Intermediate Public Announcement

Public Notification:

Research to study whether patients will do better if initially transported to the cath lab following out-of-hospital ventricular fibrillation cardiac arrest will begin January 2018 in Minnesota and several other states.

Patients who are known to have a clot in their heart arteries are taken to the “cardiac cath lab” in order to have an invasive procedure (called a catheterization) to remove the clot and restore blood flow to their heart. Patients are known to have a clot if there are certain signs on their electrocardiogram (ECG or EKG). However, previous research has shown that some patients who have an out-of-hospital cardiac arrest due to ventricular fibrillation “Vfib” (an irregular heart rhythm that does not pump blood) may also be likely to have a clot in their heart arteries but not have signs of a clot on their ECG.

Researchers at the University of Minnesota will examine whether resuscitated cardiac arrest patients with no ECG evidence of heart artery blood clots have better outcomes if they are initially treated in the cath lab OR if these patients will do better if they are initially treated in the Intensive Care Unit (ICU) and await a cardiology consult to determine whether or not they need to go to the cath lab.

This study meets the Department of Health and Human Services (DHS) and FDA guidelines for exception to informed consent under emergency circumstances because informed consent cannot be obtained from a victim of sudden cardiac arrest.

For details on RISKS and BENEFITS, Exception to Informed Consent under emergency circumstances, research opt-out bracelets and other aspects of the study, please call: 612-626-3656, email accessdy@umn.edu or visit the Web Site at http://z.umn.edu/accesstrial