

MESA EXAM 7 OPERATIONS OVERVIEW

- University of Washington Coordinating Center
- MESA Clinical Operations

Agenda

Tuesday, January 18

First Session: 11am-2pm EST/10am-1pm CST/8am-11am PST

Welcome and Core Exam Procedures

Cashell Jaquish, NHLBI Project Officer
Kayleen Williams
Craig Johnson
Kayleen Williams
Sandi Shrager/Tim Hughes
Kayleen Williams
Kayleen Williams
Craig Johnson



MESA Project Office Introduction and Welcome

Cashell Jaquish, Ph.D.

MESA Project Officer
Epidemiology Branch
Division of Cardiovascular Sciences
National Heart, Lung, and Blood Institute



MESA Virtual Central Training

January 18th, 2022





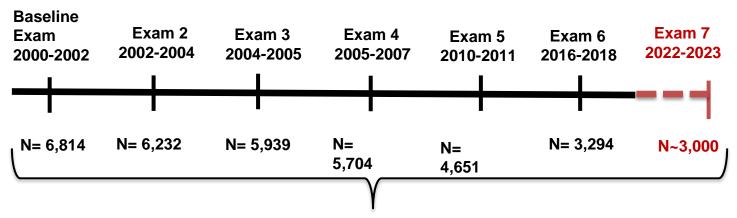


Much of the biomedical research in the United States is supported by the Federal Government, through the National Institutes of Health (NIH). The National Heart, Lung, and Blood Institute is part of NIH.



- What do we do?
 - Help to Manage MESA
 - Fund the Activities of MESA
- Who are we?
 - Project Office
 - Cashell Jaquish, Ph.D. Project Officer
 - Stephanie Marquez, M.P.H.- Deputy Project Officer
 - Lorraine Silsbee, M.H.S Scientific Consultant
 - Colin Wu, Ph.D. Biostatistician
 - Contracting Office
 - Vinton Grant Contracting Officer
 - Kimesha Leake Contracting Specialist





Regular participant follow-up for:

- -Updating contact information
- -Determining vital status
- -Event ascertainment



Your role is critical!















Thank you for your Hard Work and Dedication!

We couldn't do this without you!









MESA EXAM 7 OPERATIONS OVERVIEW

Kayleen Williams
MESA Clinical Operations

Exam 7 Preparation Timeline

Activity		Q3	20	21	Q4				Q1	20	22	Q2	
	Jul	Aug	Sep	Oct	Nov	Dec	Já		Feb	Mar	Apr	May	Jun
Exam 7 Preparation													
Exam 7 Protocol Development					Exar	n 7 Prote	col	Dev	elopmer	nt			
Draft Consent Form					Draft	Conser	t Fo	m					
Finalize Questionnaires						Finalize	e Qu	estic	onnaires	;			
Develop Manuals of Operations									Develo	p Manua	ls of Op	erations	
Program data collection software									Pro	gram da	ta collec	tion soft	vare
Central Training Preparation								Cer	ntral Tra	ining Pr	eparatio	n	
Hire Technicians								Hire	e Techn	icians			
Local Training									L	ocal Tra	ining		
sIRB Submission									sIRB S	ubmissi	n		
Local IRB review/consent									Loca	IIRB re	view/cor	sent	
Local radiation review									Loca	l radiati	on review	v	
Order retention gifts							Or	er r	etentior	gifts			
Mail Participant Newsletter									Mail P	articipar	t Newsl	etter	
Laptops to sites								L	aptops t	to sites			
Order biospecimen labels									Order b	oiospecii	nen labe	els	
Central Training									Central	Training	9		
Training/Certification									Т	raining/0	ertificat	ion	
Questionnaires/ICF Translation										Questio	nnaires/	ICF Tran	slation
Pilot Exam (up to 4/site)									Pilo	t Exam	(up to 4/	site)	
Implement changes based on pilot									lr	nplemer	t change	es based	on pile
Questionnaires/ICF Translation										Questio	nnaires/	ICF Tran	slation
Exam 7													

