

Overview of PAROS

A/Prof Marcus Ong Eng Hock
Consultant, Director of Research and Senior Medical Scientist
Dept of Emergency Medicine, Singapore General Hospital
Assoc Professor, Office of Clinical Sciences
Duke-NUS Graduate Medical School, Singapore
Consultant, Ministry of Health, Hospital Services Division



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 and its relevant documents can be found in the website below.
- ❖ Contents in the website will be updated periodically.

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

Mission & Vision



Mission

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

Vision

Improving outcomes from Prehospital and Emergency Care across the Asia-Pacific

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.



myCares.NET

Welcome To:
Cardiac Arrest Registry to Enhance Survival (CARES)

Sponsored by:
CDC Department of Health and Human Services
Centers for Disease Control and Prevention

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CARES Introduction
More information on CARES
Print on Care
Main
SERVING
NADOP

CARES
The Cardiac Arrest Registry to Enhance Survival (CARES) was created in October 2014 as a cooperative agreement between the Center for Clinical and Population Sciences (CCPS) and the Department of Emergency Medicine at Emory University School of Medicine to identify outcomes of prehospital resuscitation. The CARES program is designed to consolidate all essential data elements of a prehospital collection system, participants can track ongoing system performance in general, national reports. If you have any questions about the program, please email us at ccps@emory.edu.

David Hurlburt, MD, MPH (Principal Investigator)
Arthur Kallertman, MD, MPH (CO-Investigator)
Allison Crouch, MPH (Program Coordinator)

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
- Batch data uploading, with matching of PAROS variables

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.

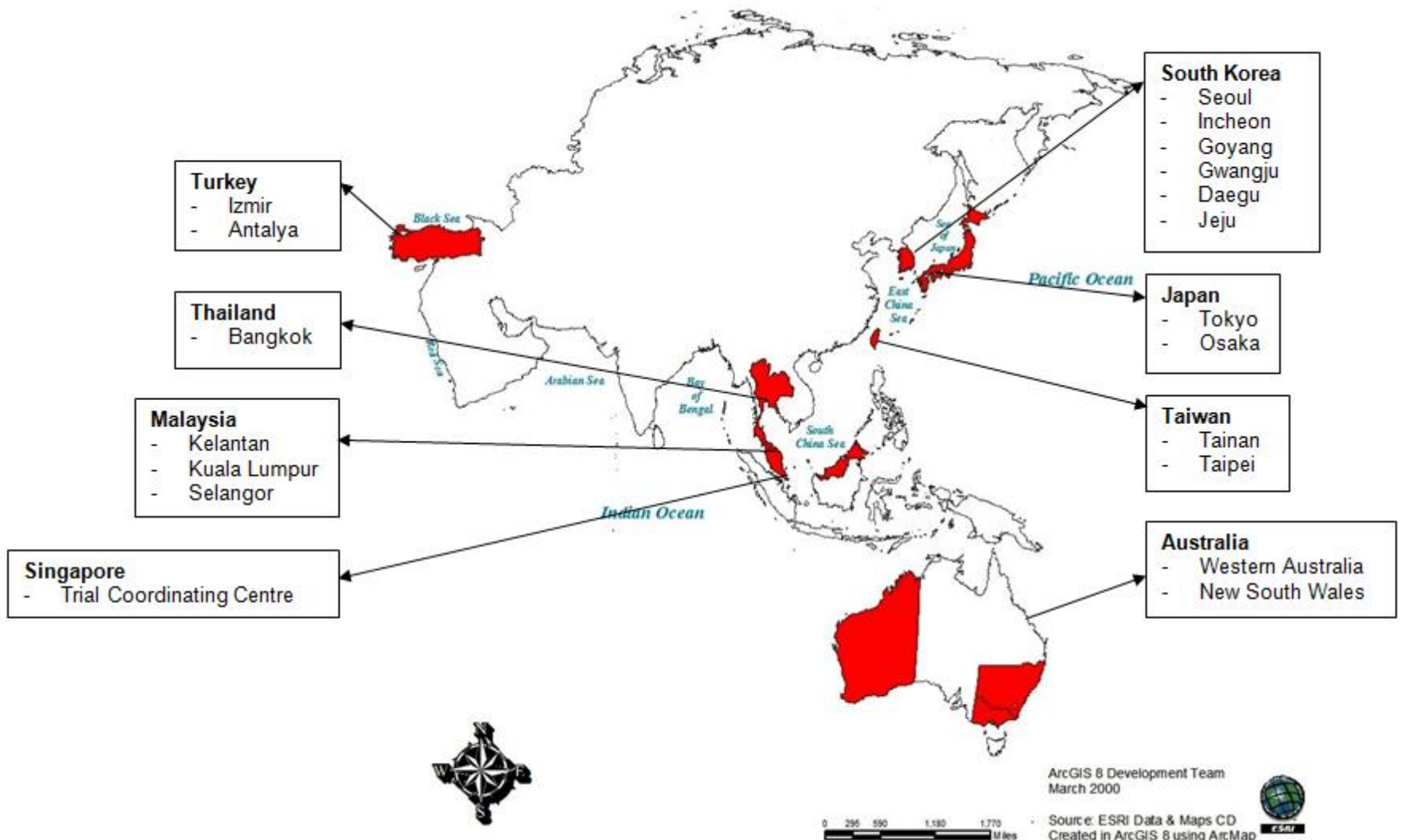


Frequently Asked Questions

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.

Participating Sites



PAROS EXCO 2010

Chair

Dr Marcus Ong - Singapore

Co-Chairs

- ❖ Dr Sang Do Shin – Korea
- ❖ Dr Hideharu Tanaka – Japan
- ❖ Dr Matthew Ma - Taiwan



EXCO Members

Country	Members
Korea	Dr Kyoung Jun Song Dr Kyung Won Lee
Japan	Dr Kentaro Kajino Dr Tatsuya Nishiuchi
Thailand	Dr Pairoj Khruengkarnchana Dr Nalinas Khunkhlai
Taiwan	Dr Patrick Ko Dr Chih-Hao Lin
Malaysia	Dr Nik Hisamuddin Dr Sarah
Turkey	Dr Ridvan Atilla Dr Cem Oktay
Australia	Dr Paul Middleton Dr Ian Jacobs
Singapore	Dr Benjamin Leong Dr Tham Lai Peng
SCRI	Dr Sam Lim Dr Muhammad Naeem Khan



ASIAN EMS
Asian EMS Council

PAROS EXCO MEETING

Apr 14th ~ Apr 15th, Songsil Hall



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	



**[Study Proposal 1]-
Preliminary result**

**Comparison of Emergency Medical
Service Systems of
Pan-Asian Countries**

Sang Do Shin

Department of Emergency Medicine, Seoul National
University College of Medicine, Korea

Marcus Ong

Department of Emergency Medicine, Singapore
General Hospital, Singapore

David C. Cone

Department of Emergency Medicine, Yale University
School of Medicine, CT, USA



THANK YOU