



# CLINICAL RESEARCH NEWSLETTER OCT 2025 NEWSLETTER VOLUME 1 | ISSUE 7

# CANCER CARE DELIVERY RESEARCH (CCDR) TRIALS PENDING ACTIVATION

Research Base	Title	Description
ALLIANCE	A232402CD: PAGODA Randomized Trial of a Proactive Graduated Dose Adjustment Algorithm for FOLFOX Chemotherapy to Prevent Unplanned Delays	<ul><li>GI cancer patients</li><li>Protocol under review</li><li>Expected activation: Fall 2025</li></ul>
ECOG-ACRIN	EAQ241CD: FinFit: Addressing Financial Hardship in AYA Cancer Survivors	<ul> <li>Recruiting 408 AYAs</li> <li>Protocol being prepared at ECOG-ACRIN</li> <li>Expected start: Winter 2025</li> </ul>
Wake Forest	WF24-09-26CD: Surgical Thromboprophylaxis Practices in Oncology Patients within the NCORP Network (STOP-VTE)	<ul> <li>Recruiting surgeons who perform abdominopelvic surgery</li> <li>Expected start: Late Fall 2025</li> </ul>

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### Contact Info

Alaina Newsome (underberga@sjchs.org), GA NCORP CCDR Program Coordinator for questions.

This newsletter was generated by:







# CLINICAL RESEARCH NEWSLETTER

## ALL OPEN AND ENROLLING CANCER CARE DELIVERY RESEARCH (CCDR) TRIALS<sup>1</sup>

Research Base	Title	CTSU Activation Date
Alliance	A232301CD: AYA Access Study: An Enhanced eHealth and Chat-Bot Enabled Delivery Model for Clinical Genetic Services in Community AYA Cancer Patients	9/26/2025
	EAQ221CD: Mobile Health for Adherence in Breast Cancer Patients (CONCURXP)  Deemed high priority by the Executive Committee.	10/31/2023
ECOG-ACRIN	EAQ222CD: Cost Communication and Financial Navigation in Cancer Patients (COSTCOM)  Sites must receive approval prior to initiating any study start-up activities.	2/29/2024
SWOG	S2417CD: A Pragmatic Randomized Controlled Trial To Evaluate The Effectiveness of an Intervention called Current Together After Cancer (CTAC) to Promote Guideline-Concordant Colorectal Cancer Surveillance	8/4/2025
	WF-1805CD: Implementation and Effectiveness Trial of HN-STAR Participant enrollment closed as of 2/13/2025, but practice (non-patient) enrollment is now ongoing.	8/10/2020
Wake Forest	WF-2301CD: Multi-site Community Oncology Planning for the CONNECT Intervention Targeting Lung Cancer Caregivers <sup>2</sup> Closed to accepting new sites. Contact Jess Sheedy (jsheedy@wakehealth.edu) to get on the waitlist.	7/2/2024
	WF-2303CD: Understanding and Enhancing Health-Related Social Needs (HRSN) Screening Among Community Oncology Practice Closed to accepting new sites. Contact Jess Sheedy (jsheedy@wakehealth.edu) to get on the waitlist.	7/23/2024











# CLINICAL RESEARCH

# **NEWSLETTER**

RECENTLY ACTIVATED TREATMENT/INTERVENTIONAL TRIALS <sup>1</sup>		
Research Base	Title	CTSU Activation Date
Alliance	A032302: Docetaxel Addition in Metastatic Castrate-Sensitive Prostate Cancer (ASPIRE)	9/26/2025
NRG	NRG-GY037: A Phase III Study of Induction Pembrolizumab and Chemotherapy Followed by Chemoradiation and Pembrolizumab vs Chemoradiation and Pembrolizumab Both Followed by Pembrolizumab for High Risk Locally Advanced Cervical Cancer	9/29/2025
	S2409: PRISM: PRecIsion in SCLC Via a Multicohort Study: Randomized Phase II Studies Evaluating Maintenance Durvalumab with or Without Biomarker-Directed Therapy for Extensive Stage Small Cell Lung Cancer (ES-SCLC	9/8/2025
	S2427: Single Arm Phase II Study of Bladder Preservation with Immunoradiotherapy After a Clinically Meaningful Response to Neoadjuvant Therapy in Patients with Muscle Invasive Bladder Cancer (BRIGHT)	9/4/2025

NCI DESIGNATED HIGH PRIORITY TRIALS <sup>2</sup>		
Alliance	A212102: Blinded Reference Set For Multicancer Early Detection Blood Tests	08/01/2022

- 1. Posted September 2025
- 2. Designated as high priority by the Executive Committee









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### **KUDOS**

Kudos to Maya Agosto, BA, CCMA, CPT, Clinical Research Coordinator from Lewis Cancer & Research Pavilion at St. Joseph's Candler, for her WF-1901 (Internet-delivered Management of Pain Among Cancer Treatment Survivors IMPACTS) enrollment efforts! She was the only Georgia NCORP coordinator recognized during the 10/6/2025 Wake Forest Research Base Meeting.

