

**Selected Epsilon Projects*
1998-2007**

| Client | Type of Research | Project Acronym & Title | Target Population/Area | Sample Size | Protocol Development | Project Management & Study Coordination | Data Collection Tools | Data Management | Statistical Analysis & Results Reporting | Period |
|---|-------------------|---|----------------------------------|----------------|----------------------|---|-----------------------|-----------------|--|----------------|
| Johnson & Johnson | Outcomes Research | ESAM* European Survey on Anaemia Management (*TRESAM, PRESAM, GSAM followed) | Nephrology | 14,527 | Yes | Yes | No | Yes | Yes (Power Point Slide set) | 1998 - 1999 |
| Johnson & Johnson | Outcomes Research | OSTHEO Orthopaedic Surgery Transfusion and Haemoglobin European Overview | Orthopedic Surgery | 3,996 | No | Yes | No | Yes | Yes (Technical Report) | 1999 |
| Johnson & Johnson Pharmaceutical Research Institute | Outcomes Research | ABC Anaemia and Blood management in the Critically Ill | Critical Care | 3,500 | No | Yes | Yes | Yes | Yes (Published Article) | 1999 |
| Ortho Biotech Europe | Outcomes Research | ECAS* European Cancer Anaemia Management (*MEWACAS, ACAS followed) | Oncology | Approx. 15,280 | Yes | Yes | Yes | Yes | Yes (Published Article) | 1999 – Present |
| F. Hoffman La Roche | Technical Writing | IRIDIEM Design Paper | Diabetes/ Chronic Kidney Disease | NA | No | No | No | No | Yes (Published Article) | 2003 |

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| Ortho Biotech Belgium | Outcomes Research | STAR I & II Survey on the Treatment of Anemia using Recombinant human erythropoietin | Oncology | 781 | No | Yes | No | Yes | Yes (Power Point Slideset) | 2000 - 2001 |
| New York University & National Institute on Aging, NIH | Outcomes Research | Caregiving Study | Geriatrics | 400 | Yes | No | Yes | Yes | Yes | 2000 - 2003 |
| New York University | Outcomes Research | NICHE | Geriatrics | 14,000 | No | No | No | Yes | Yes (Power Point Slideset) | 1992 - 2003 |
| Johnson & Johnson | Secondary Analysis | EPOCAN, PGSM Nephrology, ECAS, MEWACAS, and ACAS data | Anaemia Treatment Analyses | Approx. 25,000 | NA | NA | NA | NA | Yes (Power Point Slideset) | 2002 |
| MedImmune | Survey | RSV Survey | Virology/ Pathology Lab Directors at US Hospitals | 300 | No | Yes | No | Yes | Yes (Technical Report) | 2003-2004 |
| Roche Diagnostics, Inc. | Technical Writing/ Data Collection | Tight Glycemic Control White Paper | NA | NA | No | Yes | No | No | White Paper | 2004 |
| Roche Diagnostics, Inc. | Survey | Tight Glycemic Control Protocol Survey | Laboratory Staff | 500 | No | Yes | No | Yes | Yes (Technical Report) | 2004-2005 |

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| Roche Diagnostics, Inc. | Observational Screening Study | Hyperglycemia Screening in Surgical Outpatients Study | Non-Diabetics Presenting for Surgery | 1,000 | Yes | Yes | No | Yes | Yes (Published Article) | 2004 |
| Roche Diagnostics, Inc. | Clinical Accuracy Study of Glucose Meters | Precision, Accuracy, and Clinical Effectiveness of Glucose Meters | Glucose Meter Accuracy | 200 | Yes | Yes | Yes | Yes | Yes (White Paper, Manuscript, Presentation at AACN, 2007) | 2006-2007 |
| Roche Diagnostics, Inc. | Observational Comparison Study | GLUCOS Control Outcomes Study | Impact of RALS-TGCM on Tight Glycemic Control | 10 hospitals | Yes | Yes | No | Yes | Yes (White Paper, Published Manuscript ¹) | 2006-2007 |
| Roche Diagnostics, Inc. | Market Analysis (Phone Survey) | Market Assessment of the Lancet Opportunity in Price Sensitive Customer Segments Such as Long-Term Care | Long-Term Care Facilities | 20 long-term care facilities | Yes | Yes | No | Yes | Yes (Market Analysis Report) | 2006 |
| Roche Diagnostics, Inc. | Observational Study | Tight Glycemic Control Impact on Nursing Workload Study | Nurses Critical Care Unit | 4 nurses | Yes | Yes | No | Yes | Yes (Power Point Slideset) | 2006 |

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| Roche Diagnostics, Inc. | Observational Study | The Valuation of Camit Pro and Smart Printer in the Hospital Outpatient Diabetes Care Environment | Outpatient Diabetes Clinics | 11 clinics | No | Yes | No | Yes | Yes (Technical Report & White Paper) | 2007 |
| Medical Automation Systems | Ongoing Clinical, Statistical, & Technical Support | Survey, White Papers, Database Validation, Manuscript Development | Glycemic Control | - | No | Yes | Yes | Yes | Yes | 2005-2007 |
| Medical Decisions Network | Ongoing Clinical, Statistical, & Technical Support | White Papers, Database Validation, Software Demo Development | Glycemic Control in RALS Client Hospitals | - | No | Yes | No | Yes | Yes | Present |
| Clarian Health System | Outcomes Research | Clarian Outcomes Studies | Hospital Glycemic Control | - | No | No | No | Yes | Yes (Oral & Poster Presentations, Published Manuscript) ² | Present |
| Medical Automation Systems | Outcomes Research | RALS®-Report Pilot Study | Hospital Glycemic Control | 27 Hospitals | No | Yes | No | Yes | Yes (Published Manuscript) ³ | 2007 |

*Complete list of all projects available upon request.

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References

- ¹ Cook C, Moghissi E, Joshi R, Kongable G, Abad V. Inpatient Point-of-Care Bedside Glucose Testing: Preliminary Data on Use of Connectivity Informatics to Measure Hospital Glycemic Control. *Diabetes Technol Ther.* 2007.

POC-BG data can be captured through automated data management software and can support hospital efforts to evaluate and monitor the status of inpatient glycemic control. Preliminary data suggest that there is a need to conduct broadbased efforts to improve inpatient glucose management. Increasing hospital participation in data collection has the potential to create a national benchmarking process for the development of best practices and improved inpatient hyperglycemia management.

- ² Juneja R, Roudebush C, Kumar N, Macy A, Golas A, Wall D, Wolverton C, Nelson D, Carroll J, Flanders SJ. Utilization of a computerized intravenous insulin infusion program to control blood glucose in the intensive care unit. *Diabetes Technol Ther.* 2007 Jun;9(3):232-40.

Use of the GlucoStabilizer program in the ICU resulted in improved glycemic control compared to the previous manually calculated glycemic control protocols.

- ³ Moghissi E, Kongable G, Abad V, Leija D. Current State of Inpatient Diabetes Burden and Care, and Goal of Conference. *Endocrine Practice.* July/August 2006;12(Supplement 3):1-10.

This article reviews the current state of inpatient diabetes in hospitals in the United States and examines the results of a recent analysis of blood glucose data from 27 US hospitals. The data revealed that hyperglycemia in hospitalized patients is still inadequately addressed in US hospitals, although substantial improvements have been made. Implementation of targeted glucose control needs to become a greater priority.