

## **Frequently Asked Questions (FAQs):**

Q. Who do I contact for questions about this project?

A. Nicole Moraco, Clinical Research Fellow, [Nicole.Moraco@lahey.org](mailto:Nicole.Moraco@lahey.org) will be happy to answer any questions you have about the study, IRB, data acquisition or redcap database.

Q. Who do I contact for questions about the collaborative research agreement or data-use agreement?

A. For any questions relating to the Collaborative Research Agreement, please contact the Office of Sponsored Research [BILH\\_OS@lahey.org](mailto:BILH_OS@lahey.org). The signed agreement should be forwarded to [bilh\\_osr@lahey.org](mailto:bilh_osr@lahey.org) for full execution by Lahey's authorized signing official. Please include a return email for a copy of the fully executed agreement to be delivered

Q. Is this data retrospective or prospective?

A. This study is entirely retrospective for ease of participation and data review. Once a baseline of palliative care practice patterns for trauma centers have been established the AAST Palliative Care Committee plans a second prospective study.

Q. What is the patient population?

A. All geriatric trauma patients, defined as greater than or equal to 55 years old.

Q. How many patients will this study include?

A. This will depend on the number of patients admitted to your site during the two snapshot time periods: June 1-15 2021 and October 15-31 2021.

Q. Will I be able to access all of the data for other sites?

A. As an added layer of protection, participating sites will only be able to access their own data.

Q. In order to participate, how much time will this project require of my staff?

A. This in part depends on the complexity of the electronic medical system and ease of navigating, but each patient takes approximately 10 minutes to read the chart, locate the information, and enter the data into redcap in real time.

Q. How do I share the data?

A. There are three options for sharing data: direct entry into recap, uploading into redcap or sharing appropriately labeled encrypted excel files. We recommend direct entry into redcap during data acquisition in order to ensure the integrity of the data and for ease for the user.

Q. Is the data deidentified?

A. In order to protect our patients across the country the data is entirely deidentified. Dates will be converted to days since admission. We ask that each site use their assigned site specific code to enter each patient. For example Lahey Hospital and Medical Center code is LHMC. Each patient will be entered sequentially. LHMC1, LHMC2, LHMC 3 etc.

Q. What will happen with this data?

A. We plan to analyze the data for publication with the Journal of Trauma and Acute Care Surgery

Q. For how long will my team need to be involved in this study?

A. Once your data acquisition and data entry is complete there will be no additional requirements for your site. Once the data is analyzed and ready for publication, however, we will ask you to critically review the proposed paper.

Q. By participating in this study, will I be an author?

A. We will include up to two individuals at each site for authorship. This will include the principal investigator for the specific site and one additional individual designated by the site principal investigator.