

Issue 5
August 2016



TARGET
Nutrition Study

Newsletter

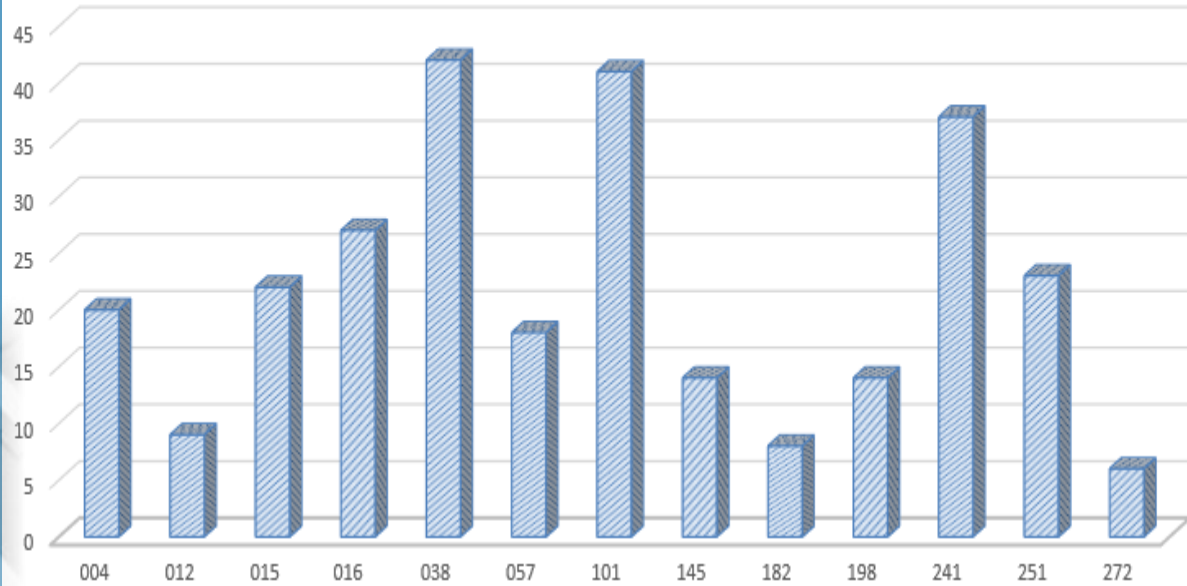
The Augmented versus Routine approach to Giving Energy Trial

Recruitment

281/4000

Site Recruitment

21 JUNE 2016 - 31 AUGUST 2016



Welcome Middlemore Hospital,
New Zealand—started August 2016



Contact
Details

Project Manager:

Lorraine Little

Telephone:

+61 (0)3 9903 0513

Mobile:

+61 (0)437 207 413

Email:

lorraine.little@monash.edu

NZ Project Manager:

Diane Mackle

Telephone:

+64 4 805 0248

Cellphone:

+64 (0)27 310 7429

Email:

diane.mackle@ccdhb.org.nz

Congratulations to our overall 3 top recruiters and the biggest thank you to our recruiting sites for your excellent recruitment.



Wellington Regional Hospital



Royal Adelaide Hospital



Auckland City Hospital CVICU



Frequently Asked Questions



Who should I contact if I have questions about the study?

Please contact any of the following —we can assist:

Project managers details are listed on page 1

Marianne Chapman (AUS)

0412 183 894

Sandra Peake (AUS)

0400 623 116

Paul Young (NZ)

027455 2269

Sally Hurford (NZ)

021034 5515

Q. Baseline data Q2.5 (Sepsis). If the patient has a known or suspected infection a SOFA score is collected.

Q2.5.6: SOFA—Glasgow coma score component. How do we collect this data?

A. The GCS is the score recorded prior to administration of sedative agents, prior to intubation, closest to randomisation. The time frame for collecting SOFA data is the 24 hours prior to Randomisation. Use the SOFA Worksheet provided in the CRF folder and score 0 to 4 according to the criteria.

Q. Should we reduce the TARGET protocol EN hourly goal rate if the patient is receiving a very high rate of Propofol infusion?

A. No, do not decrease the hourly goal rate to compensate for the additional calories regardless of the amount of Propofol being infused.



Do not increase the hourly goal rate if TARGET protocol EN was interrupted during the study day.



From the Project Manager—TARGET protocol EN bag reconciliation process

Step 1:

- Enter the bag number/s on the daily data CRF and check “Finished” when the bag/s are completed
- By entering the daily data first the bag status will be updated on the Patient Summary, [Inventory for patient](#) section

Step 2:

- Reconcile the bags of TARGET protocol EN -
 - * check the source documentation to ensure that the allocated bag/s were administered; were administered to the correct patient; or were not administered because they were not required
 - * check daily data for accuracy and completeness
 - * go to the Patient Summary page, [Inventory for patient](#) » link and update the bag status to “reconciled”
 - * “reconciled” bags may be discarded
 - * if all 8 bags in the box are “reconciled” – don’t change anything on the box INVENTORY page

Step 3 (if applicable):

- If bags are not used (**and therefore still “Assigned”**), and your ICU is permitted to reassign opened boxes back on to the Ready Shelf -
 - * go to the box INVENTORY page
 - * search for the box
 - * follow the prompts and reassign the unused bags

Contact the project managers if you have queries about this process



Main changes:

- Day 180 functional outcome questionnaires
- Employment status categories at baseline
- General tidy up
 - * data collection
 - * measuring patient height
 - * other clarifications
- No change to the Study Brochures or Information & Consent Forms
- CRF amendment
- Data dictionary amendment