

**Supplementary Appendix – Ong et al, Evaluating the impact of a SIMPLified LaYered consent process on recruitment of potential participants to the Staphylococcus aureus Network Adaptive Platform Trial: study protocol for a multicentre pragmatic nested randomised clinical trial (SIMPLY-SNAP Trial)**

**Contents:**

1. Simplified consent form
2. Consent Understanding Evaluation (CUE) questionnaire



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**Study Title:** *Staphylococcus aureus* Network Adaptive Platform (SNAP)

**Project Sponsor:** The Research Institute of the McGill University Health Centre

**Funding source:** Canadian Institute of Health Research

**Study doctor(s):**

**Emergency contact:**

***You are invited to take part in a research study because you have a Staph aureus bloodstream infection. Please read this information to help you decide whether you want to take part.***

For more information, click on the links in this document or if you are reading this on paper, scan this QR code with a smartphone camera:



## 1. Why are we doing this study?

- Many kinds of antibiotics are used to treat *Staph aureus* bloodstream infections. These antibiotics are safe and work well.
- This study aims to find out which of the antibiotics currently used work best.
- [‘Click here’](#) to watch a video about *Staph aureus* bloodstream infections and the study.

## 2. Do I have to take part?

- If you do *not* want to take part that’s OK. This will not affect the quality of care you receive.
- If you decide *not* to take part, you will be given the standard antibiotic treatments used in this hospital. This may be the same treatments you would have received in this study.
- If you take part, you are free to withdraw at any time without giving a reason.

## 3. If I take part, what will I need to do?

- You will be asked to sign a consent form.
- We will collect some information (like blood test results) from your medical records.
- You will be followed up for 90 days from the time you start treatment. We may collect brief information from you by email, text message, or telephone call on Days 14, 28, 42 and/or 90.
- You do not have to pay anything to be in the study, nor will you be paid. All medications, tests, and medical care for the study will be free of charge.
- [‘Click here’](#) to find out more about what being in the SNAP trial will mean for you.

## 4. What will the study involve?

- There are different parts to this study. Each part is called a domain.

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- This hospital is taking part in the following domain(s):

*Delete this section if your site is not participating in the Antibiotic Backbone Domain*

### **Antibiotic Backbone Domain**

Three different types of bacterium (germ) cause *Staph aureus* bloodstream infections:

- Penicillin-susceptible *Staph aureus* (**PSSA**)
- Methicillin-susceptible *Staph aureus* (**MSSA**)
- Methicillin-resistant *Staph aureus* (**MRSA**)

Your infection is being caused by one of these germs

- You will be randomly allocated to your main (backbone) treatment depending on the type of germ that is causing your infection. This part of the study will help us find out which of these currently used antibiotics works best.
- Your doctors will give you more information about the antibiotics when they know what type of *Staph aureus* bloodstream infection you have.

<b>PSSA</b>	You will be randomly allocated to either Cloxacillin or Penicillin
<b>MSSA</b>	You will be randomly allocated to either Cloxacillin or Cefazolin
<b>MRSA</b>	You will be randomly allocated to either Vancomycin / Daptomycin or Vancomycin / Daptomycin + Cefazolin; Normally cefazolin is not routinely used in MRSA. This study, under the regulations of Health Canada, will determine if the addition of cefazolin is of benefit

- These antibiotics are given into a vein (IV treatment). Your doctor will decide how long this will last. This will range from 5 days to 6 weeks.
- [Click here](#) if you would like more information about this domain.

*Delete this section if your site is not participating in the Adjunctive Treatment Domain*

### **Adjunctive (Additional) Treatment Domain**

- An antibiotic called Clindamycin stops *Staph aureus* germs from making toxins. This may limit the damage caused by *Staph aureus*.
- Adding Clindamycin to your main antibiotic treatment may help patients recover faster or improve outcomes but we do not know this for sure. This part of the study will help us find out.
- You will be randomly allocated to have clindamycin added to your main treatment, or not. If you are allocated to receive clindamycin, it will be given for 5 days.
- [Click here](#) if you would like more information about this domain.

*Delete this section if your site is not participating in the Early Oral Switch Domain*

### **Early Oral Switch Domain**

- After 7 or 14 days of treatment (depending on how quickly you recover) you will be randomly allocated to either continue your antibiotics given into a vein (IV treatment) or switched to continue antibiotic treatment by mouth (oral treatment).

