



# Recruitment







### Where to Prescreen for subjects

- Inpatient stroke service
- Outpatient stroke service
- Acute rehab facility
- Local stroke research database



### Stroke Inpatient Service

- Screen inpatient lists every morning
- Things to look for in EMR:
  - First ever ischemic stroke (radiology reports, ask stroke attending)
  - Does the patient have good motor arm function? (Can they hold their arm out for 10 seconds with no drift?) If yes, not a good potential subject
  - Live locally with good social support \*IMPORTANT\*



## Stroke Outpatient Clinic

- Patients who follow up in outpatient clinic with in 6 weeks of stroke
  - Typically compliant and good candidates
  - Schedule for baseline visit
- Patients who come back AFTER 6 weeks
  - Verify date of stroke is not over 6 months



### **Acute Rehab Facility**

Initiate communication with subject 1-2 weeks prior to discharge

 Good time to form a relationship with patient and their family/support system if possible



#### Local Stroke Research Database

- Subjects have already agreed to be contacted
- Look to see if database includes deficit/impairment information
- Pay close attention to date of stroke
  - Can't be over 6 months
- Avoid competition with other trials at your institution. Communicate with other research groups



## **Training Subjects**

- Separate ICF
- Healthy controls OR stroke survivors
- Eligibility is more flexible
- If a stroke survivor is eligible to be enrolled as a study subject, please do not enroll them as a training subject



### General Retention Strategies

- Make all attempts to work around the subject's schedule
- Be sensitive to needs
  - Fatigued easily
  - Frequent bathroom use
- Transportation!
  - Most cannot drive themselves, pay attention to caretaker/family needs
- Considerations for holidays or inclement weather conditions



#### tDCS Retention

- Let the subject know what to expect ahead of time
  - Itching and tingling expected
  - Sensation is stronger in the beginning
  - Ways to minimize discomfort (will review more details in tDCS training session)



#### TMS Retention

- Explain procedure prior to starting TMS
  - Explain that TMS shows us how the arm and brain are connected by inducing muscle twitch
  - Try TMS coil on the wrist first
  - More details to be discussed during TMS training sessions



#### MRI Retention

- Explain procedure prior and why it is necessary
  - If patient is nervous about MRI's or claustrophobic, consider staying in the room with the subject



#### Collaborate and Learn

- We will be beginning TRANSPORT2 Enrollment and Recruitment calls with sites (PIs and coordinators)
  - Great opportunity to share experiences with other teams
  - Every other week to start, eventually once a month
  - Detailed information will be announced in the upcoming weeks

