PAROS
Overview & Operation Principles

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Overview

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Background

- Out of Hospital Cardiac Arrests (OHCAs) are a global health concern.
- There is an urgent need to better understand the key factors that affect OHCA survival.
- To develop methods to improve OHCA survival.

What is PAROS?

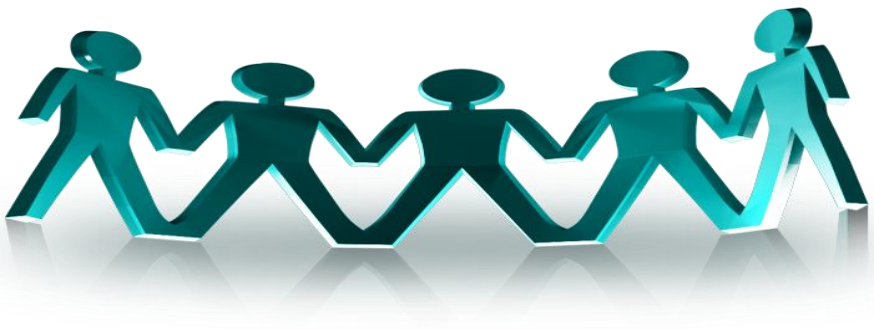
Pan

Asian

Resuscitation

Outcomes

Study



Objectives

- Understand OHCA as a disease in Asia
- Describe current pre-hospital systems in the Asia-Pacific
- Provide international benchmarking and study of best practices
- Impact community awareness and change attitudes towards OHCA
- Improve OHCA survival by system/ community level interventions

Methods

- To establish a Pan Asian network of EMS physicians that will collect and link data and outcomes from OHCA and other pre-hospital emergencies in their respective cities and countries
- To include EMS data from dispatch services, ambulance records and service providers.
- Data regarding cardiac arrest outcomes and other conditions will be collected from all major hospitals.
- Information about PAROS can be found in the website below.
- Contents in the website will be updated periodically.

http://www.scri.edu.sg/PAROS.html

Proposed Mission & Vision

Mission

To improve outcomes from Prehospital Emergency Care across the Asia-Pacific by promoting high quality research into resuscitation

Vision

Improving outcomes from Prehospital Emergency Care across the Asia-Pacific

Proposed Logo

Option 1

Option 2

Option 3

Option 4

Study Management Process

Singapore Clinical Research Institute's (SCRI) Research Informatics Task Force will give support by making recommendations on the appropriate Information Technology systems and their functionalities.

Clinical Research Network (CRN) EXCO

Make decisions on:
- Selection of clinical sites for the network
- Determine recruitment
- Training needs

Define other study management processes based on the needs of the network, to include but not limited to issues such as meeting frequency and study termination.

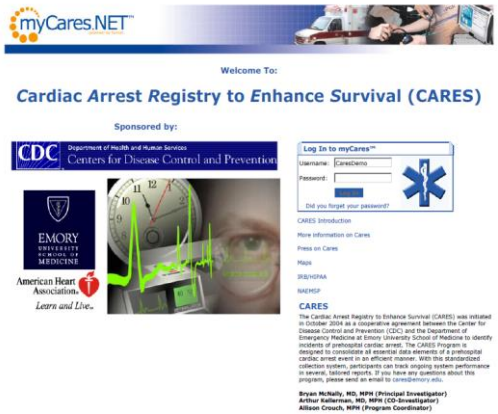
Study Management Process

- CRN consists of:
  - Clinical, research and administrative professionals

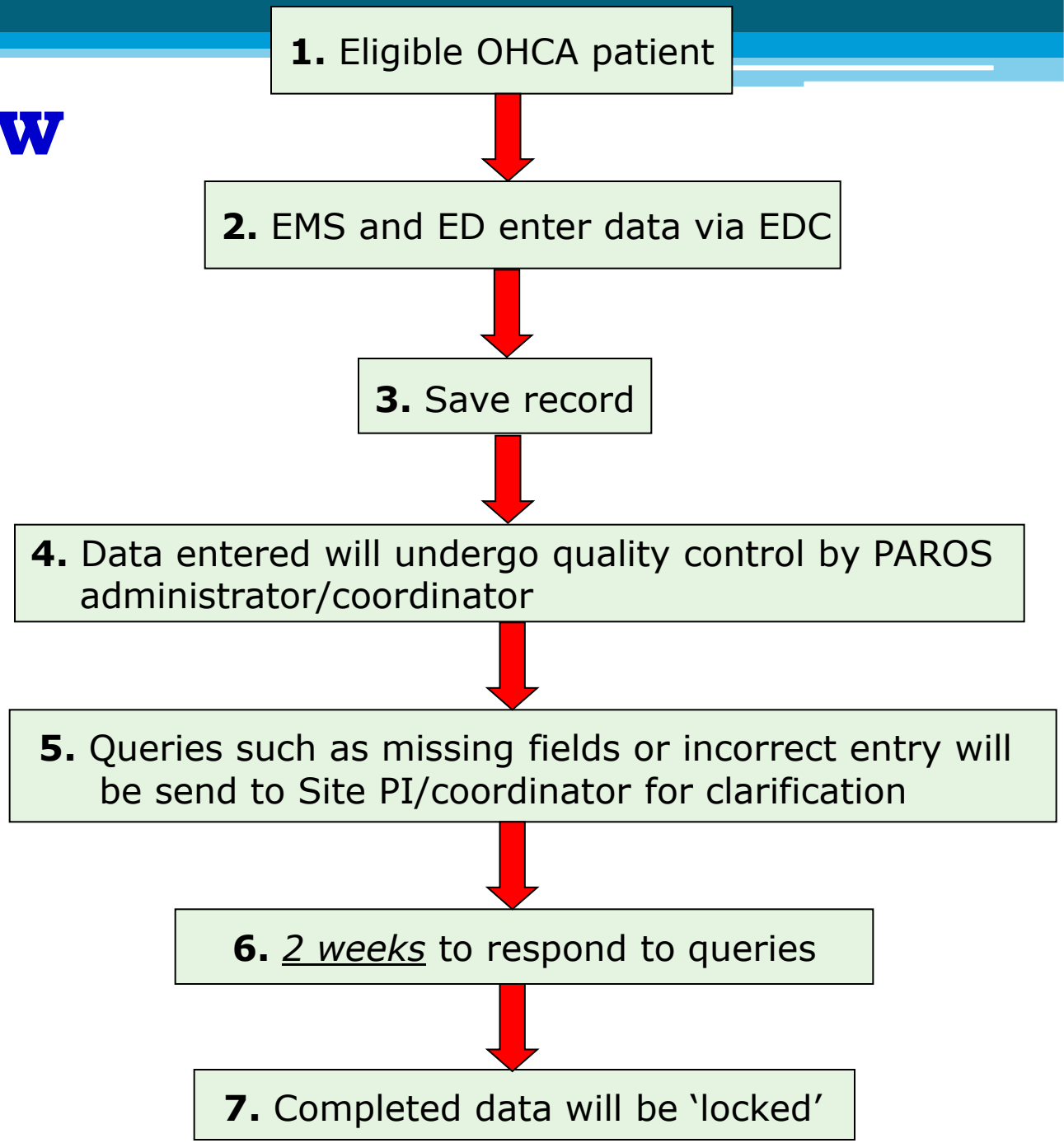
- Role of CRN:
  - To design, conduct, analyze and publish multi-site clinical, translational, or services research studies.