Exam 7 Timeline

Activity		20	2021				2022			2023				2024		
Activity		20	121			- 4	022			20	123			20	124	
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Exam 7																
Recruit, informed consent and exam											F	Recruit	inforr	ned co	nsent	and e
Data entry and verification						Data entry and verification										
Conduct QA/QC activities												ondu	t QA/	QC act	ivities	
Process and ship biosamples						Process and ship biosamples										
Staff training and Recertification						Staff training and Recertification										
Report participant results and alerts												Rep	rt par	ticipan	t resul	ts and
Mail Participant Newsletter					Т						Mail	Partic	pant N	lewsle	tter	
Prepare and release Exam 7 dataset					Т								repar	e and	releas	e Exa
Other On-going Activities																
Mind Visit A					Nlir	d Visit	A									
FU22			F	U22	Т											
Follow-up 23 Call/Scheduling							F	ollow-	p 23 (all/So	hedu	ling				
Follow-up 24 Call/Scheduling											F	ollow-	p 24 (Call/Sc	hedul	ing
FU25															F	U25
C4R Wave 2/DBS							C4R V	Vave 2	DBS							



Exam 7 Core

Target	3000 participants (75% of active)
Time Burden	Average duration: 90 minutes
	Consent (Core + Ancillary Components)
	Check-in
	Seated Blood Pressure, Pulse oximetry
	Anthropometry
	Phlebotomy/Urine Collection
	Medical History
	Personal History
	Health & Life
Exam Components	Medication Inventory



Exam 7 Ancillary Studies

PI	Title	Name	Tests
Hughes	Subclinical Vascular contributions to Alzheimer's Disease MESA Multi-Site Study of AD	MESA-MIND	Cognitive testing, physical exam, MRI, PET, arterial stiffness
Redline/ Purcell	Longitudinal relationships among sleep, cognitive and Alzheimer's Disease biomarkers	MESA Sleep	Sleep Study, BP and sleep monitors
Barr	Precision phenotyping of emphysema in the elderly: The MESA Lung Study	MESA Lung	Spiro, CT
Hirsch	Contribution of Longitudinal Neighborhood Determinants to Cognitive Health and Dementia Disparities within a Multi-Ethnic Cohort.	MESA Neighborhood	Questionnaire
Palta/Diaz/ Gabriel	Leveraging the 24-hour movement paradigm to preserve cognitive function and prevent Alzheimer's disease	MESA 24H-ACT	Activity and sleep monitors
Kershaw	Stress reactivity and cognitive decline	MESA Stress Reactivity	Heart monitor, daily Q
Chaffin- Mongraw	Glucose homeostasis and the risk of Alzheimer's disease and Alzheimer's disease related dementias in MESA	MESA Glucose Homeostasis	Continuous glucose monitor



Exam 6 Components

Form and Organian aims	C/A:!!
Exam and Questionnaires	Core/Ancillary
Reception and Consent	All
Change Clothes	
Blood Pressures, Pulse Ox	Core
Anthropometry	Core
Blood, Urine, Hair collection	All
Snack	
Arterial Stiffness Measures	MIND
Medications	Core
Medical History	Core
Personal History/Demographics	Core
Neighborhood Questionnaire	Neighborhood
Health & Life	Core
Environmental Exposures	
Questionnaire	Lung
Sleep Questionnaire	Sleep
Family History	MIND
Cognitive Function Tests	MIND
Clinician Physical Exam	MIND
Short Physical Performance Battery	MIND
Spirometry	Lung
Nasal Brushing	Lung
Exit Interview	All

Monitor Components	
Heart monitor patch	Stress
Daily Stress questionnaire	Sress
Continuous Glucose	
monitor	Glucose
ActiGraph hip activity	
monitor	24H-ACT
Wrist sleep actigraphy	24H-
device	ACT/Sleep
24-hour blood pressure	
monitor	Sleep
Polysomnography device	Sleep
Sleep PSG Questionnaire	Sleep
Participant Diary	All Monitors

Imaging Procedures	
Non-contrast Lung CT	Lung
Brain MRI	MIND
Brain Amyloid PET Imaging	MIND

