



The RE-ENERGIZE Rag

Volume 10, November 2017

RE-ENERGIZE LATIN-COLLEAGUES



Argentina Team

October 2017, Dr Daren Heyland performing the RE-ENERGIZE Latin-Training for **Argentina and Uruguay** teams.

In the upper photo at the left; the Argentina team lead by Dr Anahi Crocenzi and Sandra Prieto (in front of Dr DKH). In the lower photo the Uruguay team lead with colleague Dr. William Manzanares in the middle back .

During October, more European sites were activated.

The Dominican Republic Burn Unit leading by Dr Soñé, will be activated this November-2017. New Latin sites coming on board !!!

The RE-ENERGIZE sample size is increasing each month.



Uruguay Team

RE-ENERGIZE SPECIAL POINTS OF INTEREST:

- **October Enrollment: 18 Patients**
- **7 Active Sites in Europe**
- **Total patients randomized by October: 442**
- **37 active sites around the world**
- **Around 10 Latin sites will be coming on board soon**

Mexico & Ecuador have joined to the RE-ENERGIZE Latin-Team.



DOMINICAN REPUBLIC

First Latin Country to be Activated



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Goal: 1 Patient/Site/Month**ACTIVATED SITES and ENROLLMENTS**

INSTITUTION and Location	Oct-17	Randomized To Date
Harborview Medical Center - Seattle	2	16
Foothills Hospital	2	6
RWTH Aachen University, Aachen	2	3
Queen Elizabeth Hospital Birmingham	2	3
University of Iowa* (47)	1	64
Joseph M Still RF, Doctors Hospital* (37)	1	53
Ross Tilley Burn Centre, Sunnybrook* (13)	1	30
AHN West Penn Burn Center	1	13
UT Southwestern Medical Center	1	10
Arizona Burn Center - U of Arizona	1	6
Bridgeport Hospital	1	5
Hamilton General Hospital	1	4
Ghent University Hospital	1	1
Uppsala University Hospital	1	1
Mercy Hospital St. Louis* (31)	0	43
University of Colorado Denver* (26)	0	37
Oregon Burn Center* (21)	0	33
Hopital l'Enfant-Jésus	0	21
Firefighters' Regional Burn Center TN * (14)	0	15
Columbia - St. Mary's Hospital	0	10
Wake Forest University Health Sciences	0	9
University of Southern California	0	8
University of California, Davis	0	4
Akron Children's Hospital	0	4
MedStar Health Research Institute	0	4
Hotel-Dieu de Montreal - CHUM	0	4
Hospital Universitario La Fe, Valencia	0	4
The Ohio State University Medical Center	0	3
Tampa General Hospital-USF	0	2
CHI Health St. Elizabeth	0	2
University of Texas Health Science Centre	0	2
JBSA Fort Sam Houston	0	2
University of Nebraska	0	2
University Hospital of Liège	0	2
UF Health at Shands Hospital	0	1
Chelsea and Westminster Hospital	0	0
Pilot Study additional enrollments*		15
*(pilot + definitive)TOTAL	18	442

Keep your questions coming so we can all continue to learn and grow together!



QUESTION

How do we calculate the 3 day average, do we count the present day plus two days before or two days after?

CERU

If the study day in question is study day 7, you may calculate the 80% using days 5 – 7 or 6 – 8 or 7 – 9:

Days: 5, 6, **7**

6, **7**, 8

7, 8, 9

QUESTION

Do we have to select YES to enteral nutrition received if patients received a minimum amount, for example; 30 cc of enteral nutrition?

CERU

Yes, if patient receives any amount of EN at all please select 'Yes' to EN and record the volume received. There is no minimum for recording EN received.

QUESTION

Do we have to register protein supplementation given per oral route ?

CERU

No, only enter protein supplementation given via tube feedings.

QUESTION

Do we collect data from re-admission to ACU from other facility/hospital?

CERU

No, we collect data from readmissions to the ACU from within your hospital.

QUESTION

Should we enter escharotomy as a burn related operative procedure?

