

Place in Site Master File #9

Instructions for the SUP-ICU trial - eCRF

The screening and randomisation procedure is described in the trial document 'Manual for the SUP-ICU trial – screening and randomisation'.

Log on

Please go to http://www.sup-icu.com.

Here you will find links to the data entry system (OpenClinica), the Medication dispensing system and the trial documents.



Click the 'Screen, randomise and enter data' link.



If you have not received your login, please send an email to contact@sup-icu.com



If your browser presents a warning about a certificate from an un-trusted source, please accept the connection and – if possible – install the certificate on your computer. The certificate is required to encrypt the connection between your computer and the server.

We recommend avoiding the use of internet explorer as browser when using this eCRF.

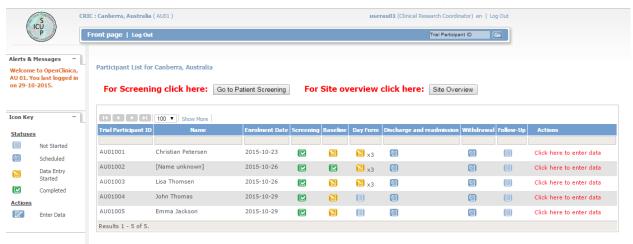


A quick tour through the eCRF

Participant list

After login in you will see the participant list.

(Screen shots below is from a demo version of the SUP-ICU eCRF)



Each trial participant has one row. In the first three columns you will find

- Trial participant ID an automatically generated identifier number. Write this ID in your screening log and use it when communicating with the coordinating centre.
- National identification number (as described in the instruction for screening and randomisation)
- Name of the patient (as written in the screening procedure)
- Enrolment date

The next columns show the different trial events. The colours of the icons indicate the status of the event

- = not started, data entry not possible (day forms, follow-up form)
- = the form is scheduled. In this state data entry is possible if necessary (discharge/withdrawal)
- = data entry possible/started but incomplete
- = completed
- ata has been entered, but not saved (appears when filling out forms in the eCRF)

New forms will be generated daily (maximum of 90 days). The colour of the icon in the column with day forms will turn green when <u>all</u> generated daily forms have been completed. When a new form is generated it will turn back to yellow until <u>all</u> forms have been completed. To see which day forms are incomplete you have to click on the participant (further information are provided below).



From the front page (participant list) you can proceed to:

- 1. Screening procedure
- 2. Site overview
- 3. Participant details (data entry)



Site overview

In the upper right corner (see screen shot above) you will find the 'Site overview' button. Clicking this button will give you a quick overview of your enrolled patients.

Site Overview

AU01 ▼	Click here to get ba	ck to Front	<u>page</u>															
Click "Participant ID" or "Name" to highlight row Hover on Form status symbol to see start date and end date Click Form status symbol to enter form data																		
Participant ID	Name	Screening	Baseline	DF 1	DF 2	DF 3	DF 4	DF 5	DF 6	DF 7	DF 8	DF 9			DF 12			
AU01001	Christian Petersen		8	1	8	1												
AU01002	[Name unknown]			1	8	N												
AU01003	Lisa Thomsen		8	1	1	1												
AU01004	John Thomas		8															
AU01005	Emma Jackson		8															

Point at [3] (without clicking) to see start and end date of the form.

Click the participant ID to highlight the row (green).

Click line to enter the incomplete form.

If icons are missing the forms have not yet been generated. If the patient has been discharged and readmitted, day forms during the period out of ICU will be empty and should not be completed.

Data entry – general information

After randomisation the following forms will be available:

- Baseline form
- Day form (1 per day when the patient is in the ICU with a maximum of 90 days)
- Discharge form (to be completed at discharge or death).
- Withdrawal form (to be completed if the patient is withdrawn from the trial because of clinical indication or withdrawal of consent)
- Follow-up form (becomes active 90 days after randomisation). If the patient dies in the ICU and the discharge form is completed, the follow-up form will automatically be completed

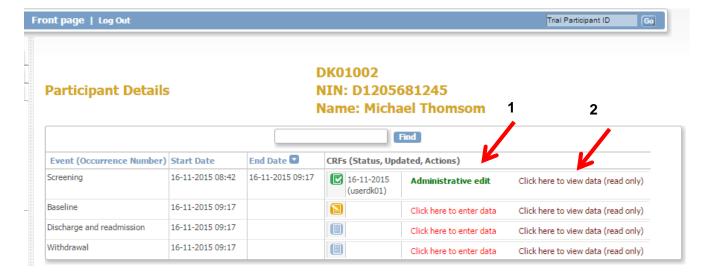


To enter the forms (participant details) click the link 'Click here to enter data'



All generated forms will now be available. You have the opportunity to

- 1. enter or edit data. If you want to edit data in a submitted form click 'Administrative edit'.
- 2. view data (read only)





In the forms:

Click on 'info' to see explanations and further information.

Please read this information carefully!

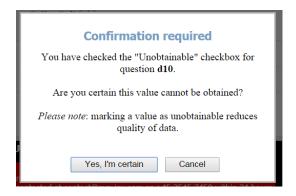
Date format is always **dd-mm-yyyy.** You can use the Calendar or enter the date directly

Time format is 24 hours hh:mm



When answering some of the questions you will have the opportunity to check an 'unobtainable' box.

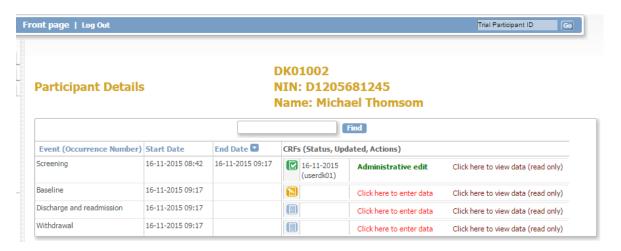
Missing data will reduce the quality of data and we kindly ask you to confirm that the information requested is unobtainable before checking this box.



