



## Instructions for Site Leads

Thank you for contributing to NEAT-ECHO. As a national trainee-led study, we rely on members of the TRIC network to co-ordinate local data collection.

All study contributors will be recognised as study collaborators in publications related to NEAT-ECHO (providing Site Leads provide the full name and email address of each contributor to the study before the end of the data collection period).

Please find below a step-by-step process for coordinating your local site.

### 1. Review the protocol

Please read the study protocol. This document contains important details about the project.

If you have any questions, please contact the study team ([neatecho@gmail.com](mailto:neatecho@gmail.com)).

### 2. Register the project at your site

This project is a service evaluation. **You must register this service evaluation**, following your local site's clinical governance processes.

Your local audit team/clinical governance team will provide you with a registration form to be completed as per local policy. An exemplar template is provided at the end of this document.

**Once the study is registered and you have received confirmation from the relevant clinical governance team, please email the NEAT-ECHO study team ([neatecho@gmail.com](mailto:neatecho@gmail.com)) with a copy of the completed registration form.**



## 3. Establish a team at your site

The data will be collected within a **10-day window**.

Patient-related data collection involves reviewing the clinical notes of the patient, observing of the bedspace/clinical area they are in, and, in a sub-group of patients, will require a short, non-invasive clinical examination.

There is also a survey of the equipment available at your site regarding the provision of echocardiography training, accredited scanners, and governance structures.

Please remember to provide the full names and email addresses of any data collectors (with their consent) so their contribution can be acknowledged on future publications of NEAT-ECHO.

## 4. Email the NEAT-ECHO team

You will need to:

- a) **Email the NEAT-ECHO central study team ([neatecho@gmail.com](mailto:neatecho@gmail.com)) a copy of the approved service evaluation registration from your local site with the subject "Registration forms".**

This is a pre-requisite for access to the data collection platform.

- b) **Provide the full names and email addresses of every person in your local study team.** Please email [neatecho@gmail.com](mailto:neatecho@gmail.com) with the subject "REDCap access request" by **26<sup>th</sup> February 2024**.

This is so that their contribution can be acknowledged in future publications related to NEAT-ECHO and so that we can provide you all with access to the NEAT-ECHO database held on REDCap, which is a secure web application.



## 5. Select a 10-day data collection window

The national data collection window will be from Monday 4<sup>th</sup> March 2024 until Wednesday 3<sup>rd</sup> April 2024.

Please identify one continuous 10-day window within these dates during which your team will collect data.

## 6. Collect data

During the 10-day collection window you will be collecting data for each new patient admitted within the first 7 days of that time period, as long as they meet the inclusion criteria (outlined below).

**a) \*\*Make sure you keep track of patients you have entered into the database.\*\***

NEAT-ECHO will not collect any patient identifiable information. Therefore, it is vital you keep track of each patient entered to avoid including the same patient more than once.

We advise making a list of any new admissions to your critical care unit during the 7-day window. We have provided a screening log for you to use at the end of this document. Use this to ensure all patients in your unit have been reviewed for inclusion to the study.

Do not share this list in any format with the NEAT-ECHO team.

**b) Screen each patient using the study inclusion/exclusion criteria.**

Inclusion Criteria

- Adult (>18 years of age)
- Patient admitted with a diagnosis of shock (of any aetiology). The diagnosis of shock may be determined clinically but we have included an example definition here:
  - A systolic blood pressure <90 mm Hg for ≥30 min (or the need for vasopressors, inotropes or mechanical circulatory support to maintain systolic blood pressure ≥90 mm Hg) with evidence of hypoperfusion.

**c) Enter data into the NEAT-ECHO REDCap software.**

**d) Answer the survey for your unit about echocardiography provision.**

