

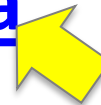


# EmPhAsIS

Empowering Pharmacists in Asthma management through Interactive SMS

## Baseline Procedures: Recruiting and Screening Patients

[emphasis.core.ubc.ca](http://emphasis.core.ubc.ca)

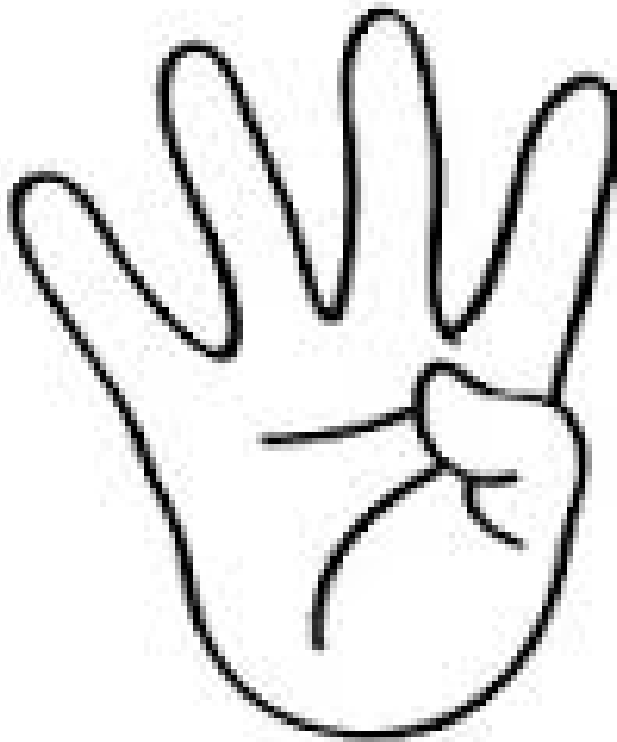


Click for more information



# Eligibility Criteria for Patients

1. 14 years or older
2. Diagnosed with asthma
3. Prescribed with inhaled corticosteroids
4. Have a cell phone with text capabilities







# 1. Recruit

Once you have identified a patient fulfilling the eligibility criteria, it's time to ask them if they are interested in the study and begin recruiting!



# 1. Recruit

a place of mind  
THE UNIVERSITY OF BRITISH COLUMBIA  
Faculty of Pharmaceutical Sciences

a place of mind  
THE UNIVERSITY OF BRITISH COLUMBIA  
Faculty of Medicine

In your binder



- **Study Ad** (colour & black/white)

## Tip

- Post ad on:
  - Wall by counseling area
  - Counter



# 1. Recruit

**EmPhAsIS: Empowering Pharmacists in Asthma management through Interactive SMS**

**What:** A 12-month study assessing whether text messages between patients and pharmacists can help patients with their asthma medication plan.

**Who:** You may be eligible to participate in this study if you:

- ✓ Are 14 years or older
- ✓ Have been diagnosed with asthma
- ✓ Are prescribed inhaled corticosteroids
- ✓ Have a cell phone with text messaging capabilities
- ✓ Are a BC resident and planning to stay in BC for the next year
- ✓ Speak and read English
- ✓ Not currently participating in another asthma-related clinical study

\*Participants will be randomly assigned to either the **intervention** or **usual care** group so there is an equal chance of being separated into either group.

**How:**

Participants in the Intervention Group Receive	Participants in the Usual Care Group Receive
<ul style="list-style-type: none"><li>• Education about asthma and medications</li><li>• Monthly text messages to assess asthma medication use</li><li>• Telephone follow-ups from your pharmacist (based on responses to text messages)</li><li>• Follow-up from the research team at 0, 6, and 12 months to see how you are doing</li><li>• An honorarium for your time taken to participate in this study</li></ul>	<ul style="list-style-type: none"><li>• Education about asthma and medications</li><li>• Follow-up from the research team at 0, 6, and 12 months to see how you are doing</li><li>• An honorarium for your time taken to participate in this study</li><li>• At the end of the study, the opportunity to receive automated monthly assessment of adherence by text messages for 12 months</li></ul>

**Your Rights:** Should you choose to participate in this study your confidentiality will be maintained. Research, health and other records identifying you may be inspected by the primary researcher or his or her representatives of the UBC Clinical Research Ethics Board to monitor the research. Information or records with your identity will not be published without your approval, nor will such information be released without your consent unless required by law.