We are excited to share that during the URCC NCORP Research Base meeting, GA NCORP was recognized for the following:

- Northside Hospital (NSH) and Lewis Cancer & Research Pavilion at St. Joseph's Candler for their hard work at being the second highest accruers on URCC-18007!
- Northside Hospital (NSH) and Lewis Cancer & Research Pavilion at St. Joseph's Candler, Pearlman and Tift for being the second highest accruals for URCC-21038.
- Northside Hospital (NSH) and Lewis Cancer & Research Pavilion at St. Joseph's Candler, for being the second highest accruals for URCC-22063.

Lastly, GA NCORP was also awarded 2<sup>nd</sup> highest for overall top minority accruals across all sites and studies!

Great work everyone!

### "TEST YOUR KNOWLEDGE" QUIZ WINNERS

- Terri Brannon, CCRC, Oncology/Orthopedic Research Nurse (Harbin Clinic)-March/Issue
- Jodie Davis, RN, BSN, Clinical Research Coordinator (Anita Stewart Oncology Center)-May/Issue 3
- Stephany Park, Research Regulatory Specialist (Northeast Georgia Medical Center)-August/Issue 5

Will you be a winner for this month?

### CORE RESEARCH FUNDAMENTALS TRAINING PROGRAM

Georgia CORE held its second class on September 29-30, 2025. A special thanks to the attendees: Parker Byrd, Jessica Diaz, Jordan Jaffie, Trenecia Lunceford, Adriane Miller, Haley Newman, Nakia Orr, Lauren Ott, Lora Reese, Hilary Ritz, Chawndra Salter, Stacey Searcy, Kelly Tiller, Judi Wilder, and Erin Williams.

The next class will be held in December 2025. Please contact Kaylan Dixon (kdixon@georgiacore.org) and Angelique Brooks (abrooks@georgiacore.org) for additional information and registration details.





# CLINICAL RESEARCH NEWSLETTER

### MEMEBER SPOTLIGHT

### Stephanie Reyes recently awarded Lung-MAP.

Stephanie has been the Chair of the Lung-MAP Site Coordinators Committee for the last 4 years and served on the committee for the last 9 years. She was a SCC member since the inception of the committee in 2016 when Lung-MAP was known as S1400, so she has been working on this trial a long time. Stephanie also enrolled the very first patient to S1800E, which she likes to say was her swan song. Congratulations, Stephanie!!



### **OTHER NEWS**

### **Government Shutdown**

 NCI may be delayed in response until the shutdown is lifted.
 Please reach out to your designated protocol contact for patient-specific questions or concerns.

### **GA NCORP Accruals to date for Year 12**

Site	Accural to date	% to goal
NHCI	28	31.11
LCRP	18	36
NGMC	0	0
Navicent	0	0
JBACC	0	0
Harbin	0	0
Pearlman	0	0
Tift	3	12
Totals	49	24.50







# CLINICAL RESEARCH

# **NEWSLETTER**

UPCOMING RESEARCH BASE MEETINGS <sup>1</sup>			
Research Base	Date	Location	
ECOG	October 22-24, 2025	Philadelphia, PA	
NRG	January 22-24, 2026	San Francisco, CA	
SWOG	April 30-May 2, 2026	San Francisco, CA	
URCC	September 25-27, 2026	Niagara Falls, NY	
Wake Forest	TBD for 2026	Asheville, NC	
	UPCOMING ROUTINE AUDITS <sup>1</sup>		
ECOG	TBD FOR 2026		
NRG	TBD		
SWOG	TBD for 2027	Exact dates and method (onsite vs virtua are pending.	
URCC	TBD for 2027		
Wake Forest	TBD for 2027	1	

<sup>1.</sup> Please contact Shantoria Brown (sbrown@georgiacore.org) to discuss travel funds and audit preparation.

#### **TEST OF YOUR KNOWLEDGE OUIZ!**

The first person to answer correctly will receive Georgia NCORP swag and a shout-out in the next issue! Send your responses to srichburg@georgiacore.org.

- 1: Which of the following most often triggers a finding during an oncology site audit?
- A. Missing signatures on eligibility forms.
- C. Out-of-window tumor assessments

B. Late SAE reporting

- D. All of the above
- 2: You notice that lab results in the eCRF don't match the lab report. What's your next step?
- A. Correct the eCRF immediately and move on.
- C. Delete both entries and pretend it's 4 p.m. on a Friday

B. Notify the PI and document the

D. Submit a protocol deviation just in case

- discrepancy in the source
- 3: A participant reports mild nausea that lasts two days but doesn't require medication. What's the best

documentation approach?

- A. Skip it, not serious enough to log
- B Record it in the source and eCRF as

applicable.

- C. Wait to see if it happens again before noting it
- D. Add it only if the PI mentions it at the next visit