



Improving Outcomes from Pre-hospital and Emergency Care across the Asia-Pacific

STUDY PROPOSAL REQUEST FORM

Please complete the form and email to PAROS secretariat at paros.secretariat@yahoo.com by the stipulated date. You will be notified in due time on whether your study has been accepted for presentation.

1. BASIC INFORMATION		
Name: Yu Jin Lee		Designation: National Medical Center
Email: eyebblack99@gmail.com		Country: Republic of Korea
2. TYPE OF REQUEST (Please select one)		
<input type="checkbox"/> New Study Proposal (initial)	<input checked="" type="checkbox"/> Secondary Analyses	<input type="checkbox"/> Explanatory Analyses
3. STUDY TITLE		
Arrest to first compression time and survival outcome in witness OHCA.		
4. ABSTRACT OF STUDY PROPOSAL		
In no more than 350 words , describe the study under the given headings below.		
Objectives/Hypotheses <ul style="list-style-type: none"> - Out of hospital cardiac arrest is a serious health condition that can lead to detrimental outcomes and requires immediate treatment including early chest compression and defibrillation. - The effect of EMS response time on patient survival has been evaluated in many studies; however, not much is known about the impact of bystander CPR on critical time intervals for patient outcomes (1-3). - This study aims to investigate whether bystander CPR influences the time from arrest to first chest compression. 		
Methodology (To include sample size, settings, inclusion & exclusion criteria, etc. For secondary & explanatory analyses: include statistical plan, type of analyses, measurement, etc.) <ul style="list-style-type: none"> - This is a prospective, international, multi-center cohort study across the Asia-Pacific on out-of-hospital cardiac arrest. Each participating country provided between 1.5 and 2.5 years of data from January 2009 to December 2012. Patients with EMS-treated witnessed OHCA of presumed cardiac origin were analyzed, excluding those who had no information of CPR started time or OHCA outcomes, as well as those whose arrest occurred in ambulance. - Main exposure variable was arrest to CPR start and bystander CPR. Primary endpoint was survival to discharge. Secondary endpoint was neurologic recovery at discharge. - We performed multilevel logistic regression analysis adjusting for patient's demographics and place of arrest. - Statistical analysis: We tested statistical significance for whether there was interaction between receiving bystander CPR and the effect of time to first compression on patient survival. 		
Significance of the study (e.g. provide brief description on how the study can improve current systems, its benefit to patients and how it can be implemented) <ul style="list-style-type: none"> - We hypothesize that receiving bystander CPR will be less affected by the amount of time until first 		

Secretariat

Singapore General Hospital

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Website: <http://www.scri.edu.sg/index.php/paros-clinical-research-network>



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GUIDELINES FOR PREPARING NEW PROPOSAL PRESENTATION

If your study proposal has been accepted for presentation, you will be notified by the Secretariat. Please prepare your presentation slides in accordance to the following instructions. Each presenter is given 10 minutes to present (8min presentation + 2min Q&A).

General Instructions

1. Presentation must include the following sections:
 - a. Introduction
 - b. Objectives/Hypotheses
 - c. Methodology
 - d. Significance

2. Limit total number of slides to not more than 12. The following are the recommended number of slides for each section.
 - a. Introduction – maximum of 2 slides
 - b. Objectives/Hypotheses – maximum of 2 slides
 - c. Methodology – maximum of 6 slides
 - d. Significance – maximum of 2 slides

3. Try to use big fonts and contrasting colours to increase readability e.g.
 - a. Black/dark blue font against white background
 - b. White/yellow font against black background
 - c. Black font against blue background

For any enquiries, please contact PAROS secretariat at paros.secretariat@yahoo.com.

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