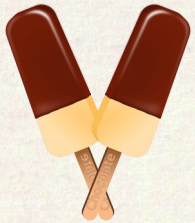
ADAPT-Sepsis—August 2018 Newsletter

Trial Update

Summer greetings from the ADAPT-Sepsis Trial team!

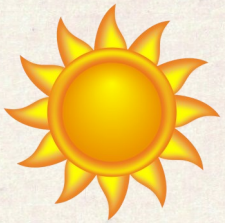
We are delighted to welcome Sunderland Royal and Royal Liverpool Hospitals to the trial! We are looking forward to helping you with your first recruits.

Thank you again to all who were able to dial into our site teleconference session. We hope to have regular discussions with our recruiting centres so that we can all share tips and experiences. Our next session will be on 21st August at 10am.



Milestones

- 11 sites initiated to date
- Trial opened January 2018
- First patient recruited January 2018
- ***39 patients recruited so far!***



Lessons learnt

Pre-completed blood sample request forms

A recent monitoring visit has flagged that when blood sample request forms are partially completed in advance of the weekend by the research nurse team, the ward nurses do not always log the time that the sample was taken. If you are following this approach at your site, please could you flag to the ward nurses that time the sample was taken should be documented on the paper request form.

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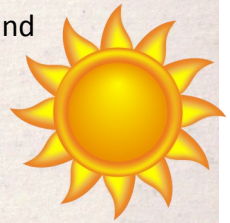
Screening logs

- Please remember to send in your screening logs by 17th August. We will now request these every 2 weeks.
- Either complete our electronic spreadsheet or scan and email a paper copy (v2.0, 19/03/2018).



Eligibility Clarifications

We would like to highlight that the *requirement* for critical care is key , therefore you are able to screen, consent and recruit patients whilst they are on other wards provided the requirement for critical care (and other eligibility criteria) is met.

For instance, if a patient on a surgical theatre ward develops suspected sepsis, their antibiotics are escalated in response and they are flagged as requiring critical care, they would be eligible for the study at this point. This patient could be consented, randomised and the daily research blood sampling commenced. Their referral to critical care and details of any critical care interventions they have prior to being admitted to ICU/HDU must clearly be documented in the medical notes in order to confirm that the participant meets this inclusion criteria.

The patient's referral to critical care is expected to result in their transferral to ICU/HDU, though there may be rare cases where the participant remains on a different ward where they still receive this standard of critical care, in these cases the participant would remain on the trial as at the time that they were randomised they met the inclusion criteria and were eligible for the trial.

Get in touch Please direct all correspondence to **adaptsepsistrial@warwick.ac.uk** or call **02476 151 386 (Nicola McGowan)**