

Introduction To PAROS & Updates

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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

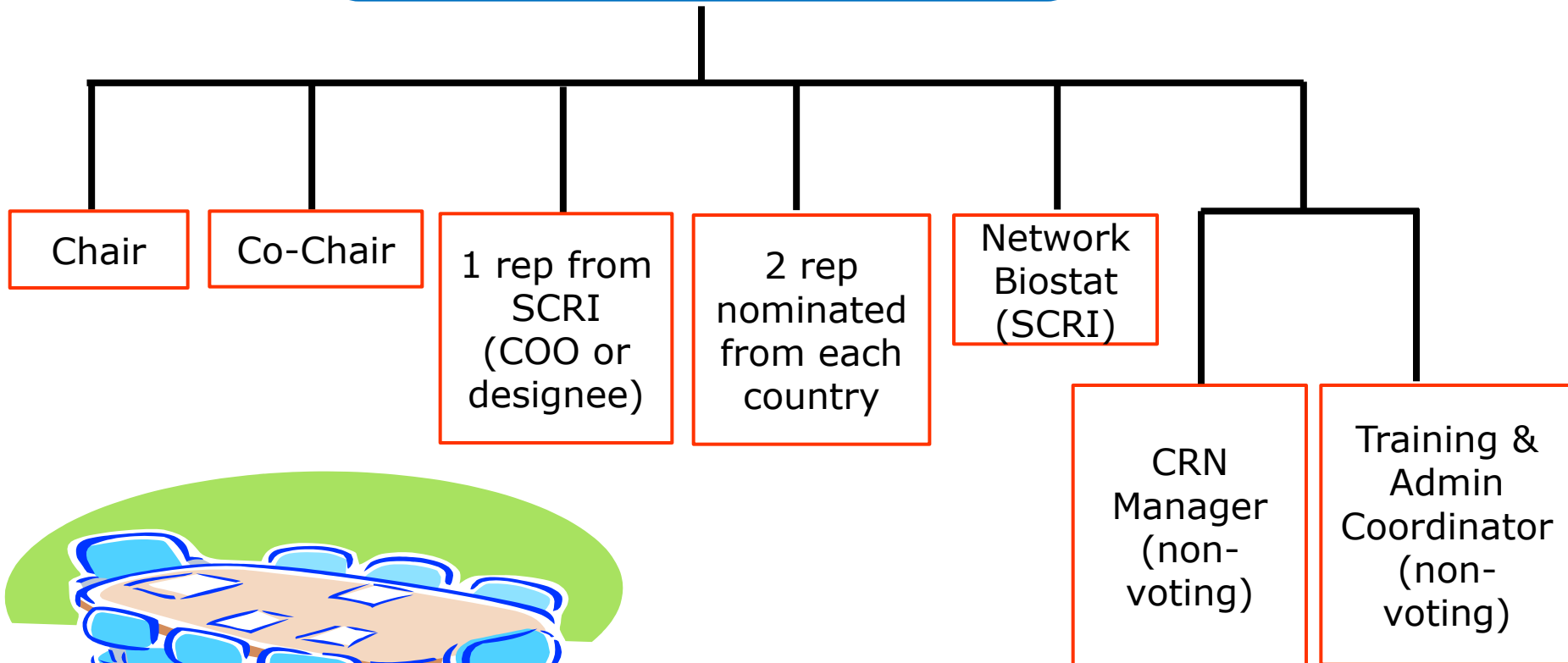


- ❖ Understand OHCA as a disease in Asia
- ❖ Describe current pre-hospital systems in the Asia-Pacific
- ❖ Provide international benchmarking and study of best practices
- ❖ Impact community awareness and change attitudes towards OHCA
- ❖ Improve OHCA survival by system/ community level interventions

Constitution Of PAROS



Executive Committee (EXCO)



PAROS EXCO 2010

Chair

Dr Marcus Ong - Singapore

Co-Chairs

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



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 Nik AB Rahman Dr Sarah Bte Shaik Abdul Karim
Turkey	Dr Ridvan Atilla Dr Cem Oktay
Australia	Dr Paul Middleton
Singapore	Dr Benjamin Leong Dr Tham Lai Peng
SCRI	Dr Sam Lim Dr Muhammad Naeem Khan

