Marshfield Clinic
Research Institute

Research Matters **July 2017**

Research Matters is a monthly newsletter published by Marshfield Clinic Research Institute.

Director's Report

Amit Acharya, BDS, PhD
Executive Director

In 2007, National Academy of Medicine - NAM (formerly known as Institute of Medicine- IOM) defined Learning Healthcare System as: "*[one that] is designed to generate and apply the best evidence for the collaborative healthcare choices of each patient and provider; to drive the process of discovery as a natural outgrowth of patient care; and to ensure innovation, quality, safety, and value in health care."*

One of the unique characteristics about the Marshfield Clinic that attracted my attention during my first visit to the 'Clinic' in March of 2009 and later influenced my decision to pursue my research career here was that it had most of the key attributes of a *'Learning Healthcare System'*. Marshfield Clinic probably was already functioning like a Learning Healthcare System in many aspects even before the term was coined. The opportunity for the unique type of research that can be realized within the framework of our health system has always excited me.

Seventeen, this was a number that became familiar to me fairly early in my research career and in a way has influenced my research interest. You may wonder what that number represents. It takes 17 years in the health research translation process, from the idea being conceived to the research results being put into practice. My immediate thought process was, WHY?

The delayed timeframe for the research to move from the bench to bedside or chairside is seen as waste of the limited resources that are available for conducting and supporting research as well as a big barrier for ultimate dissemination of the value of research to patient care. Although we all focus on research that falls under the different translation spectrum, I think having a clear understanding of the bigger picture is very important to connecting the dots and telling our story to patients, policymakers, funders, healthcare professional as well as our own health system leaders.

With the ever changing healthcare environment both internal and external to our health system, there is no doubt that there are several challenges that we face. However, I strongly believe that there are unique opportunities that lie ahead of us. In the coming months I will be sharing the details regarding the many areas that we as a team will be focusing. Some of my immediate focus will be around operationalizing the strategic plan components that have been developed by the MCRI senior leadership team:

a. Assessing the current process and structure that is meant to support the function and mission of MCRI;
b. Nurture the unique areas of research that MCRI has been engaged in as well as identify and establish additional key areas of research that bring value to our patients, our communities and the health system;
c. Telling our story and sharing MCRI's impact to our stakeholders;

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Director's Report

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Fritz's is definitely a big shoe to fill and I will do everything to meet the demands. I want to sincerely thank Fritz for his selflessness and invaluable leadership. He has been our guiding light and without him we would not have been here. I want to thank him whole-heartedly. Under Fritz's leadership, MCRI has addressed several issues and grown tremendously. With your support and guidance, I very much look forward to taking on the challenges and the opportunities that lie ahead for our Institute.

It is a true honor to be working with a unique group of passionate people like you all and serving the mission of MCRI.

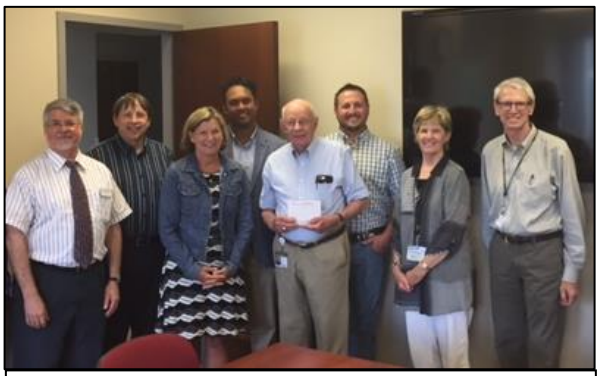
Interim Director's Report

Frederick Wenzel, Interim Executive Director

Since this is my last opportunity to write a column for this newsletter I would like to use the occasion to thank everyone who I had the chance to work with since I joined the Institute late in 2015. It has been both an honor and a pleasure to work with all of those who devote and dedicate their time to the purpose of the Organization, which is to care for the patients that are seen in the Clinics and Hospitals of MCHS. While the journey was brief, we accomplished a great deal through the cooperation of the Research, Clinic and System staff. I applaud your efforts as you thinned the walls of the silos and developed strong communication across the entire Institute. The Center Directors and Administrators played a central role in that effort working with a staff of dedicated scientists and all those who contribute to the operation. Special thanks to Deb, Steve and Jeanette with whom I worked closely during my time. They brought me up to speed quickly with a very steep learning curve and at times I thought I was drinking from a fire hose. The guidance and support of Dr. Murali also played a key role in your accomplishments during my tenure and I thank him for providing me with this chance to serve the Organization again.

The future of the entire System is bright under the leadership of Dr. Turney and the future of the Institute will rise to an even greater level than it has today under the leadership of Dr. Acharya. I appreciated the opportunity to work with him this past month and will be happy and honored to provide any help he might need as he assumes his new role as leader of the organization. Congratulations Amit, I wish you well. I ask all the staff to give him the same cooperation and help that you gave to me to ensure the success of the Institute in the future. I will also work hard to ensure the research program receives the attention, understanding and interest of the System Board.