Exam 6 Components

Exam and Questionnaires	Core/Ancillary
Reception and Consent*	All
Change Clothes	
Blood Pressures, Pulse Ox	Core
Anthropometry	Core
Blood, Urine, Hair collection	All
Snack	
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Medical History	Core
Personal History/Demographics	Core
Neighborhood Questionnaire	Neighborhood
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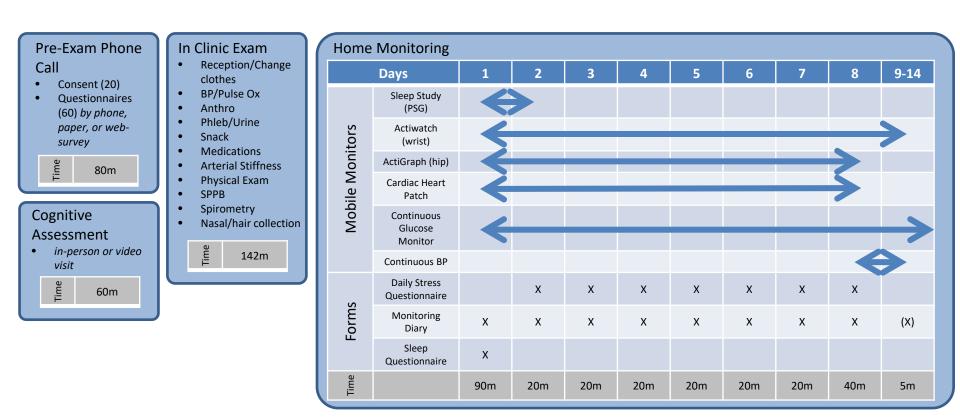
Monitor Components	
Heart monitor patch	Stress
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device	ACT/Sleep
24-hour blood pressure	
monitor monitor	Sleep
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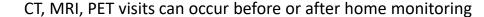
Imaging Procedures	
Non-contrast Lung CT	Lung
Brain MRI	MIND
Brain Amyloid PET Imaging	MIND

Repeat Measures from earlier Exams

Exam	1	2	3	4	5	6	7
N=	6814	6232	5939	5704	4655	3303	(3000)
Questionnaires							
Air Pollution Questionnaire			2	X	Χ		Α
COPD Assessment						A ₂₂₀	Α
Medical Hx	Χ	Χ	Χ	Χ	Χ	Χ	Χ
Medications	Χ	Χ	Χ	Χ	Χ	Χ	Χ
Occupation/employment	Χ	Χ	Χ			Χ	Χ
Personal Hx	Χ	Χ	Χ	Χ	Χ	Χ	Χ
Psycho-Social	Χ	Χ	Χ	Χ	Χ		Χ
Residential/neighborhood		Χ		Α	Α		Α
Sleep Hx		Χ		Χ	A ₂₂₂₂	A ₂₁₉	Α
Procedures/Assessments							
Anthropometry	Χ	Χ	Χ	Χ	Χ	Χ	Χ
Arterial Wave Form/Stiffness	X ₆₃₃₅				A ₄₁₃₀	Α	Α
Blood Pressure	Χ	Χ	Χ	Χ	Χ	Χ	Χ
Blood Sample collection	Χ	Χ	Χ	Χ	Χ	Χ	Χ
Brain Amyloid PET Imaging						A _{~216}	Α
Clinician's Physical Exam						Α	Α
Cognitive Function (UDS)						Α	Α
CT Lung					A ₃₁₂₂	A ₃₂₆₀	Α
MRI Brain						A~ ₁₈₉₆	Α
Polysomnography/actigraphy					A ₂₀₆₀		Α
SPPB						Α	Α
Spirometry					X ₃₆₀₀	A ₃₂₂₀	Α
Urine collection	Χ	Χ	Χ		Χ	Χ	Α
Heart Monitor Patch						A ₁₅₉₆	Α

Visit Schedule: In-Clinic Visit (6.2hr)







PARTICIPANT RETENTION

Kayleen Williams MESA Clinical Operations

Why do participants join research studies?

Helping future patients

To gain additional knowledge about my health

I like contributing to science

Helping other family members with a similar disease



Retention

Build relationships with Field Center staff.

Flexible visit schedule

Reimbursement for time, and free parking or car service

Personal contacts through birthday cards and cards

MESA Messenger Newsletters

Participant appreciation Items



Participant Appreciation Items

Participant Appreciation Items

- The Coordinating Center will procure appreciation items for MESA participants.
- Send cloth bag with clinic visit information prior to in-person visit
- Give fleece blanket at in-person or home visit.

