



# NEWSLETTER

[www.dutystudy.org.uk](http://www.dutystudy.org.uk)

Issue 3

September 2010

## Welcome to new recruiters!

- Beth Evans, Mendip Country Practice
- Dr Krasucki and the Crown Medical Centre team
- Pembroke Road Surgery, Bristol
- Hillview Family Practice, Bristol

## Study training day

If you or a colleague would like to attend the DUTY training day in Bristol on the 21st September, please e-mail Catherine (address overleaf) asap - there are only a few places left!

## How are we doing?

At the end of August, **177** patients had been recruited in our centre by the end of August, smashing our ambitious funder target by a whopping **77%**. With **166** urines, we're achieving a **94%** successful sample return rate!

All thanks to you!



## Welcome to the third edition of the DUTY Study Newsletter!

In this monthly newsletter we update you on developments with the study and share information about the wider study team. We hope you have all had wonderful summer holidays and are ready to face that back-to-work feeling with vigour and enthusiasm! To get you in the mood, why not try our topical crossword in your coffee break? The study team have been busy throughout August and we are thrilled to announce that **the database is almost there** and we will be contacting you individually with a username, password and instructions when we are ready to go on-line.

## Introducing Judith Edwards, Research Physio, Bristol A&E

Members of the wider study team tell us about their experience of DUTY - and other things!



### Q. What role do you play in the study?

I recruit for DUTY in the Bristol Children's Hospital Emergency Department (ED) for about 18 hours a week. I'm flexible to try and cover the best recruitment periods, usually the evenings after school and before bedtime!

### Q. How will the DUTY study help you in the future?

I hope soon to start a PhD, set in critical care. DUTY will give me practical experience of recruitment and consenting, study promotion, data collection and site file management.

### Q. What do you think are the main challenges for this study?

Keeping an eye on where my children are in the ED and chasing

the doctors for their filled in Case Report Forms! The ED can get a bit hectic, and although there is time as parents usually have to wait around, I must make sure DUTY does not interfere with triage and consultation. I am learning not to start too many at once.

### Q. What is your top tip for successful recruitment?

A clear explanation to parents, and use of the story book with toddlers.

### Q. What is the most exciting place you've ever been to?

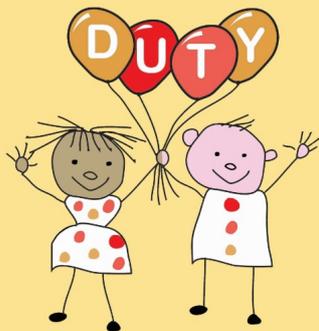
Udaipur in Rajasthan. Colour, activity, lovely people, amazing food and you can visit the summer palace on top of a huge steep hill on bicycles, if you're fit enough.

## Recruiting sites update

DUTY is now recruiting in 4 Option 1 practices, 10 Option 2 sites and at the South Bristol Walk in Centre and the Children's Emergency Department at the BRI. The two full-time Research Nurses, Lisa Calver and Liz Thomas, are able to support 4 Option 1 practices (in Bristol) at any one time, and we are rolling this out on a two-monthly cycle. Option 2 recruitment has no time constraints other than normal site operations. **Option 2 recruitment is reimbursed at £100 per patient, and with the support of a DUTY Nurse (Option 1) at £60 per patient.**



Nothing makes us happy like a completed CRF! Ticking all of the boxes and filling in all of the fields gives us a complete dataset of the highest value, so please fill in all of those gaps...



Every cloud has a silver lining... But we don't want silver linings in the Royal Mail SafeBoxes, so if you find one... **CHUCK IT AWAY!**



### Where's the lolly?



We will contact Practice Managers during September and October as we draw up invoices to reimburse you for recruitment to date. We will need your practice bank details and to cross-check the number of patients you have recruited so far.



## WHY SCREEN?

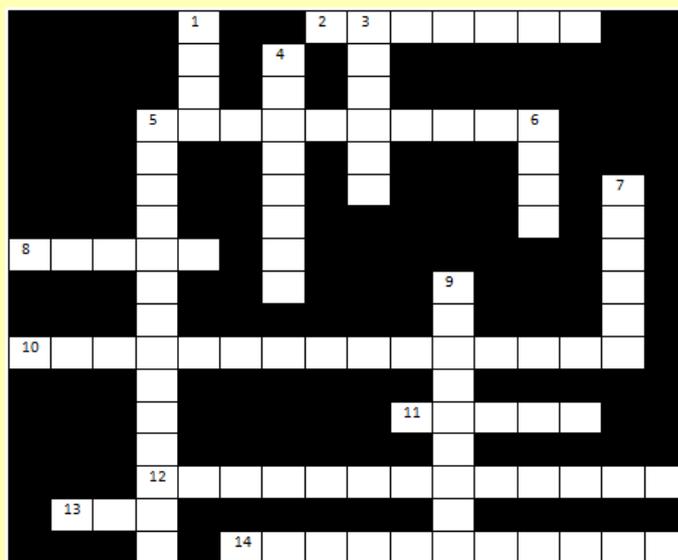
The DUTY Screening Log is simply that, a log of all those patients that you have screened during your quest for eligible children for DUTY! It asks you to record simple information like DOB, Gender, whether the patient was recruited and if not, why? This data allows us to build a picture of children being approached by the study and **most importantly** reasons why they aren't being recruited. These logs are analysed by the team and can help to tell us whether we need to change our study processes to enhance recruitment. The data also allows us to more accurately project levels of recruitment in coming months and focus our support on those areas that we anticipate will need it most. So...if you could complete this log as you go we would really appreciate it. You'll find a blank form in your manual or on the website. Simply complete it as you go and fax it to us on 0117 331 3838. And to those of you who have already been sending us your completed Screening Logs – **Thank You!**

## QUICK QUIZ AND COFFEE-TIME CROSSWORD

The winner of August's quiz was Judith Edwards, who wins a DUTY mug. Beth Evans and Joanne Simon came close second, and they also get a DUTY mug for effort.

*The answer was B) Number of bacteria on the human body. There are 90 trillion bacteria on the body, which is made up of 10 trillion cells, and only 100-400 billion stars in the milky way galaxy!*

This month, test your knowledge of infectious diseases and other medical matters with our crossword. Send us your answer with your next completed consent form, and you could win a prize.



### DOWN

1. Eruption of the skin (4)
3. Atopic dermatitis (5)
4. Nasty little arthropod is into you (4,4)
5. Can be caused by an eye-watering number of agents (14)
6. High-energy radiation with wavelength shorter than visible light (1-3)
7. Hydrophobia, aerophobia, convulsions and paralysis? Blame the dog! (6)
9. Violent cough caused by Bordetella bacteria (9)

### ACROSS

2. Of or relating to or characterized by fever (7)
5. What happens after Varicella Zoster virus enters upper respiratory tract (10)
8. Infection of the larynx resulting in harsh coughing (5)
10. Infection or irritation of the digestive tract (15)
11. An acute, inflammatory, contagious disease caused by a paramyxovirus (5)
12. Generalized lymphadenopathy? Blame the cat! (13)
13. Pyelonephritis, cystitis or asymptomatic bacteriuria (1,1,1)
14. Inflammation of the middle ear (6,5)

## Steve Beech, new DUTY Research Project Assistant

Nottinghamshire-born Steve joined the DUTY team as Research Project Assistant in August. He has a background in journalism and public relations, and is particularly interested in music and sport.

### Contact us:

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