Electronic Data Capture (EDC)

- Web based data collection software for multi-site clinical trials.
- Server placed at SCRI of Singapore, which is the Trial Coordinating Centre.
- Customized Case Record Forms (CRF) for enrolling, collecting and managing data.
- In collaboration with CARES/Emory, Atlanta
- Accessible to team members all over the world.
- Each EMS agency and participating hospital will be given a user ID and password.



Work Flow


1. Eligible OHCA patient
2. EMS and ED enter data via EDC
3. Save record
4. Data entered will undergo quality control by PAROS administrator/coordinator
5. Queries such as missing fields or incorrect entry will be send to Site PI/coordinator for clarification
6. 2 weeks to respond to queries
7. Completed data will be 'locked'

Frequently Asked Questions

1. What does participating in PAROS involve?

- Require a contact at each participating site or EMS agency to serve as the local PAROS administrator, and liaison between the sites/agency and PAROS staff.

- The contact will work closely with PAROS staff to:
  1. Determine the most appropriate methods for starting data collection and program implementation
  2. Monitor data collection for the EMS agencies and participating hospitals.

2. How does data get into PAROS?

- Via desktop computer by the PAROS EMS/hospital contact.

- Automatically extracted from existing patient's electronic record system which then auto-populates the PAROS registry

Frequently Asked Questions

3. Is the PAROS website secure?

- Uses Secure Socket Layer (SSL) encryption technology in transmitting patient's health information to help ensure the integrity and privacy of the information.

- Entire system is protected by cutting edge fire protection, and off-site data archiving to assure data integrity even in the event of a catastrophe.

4. Does PAROS use identifiable patient information?

- PAROS requires the use of patient's name and ID number to link the EMS record with the hospital outcomes.

- Once a record is determined to be complete by PAROS staff, the record is de-identified.

Frequently Asked Questions

5.Who has access to the data?

- The participating EMS agencies has access to all of the EMS and hospital data for their patients. EMS agencies do not have access to data from other participating agencies.

- Each participating hospital has access to **ONLY** their own data. Therefore, hospitals do not have the ability to view data from other area hospitals.

- PAROS staff has access to all EMS and hospital data for monitoring and de-identification purposes.

Update on Sites

Country	Sites	Registration Status
Korea	6	Confirmed
Singapore	6	Confirmed
Taiwan	2	Confirmed
Japan	2	Confirmed
Malaysia	2	Confirmed
Turkey	1	Confirmed
Australia	3	Pending registration
Thailand	2	Pending registration
Hong Kong	*5*	*Pending participation*
Brunei	*1*	*Pending participation*

Update on Timeline

Task	Milestone	Due Date	Status
1	Create taxonomy and data dictionary	End Sep 2009	Completed
2	Design CRF	End Nov 2009	Completed
3	Set up operation committee and publication committee	End Jan 2010	Completed
4	Set up EDC and co-ordination meeting for members	Mid Mar 2010	In progress
5	- Create questionnaire - Survey of members	Mid Mar 2010	In progress
6	EDC training for member countries	Mid June 10	
7	Launch EDC for OHCA study	June 2010 (ICEM 2010)	
8	Manuscript completed for PAROS survey and submitted for publication	End 2010	
9	Data collection completed for PAROS OHCA study and preparation for publication	June 2011	

Future Plans

- Pilot study on Singapore data to test the EDC system
- To showcase the latest version of the EDC using own platform (www.eparos.org) during ICEM 2010 in June
- Establish regular monthly tele-video conferencing

THANK YOU