Obtaining items

- Initial shipment will be shipped from vendor.
- Additional stock is shipped from the CC
- The study team is responsible for giving gifts to the participant.
- Sites should keep a 2-3 month stock of items on hand at their site (as space allows)
- Two weeks prior to when you require a re-stock of participant gifts, please send Amy Hoffman (<u>ajulian@uw.edu</u>) an email with the following information:
 - Subject: MESA participant items for {site name}
 - In body of text indicate which items you need, the number of each item, and confirm the shipping address.







RETURN OF RESULTS

Kayleen Williams MESA Clinical Operations

Return of Results

Results are valued by participants, and they help maintain interest and participation in MESA. They play a crucial role in participants retention over time

Results should be provided in language preferred by the participant

Results letters

- Exit report
- Lab Results Letter
- High Tech Letter

Alerts and Referrals

- Immediate Referral
- Urgent Referral



Exit Report

MESA Clinic Report - Exam 7

Date: 2/22/2022

MESA ID# 9013278: Jane Doe



Dear Jane Doe.

We truly appreciate your participation in the Multi-Ethnic Study of Atherosclerosis (MESA). The time you spend volunteering will help improve our understanding of heart disease and its diagnosis and prevention methods. This report aims to provide you with some of the results from your examination. We will be sending you additional reports on your blood tests and other procedures when those results become available.

Weight: 152 lbs. Height: 5 ft. 5 in. (165.1 cm) Body Mass Index: 25.3

Please note that a body mass index of 25 or greater is considered overweight.

Reference Ranges for BMI

Less than 18.5	18.6 - 24.9	25.0 - 30.0	Greater than 30
Underweight	Normal	Overweight	Obese

Blood Pressure: 131 / 78

These values indicate that your blood pressure is:

 Stage 1 Hypertension (Systolic 130-139 mm Hg, Diastolic 80-89 mm Hg). If you have heart disease, or multiple risk factors for heart disease, please have your doctor check your blood pressure again in the next few months.

If you are taking blood pressure medications, please do not change or stop taking them without your doctor's advice. Please keep your scheduled visits to your doctor.

Resting Oxygen Saturation

Your resting oxygen saturation level was 98%, which is.

We recommend that you discuss any abnormal findings with your doctor. If you have any questions about these results, please contact Katy Meilus, Study Coordinator, at (555) 555-5555.

Measures Reported:

- Weight
- Height
- BMI
- Blood Pressure

Generated at the FC, distributed at the end of the visit



Lab Results



Dear Jane Doe,

Thank you again for your continued participation in the Multi-Ethnic Study of Atherosclerosis (MESA). We appreciate your efforts to help improve our understanding of heart disease and how to prevent it. We are providing results of the blood tests which were done during your MESA examination on XXX. A report on the results of your other tests will be in another letter.

Your fasting plasma glucose was 140 mg/dl, which is in the diabetic range [>125 mg/dl].

Your A1C (which reflects the average amount of sugar in your blood in the preceding three months) was 6.9%, which is in the diabetic range [>6.4%].

Your estimated glomerular filtration rate (eGFR), which reflects kidney function, was 69.38 mL/min/1.73 m2, which is normal [>60 mL/min/1.73 m2].

Your hemoglobin, or red cells in the blood, was 12.7 g/dl, which is normal [11.1 - 15.9 g/dl].

Your total cholesterol level was 140 mg/dl. Your LDL ("bad") cholesterol level was 75 mg/dl. Your HDL ("good") cholesterol level was 46mg/dl. Your triglyceride level was 96 mg/dl. Based on current national guidelines, treating cholesterol depends on your heart and stroke risk. In general, these are the desirable levels of lipids:

Total cholesterol < 200 mg/dl LDL cholesterol < 100 mg/dl HDL cholesterol > 60 mg/dl Triglycerides < 150 mg/dl

We encourage you to have a discussion about your risk for heart disease and stroke with your medical provider to determine if a change in treatment is needed.

A copy of your laboratory results is enclosed. If you requested it, a copy of these results was sent to your medical care provider. We encourage you to take this letter with you the next time you visit your medical care provider to discuss any abnormal findings.

If you have any questions, please call Katy Melius at (555) 555-5555.

Again, thank you for your participation in MESA.