With best wishes and thank to all……Fritz



Fritz was honored with a gift through the Shining Star program in July for his years of service to Marshfield Clinic, most recently as interim director of Marshfield Clinic Research Institute.

Thank you, Fritz, for all you've done! You are truly a legend!

Honor Fritz or another Shining Star: marshfieldclinic.org/giving/shining-star-gift

Associate Director's Report

Steve Ziemba,
Associate Director

You may have often seen my focus on change in this column, and certainly the news this month exemplifies that aspect. MCHS is now in possession of the local hospital, whose name has been changed to Marshfield Medical Center. The presence of the hospital within our health system opens new opportunities from a research perspective, some of which are already underway. A little closer to home is our transition from Fritz Wenzel to Amit Acharya as Executive Director of MCRI. Ironically, in terms of change, I think Fritz' role as Interim and the manner in which Amit has become the ED has helped to bring a sense of stability to MCRI. I know I speak for others in thanking Fritz for his time and dedication to our organization, and to bringing direction in our time of change. And to Amit, we are very much looking forward to working with you in this time of new beginnings.

Speaking of change, you may have seen that I will be assuming the role of Clinical Research Center (CRC) Director full time. Up to this point, my time was 80% CRC and 20% as Associate Director. I am looking forward to devoting my time to CRC and working with our wonderful clinical research professionals. It also means that this will be my final column in *Research Matters* as Associate Director. It has been an enjoyable experience.

As always, thanks to all for all that you do.

Recent Publications and Grants

Each month, MCRI researchers and MC clinical investigators are active publishing journal articles and seeking research funding. Please select the hyperlink to view recent grants and publications.

If you have recently published an article or received a grant or an award and want it included in the next issue of *Research Matters*, please contact Patti Baer at baer.patricia@mcrf.mfldclin.edu

MCRI On The Move

Jane Wesely joined **CRC** on June 19 as an **Oncology Research Nurse** in Marshfield. Jane holds a Bachelor's degree in Nursing from Viterbo College. She is transferring from CCEPH where she has worked on a variety of clinical research trials. She also worked at St. Joseph's Hospital in the Post Anesthesia Care Unit and in the Family Birth Center.

BIRC currently has the following **open positions** available: **Research Programmer/Analyst** and **Project Scientist I, PhD**. Both positions are eligible for an ERP bonus if your referred candidate is selected. Applicants should visit HR's Career Opportunities webpage to apply.

MCRI Welcomes New Staff

Tom Dalcher joined **BIRC** as an **Applications Analyst** on June 26th. Tom grew up in the Milwaukee area and spent most of his career working on mainframe programming projects for various consulting firms. His most recent position was at the Product Organization at MCIS where he worked as a Business Analyst. He earned a Bachelor of Arts degree in Political Science at UW – Milwaukee and later completed a MBA degree at Cardinal Stritch University in Milwaukee. He also served in the Peace Corps in Kazakhstan from 2004 – 2006 where he helped a nonprofit develop political education for the local population and taught language classes at the university level.

Chani Craig joined **CRC** on June 12 as an **Oncology Research Coordinator Associate** in Minocqua. Chani holds a Bachelor degree in Biology from the University of Wisconsin – Stevens Point and is also a Certified Dental Assistant and a Dental Health adjunct instructor.

Julie Kieffer joined **CRC** on June 26 as an **Oncology Research Nurse** in Marshfield. Julie holds an Associate's degree in Nursing from Mid-State Technical College as well as an Associate's Degree in Phlebotomy. She previously worked as a Nurse in the coding department and at the Blood Center of Southwestern Wisconsin.

Emili Leary, Pharm.D. recently joined **CHG** as a **Research Project Pharmacist.** She will also split her time between research and the Marshfield Clinic outpatient pharmacy. Dr. Leary received her undergraduate degree from UW-Eau Claire and her pharmacy degree from UW-Madison. She completed her pharmacy residency at Marshfield Clinic, which included a rotation in pharmacogenetics under the supervision of Dr. Murray Brilliant. With her expertise, Dr. Leary will play a critical role in implementation of pharmacogenetics in clinical care at Marshfield Clinic through education, consultation and continuing education offerings for clinicians, pharmacists and other clinical staff. In her free time Emili enjoys gardening, dog training, and spending time with her family and friends. This summer, she and her husband, Andrew, are looking forward to taking their dogs (Terra and Dozer) to Door County for hiking and swimming with the family.

NFMC welcomes **Josie Rudolphi, PhD** to MCRI. Josie started in July as an **Associate Research Scientist**. She completed her doctoral training at University of Iowa's College of Public Health in the Department of Occupational and Environmental Health. Josie has a very strong agricultural background and was trained by some of the best agricultural safety and health professionals in the U.S. Josie is excited to start exploring Wisconsin's great outdoors. She especially enjoys bicycling and gardening.

Post-doctoral Fellow Selected for HTCondor training at UW-Madison

Jamie Fox, PhD. was selected from a highly competitive pool of applicants to receive training for HTCondor at University of Wisconsin- Madison July 17-21, 2017. HTCondor is an open-source high-throughput computing software framework used for computationally intensive tasks. HTCondor efficiently harnesses tens of thousands of unused computing resources to significantly increase computational power and reduce the amount of time needed to solve research questions in days that may have taken months or years on a single computer.

