTN), minocycline, and remote ischemic conditioning (RIC) in improving the long-term functional outcome of patients with acute stroke

### **CHEST PAIN**      *Currently in development, LOI being submitted to NHLBI*

The CHEST PAIN trial will be a multicenter randomized controlled non-inferiority trial comparing an in-hospital noninvasive testing strategy versus an outpatient follow-up strategy among patients evaluated for possible ACS who meet a standard low-risk definition (proposed sample size ~16,700 subjects). The in-hospital strategy will consist of standard care with intent to perform a noninvasive test prior to discharge from the hospital. The outpatient strategy will consist of discharge from the ED within six hours of being seen by an ED physician with outpatient follow-up within seven days.

### **NETT TRIAL BRIEFS**

Interested in learning more about the NETT trials being discussed on the NETT/SIREN conference calls? Visit: <http://nett.umich.edu/clinical-trials> to learn more.

### **CALENDAR OF EVENTS**

1/9/18 @ 1pm EST NETT/SIREN Study Coordinator meeting Call in: 888-330-1716 / 5967697 webinar: [click here](#)

*Journal Club resumes in January – date tba.*