Sincerely,

alan Buton Mo

Alain G. Bertoni, MD. Medical Director

Letter Distribution:

- Mailed within 4 weeks of the visit
- Generated by CC, distributed to FC for mailing
- To participant and health care provided (if requested)

Measures Reported:

- Fasting glucose
- eGFR
- Total cholesterol/LDL/HDL
- triglyceride



High Tech Results



Dear Jane Doe,

Thank you again for your continued participation in the Multi-Ethnic Study of Atherosclerosis (MESA). We appreciate your efforts to help improve our understanding of heart disease and how to prevent it. The purpose of this letter is to provide you with the results of the lung CT scan, spirometry, and echocardiogram you underwent as part of your examination in MESA.

- The spirometry breathing test done on XXX showed that your FEV₁ (a measure of how
 fast you can blow out) was 48% of predicted for someone your age, your FVC (a measure of
 how much you can blow out) was 64% of predicted for someone your age, and their ratio
 was 58%. Your current test results indicate a possible moderately severe reduction in your
 breathing capacity.
- The echocardiogram (heart ultrasound) performed on XXX was normal. Your heart chamber size and function are normal. There is no significant valvular disease.
- The CT scan of the lung does not indicate any emphysema.

Please note that the above studies were performed as a part of a research study and may not be the same as tests done as a part of a patient's medical care. Nonetheless, we recommend that you discuss any abnormal findings with your doctor.

If you requested it, a copy of this letter will be sent to your doctor. Otherwise, you may wish to take this letter to your doctor.

Once again, we greatly appreciate your participation in MESA.

If you have any questions, please call Vijay Nayudupalli at (212) 555-5555.

Sincerely,

Steven Shea, MD, MS Principal Investigator

Columbia University MESA Field Center

Letter Distribution:

- Mailed within 8 weeks of the visit
- Generated by CC, distributed to FC for mailing
- To participant and health care provided (if requested)
- Strive to compile results in a single letter, timing dependent

Measures Reported:

- Heart Monitor Patch
- Glucose monitor
- Spirometry
- Lung CT
- Cognitive status (if consented)
- Overnight sleep study
- Actigraphy report (wrist)
- 24H blood pressure monitor
- Hip monitor activity patterns



Alerts and Referrals

<u>Alerts</u>: Any medical findings that may have adverse health consequences to the participant if untreated (notify PI or Co-PI or send participant to ER if not available)

- Clinic Alerts (the day of the visit) for \uparrow or \downarrow BP, \downarrow O2 Sat, Brain MRI abnormal finding, and Chest CT scan abnormalities
- <u>Reading Center Alerts &/Incidental findings</u> including (heart monitoring patch, sleep study, Chest CT, Echo, MRI, Lab results...

The participant is referred to their primary care provider or provided with a referral.



Immediate Referrals

- Immediate referrals: Medical emergencies which require immediate notification of both ppt and their PCP.
 - Occurs during clinic visit and participant should go from FC to their PCP.
 - FC should contact the participant's PCP by phone before leaving the FC.



Urgent Referrals

- Urgent Referrals: for detected abnormalities that require medical attention, but not as an emergency.
- Should be report before the participant leaves the clinic or immediately upon receipt from Central Lab or Reading Center.
- Send urgent notifications to the participants
 PCP within the week



Alert Examples

Finding	Alert Level	Study
Systolic BP > 210 mmHg	Immediate	Core
Diastolic BP > 120 mmHg	Immediate	Core
Systolic BP 180-210 mmHg	Urgent	Core
Diastolic BP 110-120 mmHg	Urgent	Core
Oxygen Saturation (resting) <88%	Urgent	Core
Pulse <130 bpm	Urgent	Core
Brain MRI: Acute subdural or epidural hematoma	Immediate	MESA-Mind
Brain MRI: Subarachnoid hemorrhage	Immediate	MESA-Mind



Protection of Privacy

MESA Group adopts a consistent results reporting policy that accommodates participants and allows them to make appropriate medical decisions for their health.

All the appropriate precautions to ensure the confidentiality of test results will be taken, including but not limited to:

- Not leaving test results on voice mail or with a third party unless previously given permission to do so by the participant
- Not delivering test results via e-mail
- Not sending test results through the mail in any form other than a sealed envelope

Finally, it is important to acknowledge that MESA plays a key role by advancing science and providing ppts with tests results keeping their health in check periodically.