**Contact details if you require more information**  
**Principal Investigator:** Dr. Mary De Vera (604-827-2138)  
**Research Coordinator:** Louise Gastonguay (604-827-1567)  
**Or visit our website at:** [www.emphasis.core.ubc.ca](http://www.emphasis.core.ubc.ca)

Patient quick info letter Feb4 2015

In your binder



## • Patient Quick Info Letter

## Tip

- Use to explain EmPhAsIS study to patients
- Hand out to asthma patients as bag stuffers



# 1. Recruit – The 6 Steps

1. **Introduce** yourself and **Explain** pharmacy participation
2. **Describe** purpose of EmPhAsIS study
3. **Explain** what EmPhAsIS study involves
4. **Tell** participants what they will receive
5. **Explain** voluntary nature of participation
6. **Emphasize** importance of participation



# 1. Recruit – The 6 Steps

## 1. **Introduce** yourself and **Explain** pharmacy participation

“Our pharmacy is part of a research study offered through UBC looking at asthma medication adherence”

2. Describe purpose of EmPhAsIS study
3. Explain what EmPhAsIS study involves
4. Tell participants what they will receive
5. Explain voluntary nature of participation
6. Emphasize importance of participation



# 1. Recruit – The 6 Steps

1. Introduce yourself and explain pharmacy participation

## 2. **Describe** purpose of EmPhAsIS study

“We will study whether monthly text messages from our pharmacy will help with using your asthma medications to improve control of your asthma”

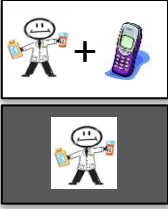
3. Explain what EmPhAsIS study involves

4. Tell participants what they will receive

5. Explain voluntary nature of participation

6. Emphasize importance of participation





# 1. Recruit – The 6 Steps

1. Introduce yourself and explain pharmacy participation
2. Describe purpose of study

## 3. **Explain** what EmPhAsIS study involves

“You will be randomly assigned to a study group. If it is the intervention group, you will receive monthly text messages with a pharmacist following up if there are any concerns. If it is the usual care group, you will not receive the monthly text messages, but have the option to at the end of the study”

4. Tell participants what they will receive
5. Explain voluntary nature of participation
6. Emphasize importance of participation



# 1. Recruit – The 6 Steps

1. Introduce yourself and explain pharmacy participation
2. Describe purpose of EmPhAsIS study
3. Explain what study involves

## **4. Tell** participants what they will receive

“Researchers at UBC will follow-up with you when you start the study, and then again in 6 months and 12 months. You will receive \$25 at the end of the study”

5. Explain voluntary nature of participation
6. Emphasize importance of participation



# 1. Recruit – The 6 Steps

1. Introduce yourself and explain pharmacy participation
2. Describe purpose of EmPhAsIS study
3. Explain what EmPhAsIS study involves
4. Tell participants what they will receive

## **5. Explain** voluntary nature of participation

“If you agree to participate, but change your mind later on, you are free to withdraw at any time”

6. Emphasize importance of participation



# 1. Recruit – The 6 Steps

1. Introduce yourself and explain pharmacy participation
2. Describe purpose of EmPhAsIS study
3. Explain what EmPhAsIS study involves
4. Tell participants what they will receive
5. Explain voluntary nature of participation

## 6. **Emphasize** importance of participation

“You will help identify new and exciting ways to help asthma patients and your assistance and participation would be greatly appreciated”

# **Tips for Successfully Recruiting Participants**

- Engage as many patients as possible, do not get discouraged
- Approach patients you know might be interested from your prior interactions with them
- Use study ads provided to increase visibility of the study around the pharmacy
- Keep study introduction to patients short



