

# The REDOXS® Circular



## March Madness Results

This past month's enrolment challenge was inspired by the annual college basketball tournament which takes place in the US over the month of March. The REDOXS March Madness Challenge results are in, the winner is...**Team D**.

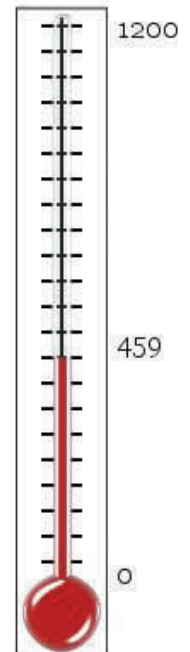
Team A	Team B	Team C	Team D	Team E
Kingston General	St. Joseph Hamilton	Ottawa General	Ottawa Civic	Sacre-Coeur
Enfant-Jesus	Vancouver General	Grey Nun's	Mount Sinai	Royal Alexandra
Rosemont	London HSC	Winnipeg HSC	QE II Halifax	CHUV
Victoria General	Sunnybrook HSC	St. Paul's Hospital	Royal Jubilee	U of Colorado
Liege Belgium	Miami Valley	UZ Brussels	U of Louisville	Fletcher Allen
St. Boniface, Winnipeg				
<b>Patients enrolled = 4</b>	<b>Patients enrolled = 4</b>	<b>Patients enrolled = 5</b>	<b>Patients enrolled = 11</b>	<b>Patients enrolled = 3</b>

**Great work Team D!!! Congratulations to the folks at the University of Louisville for being the team MVP with 5 patients enrolled in the Month of March!!!**

**A total of 27 patients were enrolled in the month of March. Let's see if we can surpass this number in April!**

Enrolment as of March 31, 2009					
Site	March	Cumulative Total	Site	March	Cumulative Total
Kingston General	1	52	Sunnybrook, Toronto	-	2
St. Joseph's Healthcare	4	24	St. Paul's, Vancouver	-	6
Ottawa General	5	77	L'Enfant Jesus, Quebec City	2	15
Ottawa Civic	2	34	Liege, Belgium	1	2
Vancouver General	-	17	CHUV, Switzerland	-	8
Sacre Coeur, Montreal	-	39	Royal Jubilee, Victoria	1	4
Royal Alexandria, Edmonton	1	15	UZ Brussels	-	2
Maisonneuve—Rosemount	-	12	Mount Sinai, Toronto	3	8
Grey Nun's, Edmonton	-	10	University of Colorado	1	4
Victoria General	-	3	Miami Valley, Ohio	-	1
London Health Sciences Centre	-	10	University of Louisville	5	5
Health Sciences Centre, Winnipeg	-	8	Fletcher Allen, U of Vermont	1	1
Queen Elizabeth II, Halifax	-	5	St. Boniface, Winnipeg	-	-
*Montreal General	-	7	*Royal Victoria	-	8
<b>Total = 459 (includes 80 from pilot)</b>					

**Congratulations to Julie Martin from Fletcher Allen, University of Vermont for enrolling the 1st Lab Sub-study patient.**



\* Sites status = on hold due to staffing issues

# EDC System Update

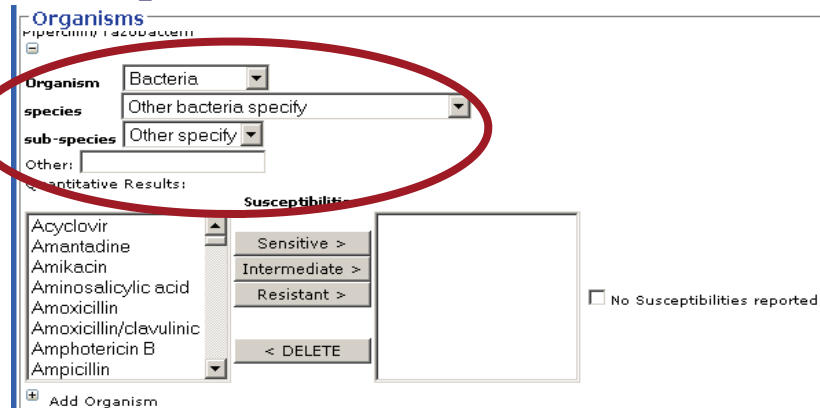
A new addition has been made to the EDC System Microbiology Form. The bacteria taxonomy has been updated to include an option to record positive results for non-specified organisms.

## Example

Culture report indicates a finding of 'gram negative non fermenting bacilli'. The site would enter this organism as follows:

**Organism** = Bacteria      **Species** = Other bacteria specify      **Subspecies** = Other specify

**Other** = gram negative non fermenting bacilli



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## Common Mistakes Found During Source Verification Visits

We would like to remind our sites of the following concerning data collection:

### Daily Data—Temperature

Record the most aberrant temperature from the midline (37.0°C), not the highest. This means the temperature that deviates either above or below the midline the most. Refer to pg 31 of the Implementation Manual.



### Daily Data—Location of Feeding Tube

Please ensure the "gastric or post-pyloric duodenal or post-pyloric jejunal confirmed" option is selected only when tube placement was confirmed by x-ray on a particular study day. E.g. If the tube placement was confirmed by x-ray on Monday but not on Tuesday, then for Tuesday you would enter "presumed" NOT "confirmed". Refer to pg 31-32 of the Implementation Manual.

## New Antibiotics

The antibiotics telithromicine, temocillin and fosfomycin have been added to the antibiotic taxonomy.

# Frequently Asked Questions

**We have a patient with burns to 25-30% BSA. In reference to exclusion criteria # 8, could this patient be enrolled into the study?**

If the standard of care is to treat this patient with glutamine, then this patient should **NOT** be enrolled into the study. If the clinical team treating the patient does not have any problems with the patient being potentially randomized to a non-glutamine arm, then the patient can be enrolled.

Thanks to Frederic Morin / Caroline Roy from Hôpital Enfant-Jesus

**We are approaching day 28 of the study, the patient had a disruption in study supplements of 2 days. Should we add an extra 2 days of study supplements to make up for this lost time, so the patient would continue to receive study supplements until day 30?**

The study supplements should be administered for a maximum of 28 days from the time of randomization. If the patient experienced interruptions in study supplement administration during the course of the study, the site should **NOT** add extra days of study supplement administration to correct for this. Sites should focus on minimizing interruptions in study supplements as much as possible on an ongoing basis. Refer to pg. 4 & 7 of the Administration of Study Supplements manual for further details.

Thanks to Sheilagh Mans at St. Paul's Hospital