RESOURCES

Kayleen Williams MESA Clinical Operations

About MESA

https://www.mesa-nhlbi.org/aboutMESA.aspx

About MESA

Invitation to New Investigators

MESA Overview and Protocol Study Timeline and Procedures

MESA Personnel and Committees

The Multi-Ethnic Study of Atherosclerosis (MESA) is a study of the characteristics of subclinical cardiovascular disease (disease detected non-invasively before it has produced clinical signs and symptoms) and the risk factors that predict progression to clinically overt cardiovascular disease or progression of the subclinical disease. MESA researchers study a diverse, population-based sample of 6,814 asymptomatic men and women aged 45-84. Approximately 38 percent of the recruited participants are white, 28 percent African-American, 22 percent Hispanic, and 12 percent Asian, predominantly of Chinese descent.

Click here to read about MESA Overview and Protocol.

Please direct inquires about MESA to Craig Johnson (wcraigj@uw.edu).

Key Study and Cohort Background Papers

Design paper (Bild DE, Bluemke DA, Burke GL, et al.)

The Multiethnic Study of Atherosclerosis (Burke, Lima, Wong, & Narula)

Legacy of MESA (Olson, Bild, Kronmal, & Burke)



Exam 7 Materials

https://www.mesa-nhlbi.org/MesaInternal/MESAExam7Materials.aspx

Exam 7 Materials

Training Materials

Exam 7 Central Training Agenda

DRAFT Exam 7 Filed Center MOP (v1 1/12/2022)

Exam 7 Forms

Core Procedures

Medications

- Medications Certification Packet 1
- Medications Certification Packet 2

Anthropometry Training Video Blood Pressure Training Video

MESA MIND Ancillary Study

Cognitive Testing Training Materials

Arterial Stiffness VaSera Device Training Videos

- What is CAVI?
- Preparation
- The cuffs
- The PCG
- Thigh cuff test

24H-ACT Ancillary Study

24H-ACT Ancillary Study Training Video
24H-ACT Ancillary Study Recruitment and Participant Materials

- 24H-ACT Certification Checklist
- 24H-ACT Recruitment Materials
- 24H-ACT Take Home Materials
- Participant Diary
- <u>Hip and Wrist Activity Monitors</u>

Stress Ancillary Study

Stress Ancillary Study Presentation Stress Ancillary Study Training Video Stress Ancillary Study Ouiz

Glucose Homeostasis Ancillary Study

Glucose Ancillary Study Training Video
Glucose Ancillary Study Training Slides
Glucose Ancillary Study CGM Placement Guide
Glucose Ancillary Study Checklist

FreeStyle Libre Sensor Application Video



Previous Exam MOPS, Follow-up 23 MOP

https://www.mesa-nhlbi.org/MesaInternal/Manuals.aspx

MESA Manuals

▼ Follow-up	Call Manuals
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- ▼ Field Center Manual of Operations [Exam 6]
- ▼ Field Center Manual of Operations [Exam 5]
- ▼ Field Center Manual of Operations [Exam 3]
- ▼ Field Center Manual of Operations [Exam 2]
- **▼** Field Center Manual of Operations [Exam 1]
- ☑ Quality Control Manual of Operations [Exam 4]

- **図 CT Manuals**
- **▼ MRI Manuals**
- **⋈** MESA Stress 2 Manuals
- Ultrasound Protocols
- Supplemental Documents from CHS
- MESA Family Manual of Operations



Tracking Reports

https://www.mesa-nhlbi.org/MesaInternal/Reports.aspx



CHSCC Collaborative Health Studies Coordinating Center

Status of Followup Phone Contacts

Followup 23 Status

View Report

Retention By Clinic And Ethnicity
Core Component Completion
Exam Completion Progress
Heart Failure Components (All selected)
Atrial Fibrillation Component Consent
Atrial Fibrillation Component Completion and Alerts
Lung/Lung NS Components
Lung CT Scans and Safety Reads
Completed CT Scans by Study
Spirometry Completion

View Report

Target and (Complete	ed										
800												
600				\perp				\perp				
									_			
400				+						+	_	
200												
200												
0												
	AUG 2021	2021	2021	OV 2021	DEC 2021	IAN 2022	2022	2022	PR 2022	2022	JUN 2022	2022
	AUG	SEP	OCT	NO	DEC	NA.	FEB	MAB	₩	MAY	N N	Ħ

