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INTRODUCTION The Center for Human Phenomic Science (CHPS) nurses provide research services for inpatients who are undergoing clinical trials in conjunction with standard inpatient nursing care. These research subjects, admitted for investigational treatments, are referred to as scattersite patients. The CHPS team manages the research needs and the clinical team manages all of the medical care. The CHPS nurses are deployed to a non- research unit to administer the study-specific investigational medication and obtain study-specific pre-and post- testing and monitoring. The CHPS and non- CHPS clinical nursing staff work together to care for their shared patients.

PURPOSE: To provide guidelines for safe, effective, and competent care of scattersite patients admitted to HUP promoting teamwork and collaboration amongst non-CHPS clinical nurses.

SCOPE: CHPS and HUP clinical staff, Principal Investigators (PI) and Clinical Study Teams (CST).

RESOURCE: <u>Inpatient and Outpatient Hospital Admissions and Transfers to HUP</u> HUP & CPUP Policy 1-06-01

PROCEDURE:

Delineation of Responsibilities

- 1. Non- CHPS clinical nurses and medical staff are responsible for the admitting and discharging procedures for scattersite patients and providing Standard of Care treatment as per inpatient orders during the admission.
- 2. Standard of Care blood draws example, "am/ morning labs" will be drawn by the clinical team. If central line the non-CHPS unit RN will complete if certified to do so, if peripheral this can be done by the phlebotomy team.
- 3. The non-CHPS clinical nurse maintains care of the patient as they are assigned, and the Epic orders for standard of care medications, vital signs, other non-research related assessments, meals, ADLs, etc. Are the responsibility the non-CHPS clinical nurse/ staff.

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4. The CHPS nurse is responsible for the research related tasks included on the CHPS Nursing worksheet and at the direction of the study team. This may include drug administration, blood draws, electrocardiograms, vital signs and/or any other protocol-specific activity.

Communication

- 5. Upon the CHPS nurse's notification of the scattersite patient assignment on the inpatient unit, she/he will communicate with the non-CHPS clinical nurse giving report of the planned research activity for the shift.
- 6. The CHPS nurse will maintain communication with the non- CHPS clinical nurse throughout the shift about the research activity as needed including the end of research care for the shift so that the clinical nurse is aware that the CHPS nurse no longer needs to be in the patient room.
- 7. Communication regarding specific timing of vital signs, EKGs, and blood draws related to the research protocol should be conducted between the non-CHPS RN and the CHPS RN.
- 8. The CHPS staff will communicate with the Clinical Study Team and Principal Investigator as needed about research concerns. The non-CHPS clinical staff in conjunction with the CHPS staff will use Cureatr is an effective tool for pertinent clinical patient communication with the physicians and Advanced Practice Providers.

Documentation

- 9. Investigational Products should be released into the inpatient chart; this is done by changing the log in context to that of the department the patient is admitted to.
- 10. The CHPS staff will document in EPIC in the inpatient chart under the department where the patient is admitted. Instead of a progress note as is used in the outpatient encounter, a nursing note should be entered using the CHPS smartphrase so that the inpatient team can view this.
- 11. For CHPS billing purposes, these are Scattersite visits- please notify the CHPS front desk to update the sign in sheet with accurate in and out times for the visit.

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