## 2. Screen for Eligibility

If the patient agrees to participate in  
the study, complete the  
**Participant Screening Form**



## 2. Screen for Eligibility

**EmPhAsIS: Empowering Pharmacists in Asthma management through Interactive SMS**

Date Completed: \_\_\_\_/\_\_\_\_/\_\_\_\_  
dd mm yyyy

Screening Assessment completed by: \_\_\_\_\_  
(Please Print name)

**Participant Screening Form**

Inclusion Criteria (If 'No' to any of the following questions, then participant is not eligible)	Yes	No
1. Are you 14 years of age or older?	<input type="checkbox"/>	<input type="checkbox"/>
2. Are you filling a new prescription or an on-going prescription for a daily control inhaler (inhaled corticosteroids (ICS), either monotherapy or in combination inhaler with long-acting beta-agonists)?	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you ever been diagnosed by a doctor as having asthma?	<input type="checkbox"/>	<input type="checkbox"/>
4. Do you own a cellular phone with the ability to send and receive text messages?	<input type="checkbox"/>	<input type="checkbox"/>
5. Are you currently residing in BC and plan to reside for the next 12 months?	<input type="checkbox"/>	<input type="checkbox"/>
6. Have you been registered with BC's medical services plan in the past 12 months, and planning to remain registered for the next 12 months?	<input type="checkbox"/>	<input type="checkbox"/>
7. NOT currently participating in another research study related to asthma?	<input type="checkbox"/>	<input type="checkbox"/>
8. Are you willing to participate in this study?	<input type="checkbox"/>	<input type="checkbox"/>

**Eligibility**

Is this participant eligible for the study?

☐ Yes ⇒ Follow enrollment instruction  
⇒ After consent obtained assign study ID and stick label on participant's documents  
⇒ FAX to Researchers at 604-827-4014 (file form in binder)

Study #  -   
Site Number Participant Number

☐ if not eligible ⇒ inform patient that he/she is not eligible (file form in binder)