EXCO Members



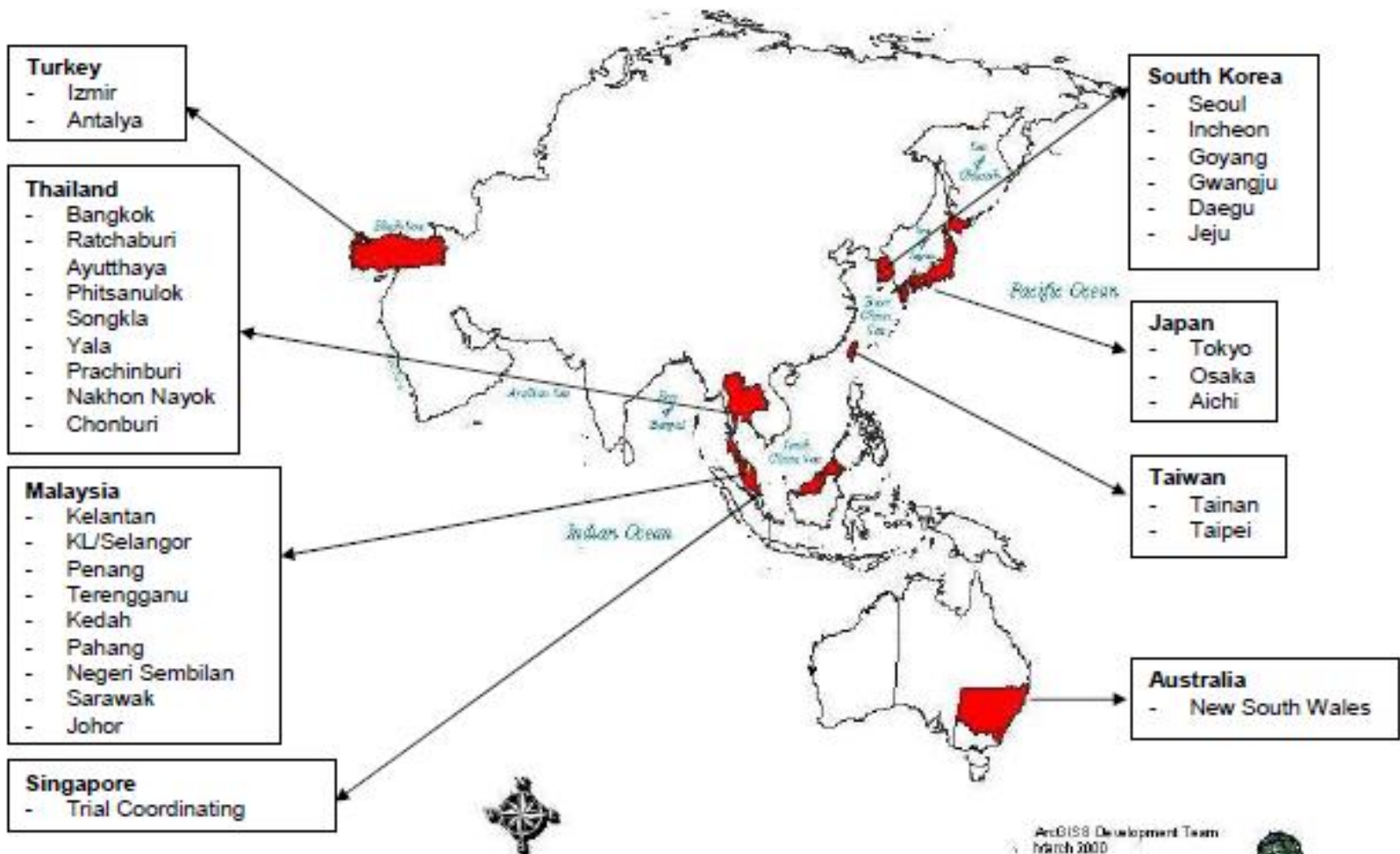
ASIAN EMS
Asian EMS Council

PAROS EXCO MEETING

Apr 14th ~ Apr 15th, Songsil Hall



Participating Countries



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 with internet connection by the PAROS EMS/hospital contact.
- Via export method – data will be exported and auto-populate into ePAROS registry.

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 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.

Methods



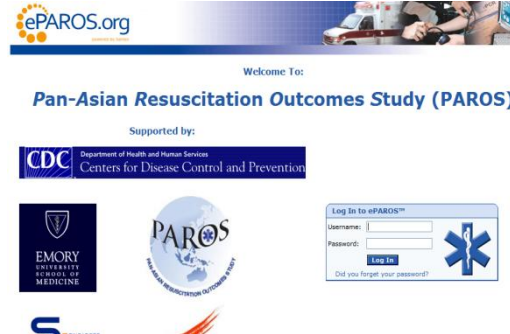
- ❖ To establish a Pan Asian network of EMS physicians that will collect and link data and outcomes from OHCA and other pre-hospital emergencies in their respective cities and countries
- ❖ To include EMS data from dispatch services, ambulance records and service providers.
- ❖ Data regarding cardiac arrest outcomes and other conditions will be collected from all major hospitals.
- ❖ Information about PAROS and its relevant documents can be found in the link below.
- ❖ Contents in the website will be updated periodically.

http://www.scri.edu.sg/index.php?option=com_content&view=article&id=54&Itemid=108

Electronic Data Capture (EDC)



- ❖ Web based data collection software for multi-site clinical trials (ePAROS)
- ❖ Server installed and 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.