At the bottom of each form you will have the opportunity to:

- Exit (no save). Use this bottom if you entered the form without changing data
- Save. This will only be an option when data has been entered
- Submit form. This will only be an option when the form is complete

Icons at the patient list and in the overview will turn green when a complete form has been **submitted**. If complete and only **saved**, the icon will be still be yellow.



CRIC • Blegdamsvej 9, 7812 • 2100 Copenhagen Ø • +45 35 45 71 67 • contact@cric.nu • www.cric.nu



Specific forms in the eCRF

Baseline form

This is the most comprehensive form and will take 15-20 minutes to complete.

Please pay attention to the following:

- "Date and time of ICU and hospital admission": if the patient has been transferred from another ICU/hospital please enter date and time of the first admission
- When entering values for SAPS and SOFA scores please report the most deranged values obtained 24 hours prior to randomisation. If bilirubin, creatinine and carbamid (urea) is unavailable from 24 hours prior to randomisation, write the first value from the first 24 hours in ICU.
- PaO2 and FiO2: please report the corresponding values of the lowest ratio obtained

Day form

The first day form will be available when the day starts in your department e.g. 6 AM (decided by the local investigator). The last day is from start of a day (e.g. 6 AM) until discharge/death. Hence, in most cases the first and last day will not be 24 hours. Hereafter a day form is generated once a day at the same time with a maximum of 90 days. The first day form will be available the day after randomisation.

If GI bleeding is observed additional questions have to be answered.

Every day serious adverse reactions (SARs) have to be recorded as part of the day form (7 questions).

To be considered a SAR the event has to be related to the trial medication!

If a SAR occurs please report the SAR to the coordinating centre within 24 hours (see the trial document 'Instruction SAR/SUSAR').

If a day form does not turn green despite it is complete, please <u>make sure the form has been submitted</u> (and not just saved).

Discharge/readmission

The discharge/readmission form is used to discharge and readmit the patient (available several times). Hence, this form will only turn green if the patient is registred dead in the ICU!

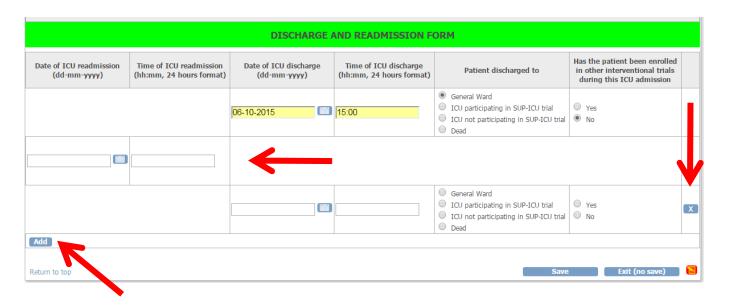
If a patient dies in the ICU, discharge the patient in the system by completing the discharge form. Completing this form will stop the generation of day forms and remove the patient from the list of active participants in the Medication dispensing system.

TIP: If you enter data retrospectively and the patient has been discharged or is dead it may be advantageous to complete the discharge form before day forms, as the system will remove irrelevant day forms.



If the patient is readmitted to the ICU, go to the discharge/readmission form again and click 'add'. This will generate a new row. Please complete date and time for readmission.

If an unnecessary row by accident is generated you have to delete it by clicking 'X' in the right side.



After completing the discharge/readmission form, day forms will again be generated and the patient will be active in the Medication dispensing system for allocation of trial medication.

If PPI or H2RA has been prescribed in the ward, please consider the indication:

- If there is a clinical indication to continue PPI/H2RA, please complete the withdrawal form (see below).
- If the clinical decision is to discontinue PPI/H2RA at ICU admission, please continue trial medication.

If the withdrawal form is completed the patient will not be active in the Medication dispensing system. Please continue daily data collection.

Patients transferred from/to other ICUs

ICUs **not** participating in SUP-ICU:

If a patient is transferred to your ICU please screen the patient for inclusion in SUP-ICU.

If you transfer a patient to another ICU **not** participating in SUP-ICU the patient will be regarded discharged from ICU. Please complete the discharge form. Follow-up still has to be completed at day 90.

ICUs participating in SUP-ICU:

If a patient is transferred <u>from</u> your ICU to an ICU participating in SUP-ICU, complete the discharge form an choose the centre at the list. In the electronic system, the patient will be transferred to a 'transferral site' accessible by you and the receiving department. Please complete all forms as <u>soon as possible</u>. Hereafter



the patient will be transferred to the receiving department. Please inform the receiving department that the patient is enrolled in SUP-ICU.

If a patient is transferred to your ICU and has not been transferred in the electronic system, please contact the coordinating centre soon as possible.

Withdrawal

The patient can be withdrawn from the trial for the following reasons:

- 1. Indication for treatment with open label PPI/H2RA
- 2. Clinical decision other than the above mentioned
- 3. SAR/SUSAR
- 4. Consent not given or withdrawn

Please complete the withdrawal form.

The daily allocation of trial medication will be stopped in the Medication dispensing system. Remember to discontinue the medication in the patient chart. Please continue completing day forms unless consent to do this has been withdrawn.



Follow-up

Ninety days after randomisation the follow-up form will be activated. The only questions in this form are vital status and date of death.

If the patient dies in the ICU and this is marked in the discharge form, the follow-up form will automatically be completed.

DK01002



CRIC • Blegdamsvej 9, 7812 • 2100 Copenhagen Ø • +45 35 45 71 67 • contact@cric.nu • www.cric.nu