Emphasis Screening ONPAPER Form March 17, 2015

Page 1 of 1

In your binder



- **Participant Screening Form**

OR

Via website

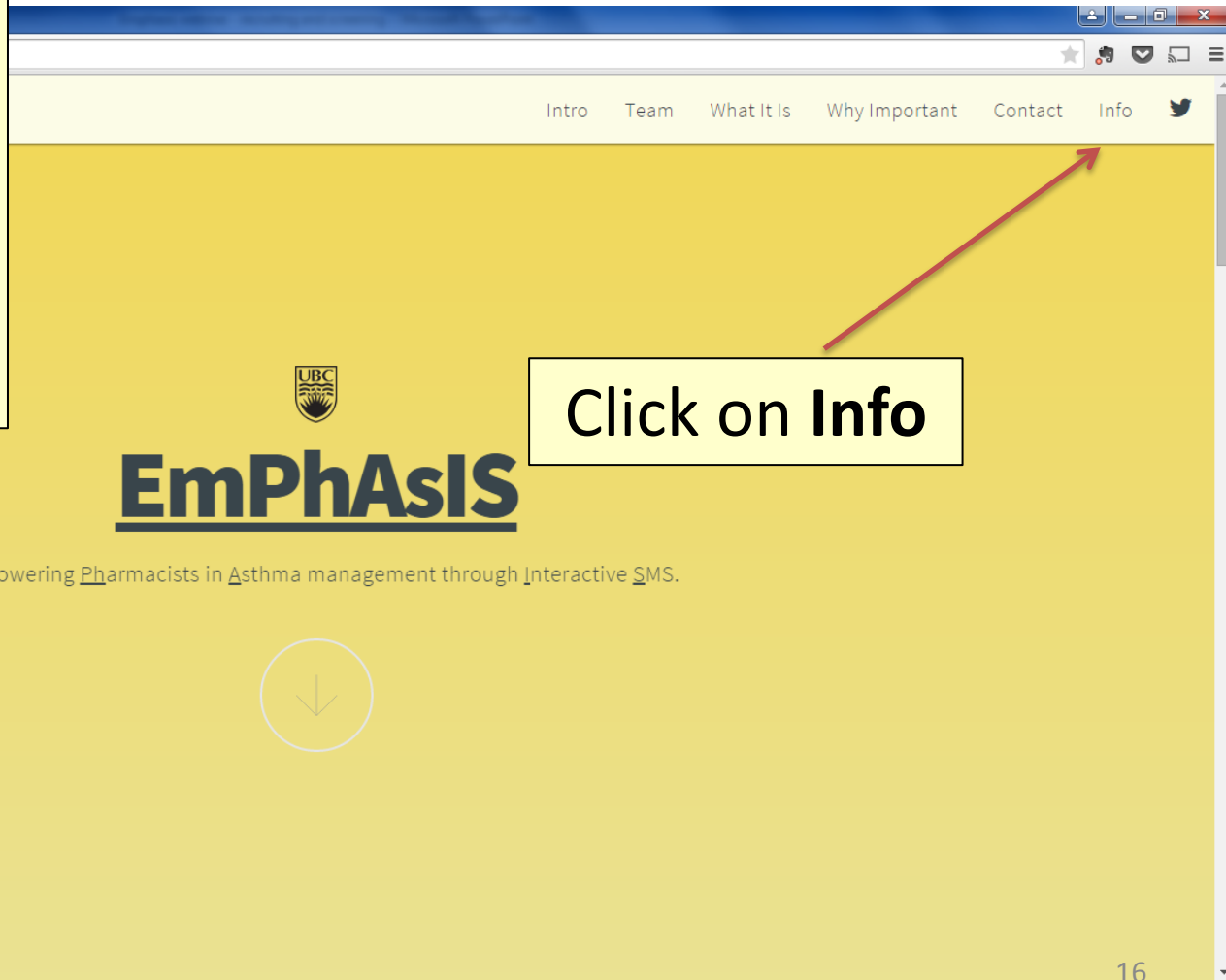


- **Online Participant Screening Form**



## 2. Screen for Eligibility

Access the online version of the **Participant Screening Form** through the EmPhAsIS Website: [emphasis.core.ubc.ca](http://emphasis.core.ubc.ca)



Click on **Info**





## 2. Screen for Eligibility

Emphasis

emphasis.core.ubc.ca

EmPhAsIS

Intro Team What It Is Why Important Contact Info

For Pharmacists

Enter

**Information**

**Patients**

**Pharmacists**

**Locations**

Enter your Username (i.e. phar007)

Click on Pharmacists

17



## 2. Screen for Eligibility

Emphasis: Info: Interventic x

emphasis.core.ubc.ca/cinfo/interventions?phar=true

EmPhAsIS

Screening Forms Study Forms Weltel Link Resources Pharmacist Information Information and Training Webinar FAQs

### Intervention Pharmacies

Screening Form

### Study Forms

- [Enrolment and Recruitment Flow Chart](#)
- [Instructions for Enrolment](#)
- [Contact Information Form](#)
- [Demographics Form](#)
- [Subject Information Consent Form](#)
- [Participant Screening Form](#)
- [Study Log](#)

Click on  
Screening Form

### Weltel Link

[Weltel Login.](#)

### Resources

- [Pharmacist Guide for Intervention Pharmacies](#)

## 2. Screen for Eligibility

Emphasis: Info: Surveys - Google Chrome  
emphasis.core.ubc.ca/cinfo/surveys

### Screening Form

Date Completed

mm/dd/yyyy

Completed By

Completed By

If selected "No" to any of the following questions, then participant is not eligible