CERU

Yes, please record escharotomy on the burn related operative procedure form.

If a procedure was performed that is not in the taxonomy, select 'OTHER SPECIFY' and enter the procedure name in the space provided.



QUESTION

Do we enter microbiology findings from venous or arterial blood draws only, or should we enter wound swab culture, trachea and bronchial washings, and/or urinalysis results also?

CERU

Only record venous or arterial blood cultures that test positive for Gram negative bacteria that occurred >72 hours after ACU admission until > 10 days post last successful grafting (stop of study IP + 3 days) or ACU discharge or 3 months after ACU admission, whichever comes first. NOTE: Do not include catheter line tip cultures.

QUESTION

What should be entered on the Concomitant Medications form ?

CERU

Record the **concomitant medications** or medication types indicated in **CRF pages 32-33**:

- Oxandrolone
- Nandrolone
- Testosterone

If none of the 3 were received, select 'NO'.

If the information is not documented, select 'NOT AVAILABLE'.

Record if **Beta-Blockers** were received or not:

- If Beta-Blockers were not received, select 'NO'.
- If the information is not documented, select 'NOT AVAILABLE'.

IMPORTANT NOTES

Keep up the hard work that keeps us steadily moving forward.
We appreciate each of you!!!

Enter ALL patients who meet the Inclusion Criteria into the CRS:

Inclusion Criteria Present	Exclusion Criteria Present	Informed Consent Obtained	Enter into CRS	Comments
x	x	Do not approach for consent as inclusion criteria not met	x	
✓	✓	Do not approach for consent as exclusion criteria met	✓	Ineligible patient
✓	x	✓	✓	Randomized patient
✓	x	x	✓	Eligible but not randomized patient

Reminders

Some of you are only entering randomized patients into the CRS. Please take the time each month to enter the patients you have screened, but were not randomized.

Thank you!

REDCap system

Our I.T. team is in the final stages of testing the automated data query system that will be implemented in REDCap for the RE-ENERGIZE study. **Our current goal is to 'go live' with the Query System on Wed., Dec 6th, 2017.** We will provide further instructions regarding query navigation, response, and resolution closer to the date.

CRS

Some of you have reported issues with the Pre-Randomization form not loading in the CRS when using Internet Explorer. If you are able to use a different browser, such as Google Chrome, Mozilla Firefox, or Apple Safari you will not have any difficulties with the CRS.

Protocol Amendment (27-March-2017)

Those of you who do not yet have approval of the amended protocol, please push this forward so you can begin enrolling patients per the revised Inclusion Criteria. If you have questions or need information from us, just ask.

Pharmacy Reminder:

Order product well in advance to allow time for delays when the product is in transit! We cannot guarantee short notice orders will be delivered in a timely manner.

Is dedicated to improving nutrition therapies in the critically ill through knowledge generation, synthesis, and translation. We engage in a broad range of research activities and promote a culture of best practices in critical care nutrition. Ultimately, this will result in improved clinical outcomes for critically ill patients and increased efficiencies to our health care systems. <https://www.criticalcarenutrition.com/>

The screenshot shows the top navigation bar of the Critical Care Nutrition website. It features a logo on the left and a list of menu items: 'About Us', 'PEPuP', 'CPGs', 'EFFORT/INS', 'Research', and 'Resources'. Below this is a secondary menu item 'Contact Us'. The main banner area has a dark blue background with a chemical structure on the left and text on the right: 'El estudio RE-ENERGIZE, ahora es realizado en colaboración con Sitios de Investigación Clínica localizados en República Dominicana, México, Argentina, Panamá, Paraguay, Uruguay, Brasil. Te gustaría colaborar con el Estudio RE-ENERGIZE?. Click aquí para más información'. Below the banner are four circular icons representing 'CPGs', 'NUTRIC', 'PEPuP', and 'QI Tools'.



Visiting RE-ENERGIZE Sites



Maureen Dansereau and Alfonso Ortiz visiting Canadian colleagues in Ontario.

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