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| <p><b>C</b>enter for <b>H</b>uman<br/><b>P</b>henomic <b>S</b>cience</p> | <p>University of Pennsylvania<br/>Health System</p> | <p><b>CHPS</b><br/><b>SOP 03</b></p> |
| <p><b>Standard</b><br/><b>Operating</b><br/><b>Procedure</b></p>         | <p><b>In-services</b></p>                           | <p>Page 1 of 1</p>                   |

**INTRODUCTION:** Clinical study teams conduct in-services for the CHPS staff, prior to CHPS study start, by presenting information about the study’s purpose, study medication(s) and the nursing responsibilities needed during the CHPS visit. The study’s nursing worksheets are distributed and used as a reference during the in-service.

**PURPOSE:** To educate CHPS staff about a new study and to inform them of exactly what is clinically needed, and when, during a specific research visit.

**SCOPE:** Principal Investigators and Clinical Study Teams.

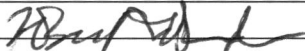
**PROCEDURE:**

1. After the study’s nursing worksheet has been reviewed and approved by CHPS staff, the in-service needs to be scheduled by contacting CHPS nurse practitioner (NP) (kathlj@pennterapeutics.upenn.edu). In-services are ideally scheduled within 1-2 weeks of the study’s first CHPS visit.
2. The CHPS NP confirms with Research Facilitator prior to study start that all administrative paperwork is in place for the study.
3. In-services are given at 2pm on PCAM 4S. Inpatient studies may also require a 7:15am in-service for the night shift nurse, depending on the complexity of the study.
4. When arriving to CHPS on PCAM 4 for the in-service, clinical study teams ask the CHPS Administrative Coordinator or Patient Service Coordinator for the Charge Nurse, if Kathryn is not available. The Charge Nurse will assist in getting in-service started.
5. Clinical Trial Study Teams brings approximately 6 copies of their nursing worksheet to the in-service.
6. CHPS staff present at the in-service signs Penn Medicine’s Educational Program Record (EPR).
7. After the in-service is given, the CHPS NP informs the Administrative and Patient Service Coordinators so that this specific study’s appointment requests may be approved.

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8. If the study is complicated, we ask that study teams return to in-service staff members that were not present on the day of the in-service. This requires flexibility on everyone's part. The nurses who missed the in-service and the clinical study team will get an email stating that they need to communicate with each other in order to be in-serviced. A copy of the EPR will be attached to the email. Nurses need to give a copy of the signed EPR the CHPS nurse practitioner.
9. Depending on the complexity of the study, if the first subject does not present to CHPS within two months of the in-service, the CHPS staff may need to be re-in-serviced.
10. If a study is uncomplicated and straightforward (simple blood work, EKG, minimal CHPS nursing services, drug administration with non-intensive monitoring), an in-service is not necessary. In this case, the nursing worksheet and a CHPS Training Document will need to be completed and sent to Kathlyn Schumacher @ kathlj@penn.medicine.upenn.edu. After review and approval, she will distribute the nursing worksheet and training document to CHPS staff, cc'ing the Clinical Study Team coordinator. CHPS staff can contact study team with any questions. In this way, the CHPS staff is educated about the new study, with clear and few instructions, in a convenient and less time consuming manner for both the Clinical Study Team and CHPS staff.
11. The study's nursing worksheet and training document are uploaded onto SharePoint.

Supersedes: In-Services, 03/2018

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