1. Are you 14 years of age or older?	<input type="radio"/> Yes <input type="radio"/> No
2. Are you filling a new prescription or an on-going prescription for a daily control inhaler (inhaled corticosteroids (ICS), either monotherapy or in combination inhaler with long-acting beta-agonists)?	<input type="radio"/> Yes <input type="radio"/> No
3. Have you ever been diagnosed by a doctor as having asthma?	<input type="radio"/> Yes <input type="radio"/> No
4. Do you own a cellular phone with the ability to send and receive text messages?	<input type="radio"/> Yes <input type="radio"/> No
5. Are you currently residing in BC and plan to reside for the next 12 months?	<input type="radio"/> Yes <input type="radio"/> No
6. Have you been registered with BC's medical services plan in the past 12 months, and planning to remain registered for the next 12 months?	<input type="radio"/> Yes <input type="radio"/> No
7. Are you <b>NOT</b> currently participating in another research study related to asthma?	<input type="radio"/> Yes <input type="radio"/> No
8. Are you willing to participate in this study?	<input type="radio"/> Yes <input type="radio"/> No
9. Is participant eligible?	<input type="radio"/> Yes <input type="radio"/> No

Paste

Paste ID

Print this page

If using the online **Screening Form**, remember to print the form after completing



## 2. Screen for Eligibility

Emphasis: Info: Surveys - Google Chrome  
emphasis.core.ubc.ca/cinfo/surveys

### Screening Form

Date Completed  
mm/dd/yyyy

Completed By  
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8. Are you willing to participate in this study?	<input type="radio"/> Yes <input type="radio"/> No
9. Is participant eligible?	<input type="radio"/> Yes <input type="radio"/> No

Paste

Paste ID

Print this page

If **NOT** eligible, inform patient and file form in the back of binder  
**\*\*\*No Patient Study ID needed\*\*\***



entering Pharmacists in Asthma management through Interactive SMS

/  
yyyy

ated by: (Please Print name)

### Participant Screening Form

Inclusion Criteria (If any of the following questions, then participant is not eligible)	Yes	No
1. 14 years of age or older?	<input type="checkbox"/>	<input type="checkbox"/>
2. Are you filling a new prescription or an on-going prescription for a daily control inhaler (inhaled corticosteroids (ICS), either monotherapy or in combination inhaler with long-acting beta-agonists)?	<input type="checkbox"/>	<input type="checkbox"/>
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6. Have you been registered with BC's medical services plan in the past 12 months, and planning to remain registered for the next 12 months	<input type="checkbox"/>	<input type="checkbox"/>
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8. Are you willing to participate in this study?	<input type="checkbox"/>	<input type="checkbox"/>

### Eligibility

Is this participant eligible for the study?

- ☐ Yes ⇒ Follow enrollment instruction  
⇒ After consent obtained assign study ID and stick label on participant's documents  
⇒ FAX to Researchers at 604-827-4014 (file form in binder)

Study #  -   
Site Number Participant Number

☐ if not eligible ⇒ inform patient that he/she is not eligible (file form in binder)



## 2. Screen for Eligibility

If **eligible**, stick the Patient **Study ID** sticker (provided in the back of the binder) onto the form

**\*\*\*** Each participant should have their own unique Patient **Study ID** **\*\*\***

Emphasis: Info: Surveys - Google Chrome  
emphasis.core.ubc.ca/cinfo/surveys

### Screening Form

Date Completed  
mm/dd/yyyy

Completed By  
Completed By

If selected "No" to any of the following questions, then participant is not eligible

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3. Have you ever been diagnosed by a doctor as having asthma? ☐ Yes ☐ No
4. Do you own a cellular phone with the ability to send and receive text messages? ☐ Yes ☐ No
5. Are you currently residing in BC and plan to reside for the next 12 months? ☐ Yes ☐ No
6. Have you been registered with BC's medical services plan in the past 12 months, and planning to remain registered for the next 12 months? ☐ Yes ☐ No
7. Are you **NOT** currently participating in another research study related to asthma? ☐ Yes ☐ No
8. Are you willing to participate in this study? ☐ Yes ☐ No
9. Is participant eligible? ☐ Yes ☐ No

Paste

Paste ID

Print this page



Bringing Pharmacists in Asthma management through Interactive SMS

/  
yyyy

Completed by: \_\_\_\_\_  
(Please Print name)