Race	Enrolled	Active	Done	% Enrolled	% Active	Pending
African American	1214	1052	851	70%	81%	286
Chinese	586	493	420	72%	85%	110
Hispanic	1100	920	710	65%	77%	266
White	1785	1554	1322	74%	85%	371
Total	4685	4019	3303	71%	82%	1033



MESA CC Contacts

Name	Role	Email address
Craig Johnson	MESA Project Director	wcraigj@uw.edu
Sandi Shrager	MESA MIND Project Director	sandis@uw.edu
Karen Stukovsky	MESA Lung Project Director	hincklek@uw.edu
Kayleen Williams	MESA Clinical Operations Director	kmfw@uw.edu
Amy Hoffman*	MESA E7 Clinical Operations Manager	ajulian@uw.edu
Jerry Watson	MESA Programming Lead	jerrw@uw.edu
David Vu	MESA Data Manager	voodoo@uw.edu
Lauren Jager	MESA Events Manager	jagerl@uw.edu

^{*}Main contact for Exam 7 clinical operations questions



DATA COLLECTION PROGRAM

Data Collection Details

- All data collection applications for Exam 7 are web-based with password protection. Any desktop, laptop, or tablet with an internet connection and web browser can be used.
- See user guide for MESA-provided SurfacePro tablets in MOP section 11.2.

Security best practices for all devices:

- Password protection should be enabled, and devices should be locked when not in use.
- All MESA applications containing participant information should be closed and logged out of when not in use.
- Never share personal passwords between staff.
- Ensure all computers have updated anti-virus software installed.
- Promptly apply software updates when available.
- Contact Craig Johnson if a device is lost or stolen (wcraigj@uw.edu)

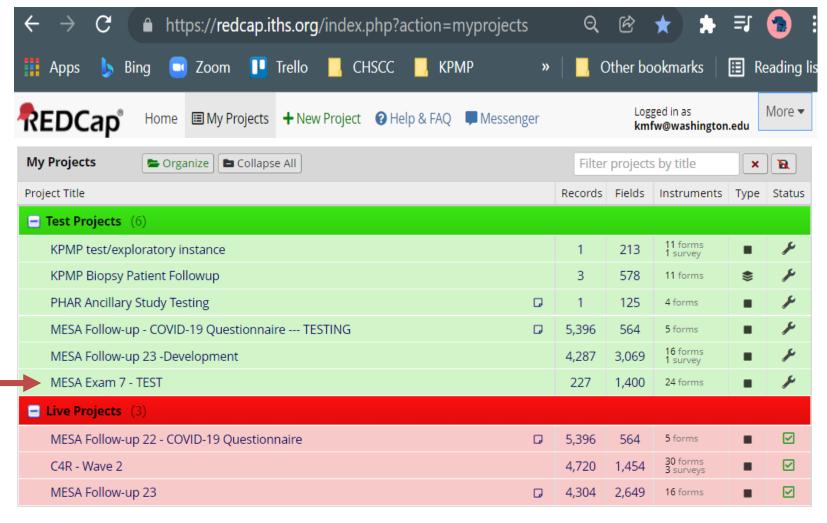


REDCap Data Collection Program

- New to REDCap? Data Entry Overview (video)
 - redcap.iths.org
 - Web-based, cross platform
 - Data Entry introduction https://projectredcap.org/resources/videos/
 Overview of Basic Data Entry (19 min)
- Contact CC for REDCap access (jerryw@uw.edu)
- Data entry requires an internet connection
- Practice data entry using test IDs



