



The Stroke I.M.P.A.C.T. Study

NEWSLETTER

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What Does it All Mean ?

Have you ever wondered what all the particulars (forms, red tape, criteria, initials, etc.) of The Stroke I.M.P.A.C.T. Study are all about? It might seem that the paperwork, rules, regulations and scheduling are so cumbersome that it's almost impossible to get through. Sometimes it is difficult even for those of us running the show. So we thought we'd explain a few things.

As a research study, I.M.P.A.C.T. came to be when **Principal Investigator (PI)** Dr. Kathye Light and Co-Principal Investigators Dr. Stacy Fritz and Dr. Matthew Malcolm wrote and submitted to **N.I.H.** (National Institutes of Health) a proposal for a research project. This process is lengthy, ultra-specific, highly technical and exceedingly competitive. The **PI's** (Principal Investigator's) submission was successful and a **grant** (money) was awarded to fund the research. Having this money allows us to provide this very time intensive and expensive treatment at no charge.

Each university has their own **IRB** (Institutional Review Board) that serves as a policing agent insuring adherence to regulations of both the institution and the funding agent. The **IRB** is concerned with, among other things: the **informed consent** (the paperwork that each subject reviews and signs at the beginning of their study involvement), conformity with **HIPAA** (Health Insur-

ance Portability and Accountability Act) regulations and the protection of subject's privacy. Any subject enrolled in the study has satisfied the **inclusion/exclusion criteria** (as outlined in the grant paperwork). These are the general rules for who is eligible for participation based on a number of characteristics such as: length of time since the stroke, ability to move the fingers and hand to certain degrees, overall health, medications, and agreement to follow the rules, to name a few.

Once enrolled, subjects wear a **C.I.M.T.** (Constraint Induced Movement Therapy) mitt with a **compliance device**. This device measures the amount of time the mitt is worn.

We evaluate subjects immediately before training (**pre-eval**), immediately after training (**post-eval**) and 4 months after training (**follow-up eval**.)

With this glimpse into the depth, breadth and expense of our study, you can appreciate the importance of committed participants. The success of I.M.P.A.C.T. depends on the dedication of our subjects.

This is a brief overview of some of the language you are exposed to at The Stroke I.M.P.A.C.T. Study. If you have questions or inquiries about other terminology let us know and we will be happy to explain.

Turn the page to test your I.M.P.A.C.T. knowledge ©



Improving Motor Performance Applying Constraint Therapy



University of
South Carolina



University of
Florida



Colorado State
University



We are always looking for new stories for the newsletter. Please send us your suggestions about things you would like to read or stories about your experiences that could be featured in an upcoming issue of The Stroke I.M.P.A.C.T. Study newsletter.



**Test Your I.M.P.A.C.T. Knowledge ~ Circle the Correct Answers
(Attempt this with your affected hand)**

- Who pays for The Stroke I.M.P.A.C.T. Study?
A. University of Florida B. Subjects C. NIH D. US Government
- Who are the Principal Investigators?
A. Matthew Malcolm B. Stacy Fritz C. Kathy Light D. All three
- Which words are represented in CIMT?
A. Movement B. Training C. Impact D. Testing
- Every I.M.P.A.C.T. subject signs what before participating?
A. Medical Release B. Informed Consent C. Check for Services D. Home Diary
- Which University has an Institutional Review Board?
A. Colorado State B. Florida C. South Carolina D. All
- HIPPA regulations require each I.M.P.A.C.T. subject to receive a number for?
A. Accounting Purposes B. Privacy Purposes C. Easier than names D. Statistics

1 C 2 D 3 A 4 B 5 D 6 B

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