Dear Get With the Guidelines®-Stroke Hospital Leadership,

We invite you to join us and be a part of stroke care history. As an extension of your exemplary performance with the Get With the Guidelines®–Stroke program, your hospital has been selected through an elite vetting process for inclusion in an upcoming research study of interest: Mild and Rapidly Improving Stroke Study (MaRISS) a joint endeavor between the American Heart Association, American Stroke Association and the University of Miami.

Get With the Guidelines is a multi-center quality improvement registry that has helped close treatment gaps in cardiovascular disease and stroke in never before addressed ways. Your hospital’s achievement metrics have indicated you are committed to patient quality and stroke care excellence, making you a candidate to bring your data forward as a research partner. Successfully treating stroke does not end with hospital discharge; it is a continual process across the full healthcare continuum of care. The MaRISS study was designed with this spectrum in mind.

What is MaRISS?

The MaRISS study was designed to help address a critical knowledge gap: What are the long-term outcomes of patients with a diagnosis of mild stroke? What do they experience after discharge? This will be the first ever large-scale prospective study to evaluate the long-term outcomes for these patients in a standardized manner.

What Are the Benefits of Enrolling in MaRISS?

Participating centers will be compensated for participation in a number of ways.

a) **Reimbursement for Recruitment:** MaRISS participating hospitals will be reimbursed a $400.00 financial stipend for each MaRISS patient whose data is completely (including post-discharge follow up data) entered into the Get With The Guidelines–Stroke Patient Management Tool. Quality improvement resources will be provided to assist you in incorporating the primary science into your practice.

b) **Reimbursement for IRB Approval:** MaRISS hospitals will be required to submit the research protocol to your local IRB (or utilize the AHA’s commercial IRB – Chesapeake IRB) Each site will be reimbursed up from $1000.00 up to $2500.00 maximum to cover costs for obtaining IRB approval.

c) **Reimbursement for MaRISS Continuing Education Training:** Your MaRISS team will be reimbursed a total of $500.00 for continuing medical education.
education and training required for study participation. They will be provided access to a unique training portal with videos and specialized program information. Hospital staff will also be invited to frequent webinars to learn more about the study operations but also intermittent updates on study progress.

d) **Reimbursement for ISC Registration:** Additionally, each hospital will be reimbursed $500.00 to send 1 person to the International Stroke Conference for 2 years (Feb 2015 and Feb 2016).

e) **Accolades:** Finally, there will be a variety of difference recognition opportunities for your hospital’s participation including

- A Certificate of Participation
- An invitation to a MaRISS Hospitals exclusive event held during the International Stroke Conference
- Inclusion on AHA websites/marketing collateral, to name just a few.

We are inviting you to be one of only 100 targeted centers to participate in this study because we believe doing so will help elevate your already commendable standard of care, while bringing recognition to your position as a research leader.

**What is Required for Participation?**

There is minimal additional data collection requirements for participating sites, which will be supported by funding opportunities identified through the American Heart Association. Site responsibilities include:

- Assign a primary investigator and stroke coordinator at your site
- Continue to identify and submit patients to the Get With The Guidelines-Stroke patient management tool (PMT) as usual
- Submit the research protocol to your local IRB (or utilize the AHA’s commercial IRB – Chesapeake IRB)
- Capture clinical data fields of interest unique to this study within the PMT
- Educate patients on their voluntary participation in medical research and receive informed consent
- Conduct follow-up patient interviews at designated intervals after discharge (30 and 90 days)
- Partner with the American Heart Association to identify additional recognition opportunities
- Receive formal feedback describing the acute and long-term outcomes at your site

**More About Get With the Guidelines**

The Get With The Guidelines PMT and associated measures were developed in conjunction with Outcome Sciences, A Quintiles Company. Quintiles Real World
& Late Phase Research serves as the data collection and coordination center for Get With The Guidelines-Stroke. For the purpose of this study, MaRISS data entered into the GWTG PMT will be analyzed by the University of Miami.

Please take some time to review the enclosed documents and consider participating in this important research opportunity. If interested, please contact Edna Kavuma, MaRISS Program Manager at mariss@heart.org or 214-706-1994.

Kind Regards,

Lee Schwamm, MD FAHA
Chair, Get With The Guidelines-
Stroke Clinical Workgroup
AHA Volunteer Chair of the
Mild and Rapidly Improving
Stroke Study
Vice Chairman,
Department of Neurology
C. Miller Fisher Endowed Chair
Director, MGH Stroke Services
Massachusetts General Hospital
Professor of Neurology,
Harvard Medical School

Sara Camp, RN MSN ACNP
CCRN-CSC
Director
Quality Research and Marketing
American Heart Association
National Center
AHA Staff Lead
Mild and Rapidly Improving
Stroke Study
Sara.camp@heart.org
www.heart.org/quality
P: 817-773-2541
MARISS CONTACT INFORMATION:

www.heart.org/quality/mariss  Email: mariss@heart.org

MaRISS
Mild and Rapidly Improving Stroke Study

Edna Kavuma
MaRISS Research Program Manager, Healthcare Quality
American Heart Association - National Center
Advocacy & Health Quality
7272 Greenville Avenue
Dallas, Texas  75231-4596
Office: 214-706-1994
Email: mariss@heart.org
www.heart.org/quality/mariss