Award Number: MIPR 5EDAMM5050

TITLE: Telemedicine-Based Burn Research Initiative Longitudinal Outcomes of Patients – Phase II

PRINCIPAL INVESTIGATOR: Beatrice T. Stephens

CONTRACTING ORGANIZATION: Brooke Army Medical Center
Fort Sam Houston, TX 78234-6200

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PREPARED FOR: U.S. Army Medical Research and Materiel Command
Fort Detrick, Maryland 21702-5012

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7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES)
Brooke Army Medical Center
Fort Sam Houston, TX 78234-6200

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FY05 Mid-Term Report

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MIPR No.: 5EDAMM5050
TITLE: Telemedicine-Based Burn Research Initiative:
Longitudinal Outcomes of Patients-Phase II

ACCOMPLISHMENTS
(30,000 Character Limit)

No accomplishments to date because we do not have our funds in place to begin this project.

PI Evaluation: We have encountered multiple problems with getting our funding to the correct destination.

PROBLEMS/ISSUES
(30,000 Character Limit)

The research team was notified in May that our project had been funded with a reduced budget, which we had agreed upon with our TATC Project Manager. We then notified Jeff Quillin in the Brooke Army Medical Center Department of Clinical Investigations because he is the person responsible for dealing with grants and CRADAs. The money for the Phase I portion of this research study was in place with the Geneva Foundation in Tacoma, WA. We desired the Phase II funds to be located there as well for proper distribution of the funds and payment of our project director for this project. Until July 2005, we had been told on regular basis by Mr. Quillin that the statement of work, sole source justification, and the CRADA were in process. The research team contacted him at least once every week to ask about the status of this project. At the end of July 2005 we were informed that there was a problem with the MIPR and that the money had to be sent back to USAMRAA. Dr. Yoder (COL, USA, Ret.), the associate investigator for this study, and the PI were then told that contracting at USAMRAA had to complete the paperwork so the money for this project could be directly sent by a transfer of funds to the Geneva Foundation. I informed Mr. John Winston, the Project Coordinator for this project at TATRC, of our problems and concerns and he stated that he would assist the research team by contacting Ms. Hull at USAMRAA. Dr. Yoder subsequently contacted Ms. Hull when she did not hear back from anyone. Ms. Hull advised Dr. Yoder that the paperwork was with Ms. Rebecca Tamra. Ms. Tamra was contacted and she stated that a statement of work (SOW) was needed from TATRC and that Ms. Belcher was working on that issue. Dr. Yoder
contacted Ms. Belcher and she told Dr. Yoder that TATRC does not create the SOW. Dr. Yoder told Ms. Belcher that she knew a SOW existed for this project because she and the PI had approved a SOW that Mr. Quillin had forwarded in Spring 2005. At the present time, Dr. Yoder is working with Ms. Belcher and the Geneva Foundation to revise the SOW as required by Ms. Belcher and the contracting process in order to attempt to get the funding into place. Ms. Belcher also is assisting with the sole source justification. Because the Phase I funds for this project were managed by the Geneva Foundation, it would be best serve the project if the research team could continue that relationship because the Project Director for the Phase I study and the expenses were administered in that manner. In summary, Dr. Yoder has taken the equivalent of 3 days off from her job, without pay, to try and sort through all the issues related to getting the funding to the Geneva Foundation so the Project Director could be hired and the study can continue.

PI's Evaluation: The process of getting the funds from TATRC to the organization housing the money should not be this difficult. Even when people have tried to assist Dr. Yoder, she was given incorrect information and at the present time she continue to take time away from her job to try and keep this project alive because of the patients already enrolled in this study under the Phase I initiative that was funded by TATRC.

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**Second Half Project LifeCycle**

(30,000 Character Limit)

The associate investigator, Dr. Linda Yoder has been working with the Geneva Foundation, Teresa Belcher at TATRC and Rebecca Tamara to get the funding in place for this project. Once the funding is in place, the project director will be hired and the ongoing data collection from the burn patients enrolled in the Phase I portion of this project will continue. After patients complete their 18 month interviews, the data will be entered and analyzed and a final report will be created. The timeline for the second half of this project is in flux because of the issues related to the funding placement issues previously discussed in this report.

PI's Evaluation: If we do not get our funding in place by the end of September 2005, we will lose this project. The project director we have interviewed and have had on standby to hire has agreed to accept another position if our project is not viable by the end of September 2005. We are fearful of losing our money with the end-of year budget cycle.
Deliverable Update
(30,000 Character Limit)

None

PI's Evaluation: None

Expenditures
(Please fill in table below)

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Financial Narrative
(30,000 Character Limit)

PI's Evaluation: Same as above

*** END OF REPORT ***