Introduction

- Worked with the Public Engagement Core (PEC) of a post traumatic epilepsy research group
- Aimed at reducing barriers to clinical trial participation and improving study design from a community centered approach

Objective of Internship

I aimed to increase my understanding of and capacity to address disparities in healthcare and research access within my own community.

Work profile

- Core ideas of PEC are expanding access and ensuring inclusivity
- Designed a systematic review on remote consent methods in the ICU (i.e. telephone or video)
- Implications for addressing existing research barriers and continuing clinical research during the pandemic

Reflection

- Lay the foundation for the continuation of systematic review
- Defined inclusion, exclusion, and search criteria
- Employed PubMed, Embase, and Web of Science online search databases

<table>
<thead>
<tr>
<th>Title</th>
<th>Author, Year</th>
<th>Target Medical Condition</th>
<th>Remote Recruitment Rate</th>
<th>Remote Consent Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telemedicine-guided remote enrollment of patients into an acute stroke trial</td>
<td>Wu, 2015</td>
<td>stroke</td>
<td>66.67% (6/9)</td>
<td>66.67% (6/9)</td>
</tr>
<tr>
<td>The Deferred Consent Model in a Prospective Observational Study Evaluating Neuronal Injury in the Intensive Care Unit</td>
<td>Semenov, 2018</td>
<td>mental</td>
<td>92.9% (37/40)</td>
<td>92.9% (37/40)</td>
</tr>
<tr>
<td>Physician-Investigator Name Collection of Consent in the Fast A Rapid Method of Obtaining Explicit Informed Consent for Peaceful Violence Research (FAST-MAX)</td>
<td>Sauer, 2005</td>
<td>stroke</td>
<td>100% (20/20)</td>
<td>100% (20/20)</td>
</tr>
<tr>
<td>Simultaneous real-time internet patient system enables rapid Physician activation of explicit informed consent in prehospital stroke treatment trials (RAPT-MAX)</td>
<td>Sessens, 2005</td>
<td>stroke</td>
<td>34.8% (19/55)</td>
<td>34.8% (19/55)</td>
</tr>
<tr>
<td>A Telemedicine Network Enhances Recruitment into Acute Stroke Clinical Trials</td>
<td>Swisser, 2010</td>
<td>stroke</td>
<td>100% (10/10)</td>
<td>10.1% (2/19)</td>
</tr>
</tbody>
</table>

- Performed sample analysis on several particularly valuable studies
- Indicates key considerations for future largescale analyses
- Demonstrates disparities in protocols that may present confounding variables

Objective of Internship

I aimed to increase my understanding of and capacity to address disparities in healthcare and research access within my own community.

Looking ahead

I hope to integrate these novel understandings and experiences into my personal and professional development, enabling me to continue this advocacy within my community.

Questions

How can we continue to enable researchers and clinicians to adjust clinical trial methods to fit the needs of potential participants and their families?

Conclusion

To ensure clinical research is accessible to all populations, it is necessary to screen for and develop interventions to reduce barriers preventing inclusivity.

Acknowledgements

I would like to thank Drs. Moshé and Correa, the many research collaborators I worked with, the PICS staff, and CHW for all their support and guidance during this experience.