### Participant Screening Form

Inclusion Criteria	Yes	No
of the following questions, then participant is not eligible)		
14 years of age or older?	<input type="checkbox"/>	<input type="checkbox"/>
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ever been diagnosed by a doctor as having asthma?	<input type="checkbox"/>	<input type="checkbox"/>
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emphasis.core.ubc.ca/cinfo/surveys

### Screening Form

Date Completed  
mm/dd/yyyy

Completed By  
Completed By

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7. Are you **NOT** currently participating in another research study related to asthma? ☐ Yes ☐ No
8. Are you willing to participate in this study? ☐ Yes ☐ No
9. Is participant eligible? ☐ Yes ☐ No

Paste

Paste ID

Print this page

Study # 1 3 0 0 5  
Site Number Participant #

Bringing Pharmacists in Asthma management through Interactive SMS

/  
yyyy

Completed by: (Please Print name)

### Participant Screening Form

Inclusion Criteria	Yes	No
of the following questions, then participant is not eligible)		
14 years of age or older?	<input type="checkbox"/>	<input type="checkbox"/>
filling a new prescription or an on-going prescription for a daily control inhaler (inhaled corticosteroids (ICS), either monotherapy or in combination inhaler with long-acting beta-agonists)?	<input type="checkbox"/>	<input type="checkbox"/>
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6. Have you been registered with BC's medical services plan in the past 12 months, and planning to remain registered for the next 12 months?	<input type="checkbox"/>	<input type="checkbox"/>
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- ☐ Yes ⇒ Follow enrollment instruction  
⇒ After consent obtained assign study ID and stick label on participant's documents  
⇒ FAX to Researchers at 604-827-4014 (file form in binder)

Study #       
Site Number Participant Number

☐ if not eligible ⇒ inform patient that he/she is not eligible (file form in binder)



# Patient Study ID

- Each patient has their own unique **Study ID**
- Use the same Study ID for the same patient on each of the different forms

Each row is a different Study ID  
(Use the same row for each patient)

The image shows a sheet of Avery Easy Peel Labels (Template 5168) with a grid of labels. Each label is divided into two sections: 'Study # Site Number' and 'Participant #'. The labels are arranged in rows and columns. Red arrows point from the 'Study # Site Number' section of the first three labels in the first column to the 'Study # Site Number' section of the first three labels in the second column. The labels are labeled 'Patient 1', 'Patient 2', and 'Patient 3' on the right side. The labels are arranged in a grid with 5 rows and 3 columns. The first three rows are highlighted with red arrows pointing to the corresponding labels on the right. The labels are labeled 'Patient 1', 'Patient 2', and 'Patient 3' on the right side. The labels are arranged in a grid with 5 rows and 3 columns. The first three rows are highlighted with red arrows pointing to the corresponding labels on the right. The labels are labeled 'Patient 1', 'Patient 2', and 'Patient 3' on the right side.

Study # Site Number	Participant #	Patient
1 3 0 0 1	0 1	Patient 1
1 3 0 0 2	0 2	Patient 2
1 3 0 0 3	0 3	Patient 3
1 3 0 0 4	0 4	
1 3 0 0 5	0 5	

## 2. Screen for Eligibility

Once the screening form has been completed and patient is eligible for the EmPhAsIS study...

- Stick patient **Study ID** onto the form
- Fax to UBC **604-827-4014**

If patient is ineligible, inform patient and file the form at the back of the binder

- No patient **Study ID** needed
- No need to fax to UBC



# Congratulations!

You have now successfully recruited and screened a study participant!

For patients who are eligible to participate in the study,  
please see next mini-webinar on:  
**“Consenting and Enrolling Patients”**



# EmPhAsIS

**Empowering Pharmacists in Asthma management through Interactive SMS**

## Questions?

Please do not hesitate to contact us

Dr. Mary De Vera at **604-827-2138** ([mdevera@mail.ubc.ca](mailto:mdevera@mail.ubc.ca))

Research Coordinator (Louise) at **604-827-1567** ([louisega@mail.ubc.ca](mailto:louisega@mail.ubc.ca))

Fax: **604-827-4014**

### Mailing Address

2405 Wesbrook Mall, Vancouver BC, Canada V6T 1Z3