Data Dictionary

Sample of condensed taxonomy

The complete PAROS Taxonomy is available at the following website:

[PAROS Data Taxonomy](#)

EMS and Hospital Data	
<i>(*The preferred source of data is the EMS patient case record and ED and/or hospital patient case record.)</i>	
Mode of Transportation:	
<i>Patient brought in by</i>	<p>Indicate "EMS" or "Non-EMS"</p> <p>Brought in by 'EMS' refers to case that was conveyed by ambulance which was dispatched via EMS dispatch center.</p> <p>Brought in by 'non-EMS' refers to case that was conveyed by private ambulance which was <u>NOT</u> dispatched via EMS dispatch center, own transport or public transport.</p> <p>If patient was brought in by 'non-EMS', indicate the mode of transportation: private ambulance, own transport or public transport.</p>
Incident Information:	
<i>Date of Incident</i>	Provide the date when the cardiac arrest occurred. Enter date as dd/mm/yyyy.
<i>Location of incident</i>	Record the address or location of incident where the patient was found, including the postal/zip code.
<i>Location type</i>	<p>Indicate type of location where the patient was found.</p> <p>Check only <u>ONE</u> that applies from the list provided.</p>
Patient Information:	
<i>Date of birth</i>	<p>Provide patient's date of birth and enter date as dd/mm/yyyy.</p> <p>Select the "Unknown DOB" box if the date of birth is unknown.</p>
<i>Age</i>	<p>This component will be auto-generated if the 'Date of birth' has been entered.</p> <p>If "Unknown DOB" was selected, provide patient's <u>estimated</u> age and select the appropriate units for the recorded age in the field.</p>
<i>Gender</i>	Indicate "male" or "female".
<i>Race</i> <i>(Singapore site only)</i>	<p>Indicate the race of the patient.</p> <p>Check only <u>ONE</u> that applies from the list provided.</p>
<i>Medical history</i>	<p>Check all that applies from the list of medical histories provided.</p> <p>Indicate "Unknown" if unable to obtain any medical history from bystander.</p>

EDC System - Updates



- Completed testing of system for bugs and logic errors.
- EDC for OHCA was officially launched locally in August 2010.
- EDC system was launched in Malaysia October 2010 and online training sessions have begun for participating sites.



Training for EDC System

- Training of EDC system was done in June 2010, alongside ICEM 2010 for all participating countries.
- Additional training will be done when there are new sites or coordinators participating in the study.
- A web conferencing software, GoToMeeting will be used to hold training sessions with other countries.

Accomplishments so far



- ❖ PAROS Constitution was formally accepted and adopted
- ❖ MOU between SCRI and PAROS has been signed
- ❖ MOU between SCRI and SANSIO has been drafted
- ❖ Framework adopted for Publication and Operation Committees
- ❖ Letter of Intent from CARES-CDC
- ❖ 2 meetings have been held so far in Daegu, Korea (April 2010) and Singapore (June 2010).
- ❖ Completed testing of EDC system using pilot data from Singapore.
- ❖ Showcased EDC system to all participating countries during ICEM 2010
- ❖ Officially launched EDC in Singapore in August 2010
- ❖ Started online training for Malaysian sites
- ❖ Drafted PAROS methodology manuscript. Submitted for publication

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	Completed
5	- Create questionnaire - Survey of members	Mid Mar 2010	In progress
6	EDC training for member countries	Mid June 10	Completed
7	Launch EDC for OHCA study	June 2010 (ICEM 2010)	Completed
8	Manuscript completed for PAROS survey and submitted for publication	End 2010	
9	Data collection completed for PAROS OHCA study and preparation for publication	Dec 2012	

Future Plans



Upcoming Research Studies

New Approved Studies:

1. Overcrowding of Emergency Department (ED) in Asia (Won Chul Cha, Korea)
2. Emergency Medical Services (EMS) Systems – “End-of-Life” Issues (Chih-Hao Lin, Taiwan)
3. EMS Education and Training (Hideharu Tanaka, Japan)
4. Survey on the EMS System Performance Index (Nik Hisamuddin, Malaysia)
5. Adherence of Therapeutic Hypothermia / Early Goal-Directed Therapy (EGDT) (Patrick Chow-In Ko, Taiwan)

Approved Sub Analysis Studies:

1. Incidence of Ventricular Fibrillation (VF) in Asian OHCA (Benjamin Leong, Singapore)
2. Paediatric OHCA Study (Tham Lai Peng, Singapore)
3. Regional Variation in Outcomes of Witnessed VF in Asia (Tatsuya Nishiuchi, Japan)
4. Impact of Supraglottic Airways and Endotracheal Intubation on Outcomes Following OHCA (Kentaro Kajino, Japan)

THANK YOU