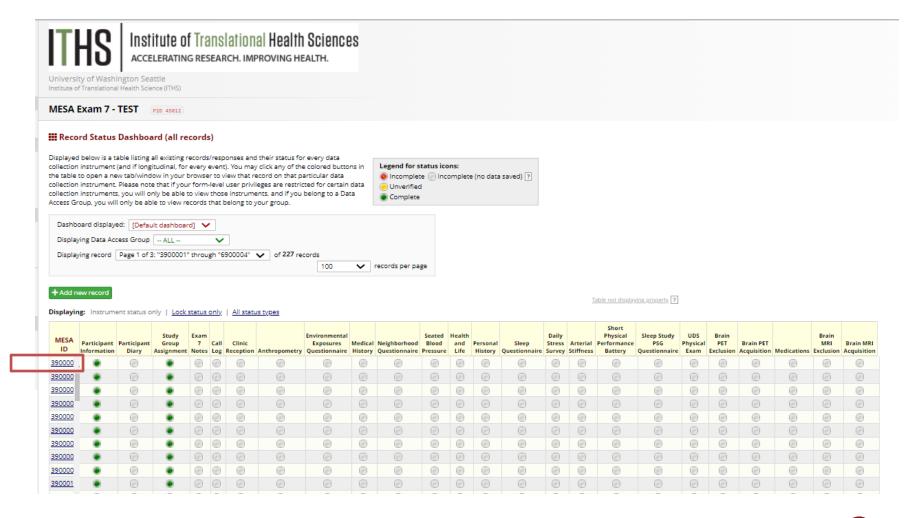
REDCap – My Projects



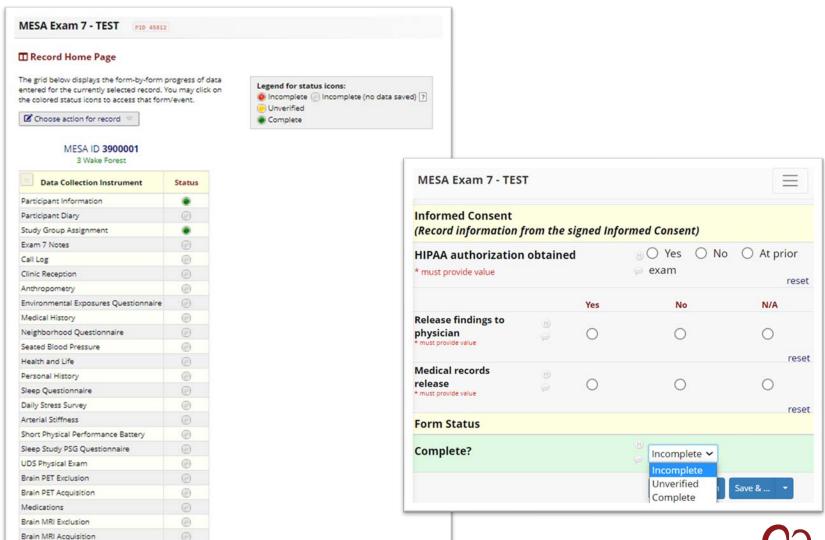




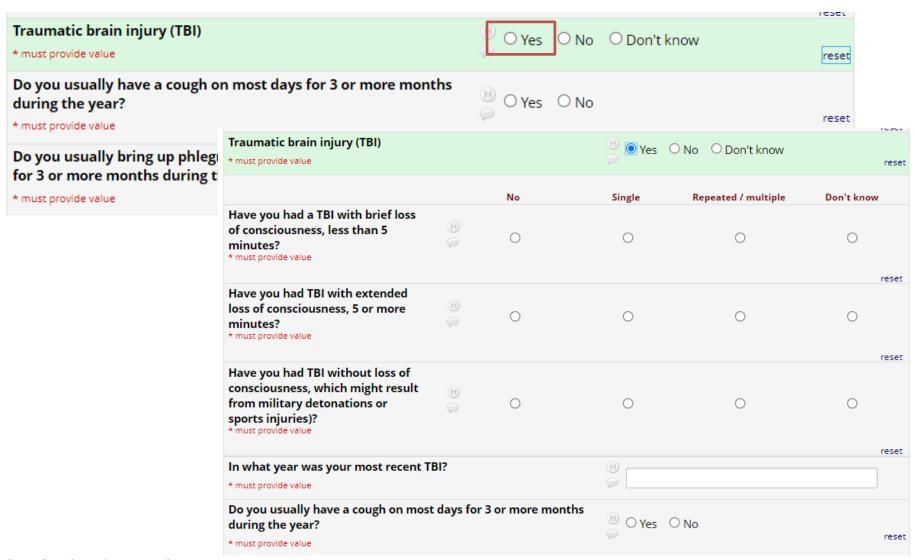












REDCap Dashboard Filter