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- We do not know whether it is better to switch early to oral treatment or to continue on IV treatment. This part of the study will help us find out.
- [Click here](#) if you would like more information about this domain.

## 5. What are the risks of taking part?

- All the treatments you may receive in this study are already widely used in normal care. The risks of being in the study are low.
- All antibiotics may have side effects. Most side effects are mild, such as diarrhoea, thrush and rash. Very rarely, more severe side effects might happen, such as liver or kidney inflammation, but these usually get better when the treatment is stopped.
- Your doctor will rule out any antibiotics you should *not* take based on your medical history.

## 6. What are the benefits of taking part?

- You may not benefit from this study, but it is possible the treatment you receive may work better, or more quickly, or be more convenient than treatment you would have otherwise received.
- Research like this also helps to continually improve the treatments and care provided to all patients now and in the future.
- This study is known as an *adaptive clinical trial*. In this type of study, the researchers analyse the results as the study goes on rather than just at the end. If the results show any of the treatments do not work as well as others, they will be dropped from the study. This means that after the study has been running for a while, there may be better odds of getting a better treatment.
- [Click here](#) if you want to find out more about adaptive clinical trials.

## 7. What will happen to the information collected for this study?

- The study team will use your details to contact you for the follow-up checks, and to send you information about the study results.
- As part of the study, we will also collect data for a registry of patients with *Staph aureus* bloodstream infection. This data will include the severity, management, and the outcome of your infection. The registry will be used to improve current practice and quality of care.
- Data collected for the study and for the registry will be stored in a secure database in accordance with the relevant Australian and Canadian privacy laws.
- With your consent, your name, address, and date of birth may be used to link your study information to existing datasets, such as hospital records, medications, and emergency department. This will allow longer follow-up of outcomes, like readmission to hospital, without us needing to contact you directly.
- All study data collected during this research study (including personal information and samples) will remain confidential to the extent provided by law. You will be identified by a code number only. The key to the code linking your name to your study file will be kept confidential by the research study.
- The doctor in charge of this research study or a member of the research team will forward your coded data to the study sponsor (Research Institute of the McGill University Health Centre) and to our Australian collaborators for the international analysis.

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[Insert hospital logo here]

- Your information will be kept strictly confidential and only used for the study or for future research related to *Staph aureus* infections and related conditions. The only people allowed to look at information that could identify you (name, address, date of birth) will be your doctors, study staff, the unit who performs the linkage, and authorized representatives of the study Sponsor, institution, Research Ethics Board or regulatory authorities who may want to check the study is carried out correctly.
- [Click here](#) if you would like more information about Data Collection and [click here](#) if you want to find out more about Data Linkage.

## 8. What will happen to the samples collected for this study?

- The Staph aureus bacteria grown from your blood culture will be stored in a sample bank.
- Studies on the cultured Staph bacteria will help researchers better understand how the bacteria make people sick and how the bacteria respond to antibiotic treatment.
- No other samples (e.g., blood or urine) will be collected or stored for this study unless you are participating in a sub-study, which will be detailed in a separate information and consent form.

## 9. What if I withdraw from this research project?

- You can withdraw from the study at any time, just notify a member of the research team. They will discuss any health risks or special requirements linked to withdrawing.
- If you do withdraw, you will have two options:
  - Withdraw from the study treatment ONLY - if you choose this option, you will receive standard treatment, and we will continue to collect data from you for the 90 days.
  - Withdraw from the study treatment *and* further data collection. We will keep any information we have collected about you up until you withdraw. If you do not agree with this, you should not join the study.

## 10. Where can I find more information?

[Click here](#) for more information, including:

- More information on each of the antibiotics in the trial
- The contact information for the ethics committee that approved this study
- Information on complaints and compensation
- What happens if the trial is stopped unexpectedly and how you will be kept informed if new information arises during the study.

### How to contact us

Here is the contact for your study doctor:

Dr \_\_\_\_\_

Telephone: \_\_\_\_\_

**Thank you for taking time to read this information sheet.  
If at any time anything is unclear or you have any questions, please make sure to ask your doctor who would be happy to help and answer your questions.**

<b>SIMPLY-SNAP Trial</b> <b>Modified Consent Understanding Evaluation (CUE) Tool</b> Version 2.0 dated Dec 04 2023	<b>Participant ID number:</b>	
	<b>Date Completed:</b>	
	<b>Interviewer Initials:</b>	

## A. Introduction

[no marks awarded for this section]

### A.1. To begin, did someone talk to you today about joining a research study?

Yes	
No [see paragraph below]	

If respondent says NO: Ask, "Do you mind telling me who spoke to your earlier, and what they spoke about?"

