RESTORE Study - September 2021
Welcome to the RESTORE Study monthly update for September 2021!

Announcements

To facilitate communication with all study sites, we'll be sending out email updates each month. Please review the sections below for important information about study sites, trainings and surveys. For quick navigation, follow the links below to skip directly to each section of the update.

- Study Status
- Tips for Onboarding Dietitians
- Tips for Dietitians entering ANDHII data

Study Status

2 RDNs from 2 sites are currently entering patient’s data into ANDHII. 1 RDN has reached the goal of 10 patients!

11 more RDNs from 9 sites are completing onboarding, trainings, and preparing to begin the registry study

68 visit entries from 28 patients have been entered into the project

If you are about to begin documentation in ANDHII and would like to document care provided at any new or additional sites, please contact us at ANDHII@eatright.org.
Tips for Onboarding Dietitians:

1. Many resources for onboarding, including a 15-minute introductory video, can be found on the following website: https://drtaylorwallace.com/restore/

2. Each new study site needs to have the site agreement completed before starting to enter patient. The site agreement typically needs to be reviewed, approved, and signed by, for example a research office, research contracts department, or legal department. If you’re able to find a contact at your site, please e-mail the information to ANDHII@eatright.org and we will reach out to ask how to proceed. Here are tips for finding this contact:
   a. Speak with your manager or director
   b. Google ‘research’ and your site’s name and search for an e-mail address to direct general questions
   c. Look at your internal employee website or employee directory and search for ‘research’

3. When we reach out to this contact, we’ll ask if any steps are required through your local Institutional Review Board (IRB). While the project has been approved by the George Mason University IRB, some sites like to do their own review of the project. This may require submitting an application to the local IRB. We can help you complete the paperwork and submit, please forward any instructions you receive.

4. Once the site agreement is signed and steps per your local IRB are complete, we will provide you access to training modules on EatRightCPE. Since the site agreement and IRB steps could take a few weeks, we suggest waiting to take these until this is complete or close to it.
Tips for Dietitians entering ANDHII Data:

1. Please don’t forget to take a look at your ANDHII job aid for helpful tips and the Suggested Terms for a list of variables that may be of most interest in this population! We recommend that you print these out or save this to your personal computer to have accessible when you document into ANDHII.

2. Please ensure that you are not including any patient identifiers in the comment or notes fields in ANDHII or in any unsecured communications (e.g., e-mail). This includes, but is not limited to, screenshots of medical records, patient identifiers (birth dates, dates of visits or tests, patient names or medical record numbers, etc.), or any other piece of information that might be considered identifiable.

3. **Adult patients (>18 yo)** who are currently and were previously in the ICU can be entered into ANDHII. Patients who were previously in the ICU (i.e. have already been discharged at the time you go to enter the ANDHII note) can be ‘tagged’ by recording ‘COVID-19 – Retrospective’ using the Patient, client, family other history term.

4. We would like you to record each visit that you, as a dietitian, have completed per the patient’s standard of care from the time the patient is admitted to the ICU up until they are discharged from the ICU or become deceased. When creating the patient’s first entry, make sure to save their ANDHII re-identification code in the patient’s chart so you are able to search for the patient by their code in ANDHII when you go to record the next visit.

5. Once you enter **10 patients** and their follow-up visits into ANDHII, you will be awarded with a gift card (if allowed per your site’s policies). We encourage you to enter more than 10 patients and so appreciate your efforts in doing so!
Latest COVID-19 Science:

1. A retrospective analysis of 306 confirmed COVID-19 patients admitted to the Tongji Hospital (Wuhan, China) reported that severe patients (compared to non-severe patients) had higher whole blood levels of calcium, chromium, and copper, and lower levels of magnesium, manganese, iron, zinc, arsenic, thallium, and lead (FASEB J. 2021;35(3):e21392).

2. An ecological study of showed an association between reported cure rates for COVID-19 and selenium status (AJCN. 2020;11(6):1297-1299). A follow-up letter to the editor from experts in the field argued that selenium may have a key role in combatting COVID-19 virulence, with deficiency worsening clinical outcomes. Of note, they suggest that the interaction between the cytosolic selenoenzyme, glutathione peroxidase 1 (GPX1) detoxifying system and the main protease (M\textsuperscript{pro}) of SARS-CoV-2 may represent a novel molecular target for COVID-19 (AJCN. 2020;112(2):447-438).

3. A multicenter cohort study found that among hospitalized patients with moderate to severe COVID-19, those with severe 25(OH)D deficiency (<10 ng/mL) exhibited a trend for longer hospital length of stay compared with patients with higher 25(OH)D concentrations (AJCN.2021; 114(2):598-604).

4. Habitual use of vitamin D supplements was associated with a 34% lower risk of COVID-19 infection in a prospective study of 8,297 adults who had records of COVID-19 results from the UK Biobank (AJCN.2021;113(5):1275-1281).