[Try to determine if respondent (a) somehow did not understand the question but reveals that indeed they were asked to be part of a study (in this case continue), (b) is not aware that they were invited specifically to be in a *research* study (then stop, thank them, and do not continue); (c) is not the right person, e.g., somehow a family member rather than subject referred by mistake; (if so, thank them and do not continue)

### A.2. Did you decide to join that study?

Yes	
No	
Haven't decided	
Not sure if I did	

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**B. Study Knowledge: Open-Ended Questions**

[marks per question in square brackets]

“For the next set of questions that I am about to ask, could you please answer the questions in your own words – you can just tell me what you think for each question. You can read the questions on the paper, if you like, but I will also read them out loud.”

**B.1. Can you please tell me in your own words why they are doing the study they discussed with you today? In other words, what are they trying to find out?**

**B.2. In the study they just discussed with you, does everyone in the study get the same thing? That is, does everyone get the same study medicine?**

**B.2.1. If respondent says no: Can you please tell me in your own words how the researchers decide which medicine you get?**

**B.3. Would it have been OK to say ‘no’ to joining the study they just discussed with you?**

**B.4. Is it OK to join the study and then decide partway through that you want to drop out?**

**B.5. What do you think are the benefits, or good things, if any, that might happen to people who join the study they just discussed with you?**

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**B.6. What do you think are the risks, or bad things, if any, that might happen to people who join the study they just discussed with you?**



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### C. Study Knowledge: Close-Ended Questions

[1 mark each]

“Thank you. Next, I’m going to ask you a few more questions about why they are doing the study you discussed today. Please look at the first question in this section. I will read it out loud while you follow along. Then I’d like you to tell me which answer fits best for the study they just described to you. So, the first question says:”

**C.1. I am going to tell you about four different types of research studies. Please tell me which of the following best describes the type of research study they just talked to you about? That is, pick the one answer that you think best describes the kind of research project they talked to you about.**

Is it a research project evaluating <b>different medical treatments</b> for a medical condition that you have?	
Is it a research project evaluating <b>new diagnostic tests</b> – that is, the study is looking at a new way of learning whether you have a disease or medical condition?	
Is it a research project comparing two <b>different educational tools</b> to see which might be better in improving people’s health?	
Is it another kind of research project that <b>collects information</b> about you, but <b>doesn’t involve any treatments or medical procedures</b> ?	
Don’t know	
Not applicable (e.g., patient refused to answer)	

**C.2. People who join the study they just told you about:**

Will receive <b>new antibiotics</b> that may or not may be effective	
Will receive <b>one or more antibiotic</b> from a <b>list of antibiotics currently being used</b> to treat this infection	
May have a chance of receiving a <b>placebo (dummy) antibiotic</b>	
May have a chance of receiving <b>no antibiotics</b>	
Don’t know	
Not applicable (e.g., patient refused to answer)	

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#### D. True/False Questions

[1 mark per question]

“Now I am going to read you some statements about the study they discussed with you today. You can follow along if you like. After I read each statement, please tell me if you think the statement is true or false?”

**D.1. In the study they just told you about, the researchers make the decision about which study medicine you get based on what they think is best for you. True or false?**

True	
False	
N/A (e.g., patient refused to answer)	

**D.2. In the study they just told you about, the list of potential antibiotics that can be given to you may change as the study progresses. True or false?**

True	
False	
N/A (e.g., patient refused to answer)	

**D.3. In the study they just told you about, different patients may receive their IV antibiotics for different lengths of time. True or false?**

True	
False	
N/A (e.g., patient refused to answer)	

**D.4. In the study they just told you about, some patients may receive only one antibiotic, while some may receive a combination. True or false?**

True	
False	
N/A (e.g., patient refused to answer)	

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**D.5. In the study they just told you about, the researchers are testing out new antibiotics that are not usually used for treatment of this infection. True or false?**

True	
False	
N/A (e.g., patient refused to answer)	