Upon completion of her training, Dr. Fox hopes to apply HTCondor to computationally intensive research projects including genome and phenome-wide association studies.

CHG Administrative Secretary Receives CAP Certification

Cathy Marx, Center for Human Genetics (CHG) Administrative Secretary, received her Certified Administrative Professional (CAP) certification in May 2017 from the International Association of Administrative Professionals (IAAP) organization. CAP certification is a distinction that demonstrates development, commitment and excellence in the office and administrative profession.

Pediatric Physician Researcher Receives Gerber Foundation Funding Award

Dr. Jeremy Forster has been selected as the recipient of a Gerber Foundation research grant and will receive up to $313,283 over a three-year period to conduct a pilot clinical research trial studying the targeted delivery of a xylitol-containing solution to reduce ear infections in children under five years of age.

Ear infections are a common childhood ailment that cause significant patient, parent, and provider burden and are a major contributor to antibiotic use in children less than two years of age. Xylitol is an artificial sweetener used in sugar-free food, supplements, and pharmaceuticals that inhibits the colonization and growth of cavity-causing bacteria and bacteria associated with ear infections as well. Dr. Forster's study hypothesizes that a targeted delivery of a xylitol-containing solution in the nasal passages of children less than five years of age may reduce the incidence of ear infections and sinusitis in this demographic.

After submitting a concept paper to the Gerber Foundation in December of 2016, the Foundation expressed interest in the project and requested submission of a full proposal. The Gerber Foundation is a non-profit organization dedicated to funding research projects that improve the health and quality of life for infants and young children and support youth health and education programs in West Michigan.

SRIP Research Symposium Schedule Announced

On Thursday, August 10th, MCRI will host a Research Symposium to conclude the Summer Research Internship Program in Froehlke Auditorium. The symposium begins at 8:30am with opening comments from Dr. Amit Acharya, MCRI Executive Director and Jill Kurszewski, MCHS Foundation Gifts Officer for Research. The presentations will be followed by a luncheon in the Erdman Lobby. Staff, scientists, and physicians are invited to attend as many of the presentations as schedules allow.

Presentation Schedule

8:45-9:03am	Rachael Rol – "Understanding Beginning Farmers and Ranchers: Attitudes Toward Child Safety and Safe-Play Areas"
9:03-9:21	Trever Koester – "Sero-surveillance of Powassan Virus and Characterization of Patients with Dual Sero-positivity for Lyme and Acute Epstein-Barr Virus Infection"
9:21-9:39	Klaire Laux – "The Clinical Relevance of Genotypic Data in Blastomycosis Infections"
9:39-9:55	Break
9:55-10:13	Calin Dumitrescu - "Gut and Blood Microbiome Alterations After Maximal Exercise in Myalgic Encephalomyelitis / Chronic Fatigue Syndrome"
10:13-10:31	Vishakha Mavani – "Determinants of Weight Loss Success in Clinical Intensive Behavioral Therapy for Obese Adults"
10:31-10:49	Fereshteh Bashiri – "MCIndoor: A Computer Vision Framework to Assist Indoor Navigation of Blind or Visually-Impaired People"
10:49-11:05	Break
11:05-11:23	Rachel Fehrman - "Determining the Genetic Requirements of Glycosuria Using Phenome-Wide Association Studies"
11:23-11:41	Katelyn Kleutsch – "Feasibility Assessment of TeleDental Approach to Address Non-traumatic Dental Conditions (NTDC) Visits to the Emergency Departments (EDs)"
11:41-11:59	Callahan Katrak – "Awareness of Patients Towards Association of Diabetes and Periodontal Disease"
12:00-12:10	Dr. Huong McLean, Close

If you cannot attend in person, the event will be streamed live internally on MediaSite: http://mediasite.mfldclin.edu/Mediasite/Play/8e7c1059867e44c6a8e7a481c358628d1d

Keep an eye on the SRIP webpage! Abstracts for each presentation will be posted prior to the Symposium.

Compliance Notes

Molly Dowden, Research Compliance Educator

How to Write an Effective Non-Compliance Report

Before the title of this article makes you recoil and hurriedly move on to the next page of *Research Matters*, it is important to remember that non-compliances happen and are ubiquitous in nearly every research study. This article will help you provide the needed information in the most objective and concise way possible when submitting a non-compliance.

All non-compliances are to be submitted through the REDCap reporting tool that is maintained in the MCRI Hub. Linda Jaros, Research Compliance Officer, reviews and provides a determination of either minor, potentially serious or potentially continuing for a submitted non-compliance.

Most often, the question on the report which requests a brief description of the non-compliance(s) requires the most effort from reporters and also poses the most difficulty. Keeping it simple is the best way to craft an effective non-compliance narrative:

- State what should have happened, which can be as simple as copying the applicable requirement from the protocol or relevant policy.
- State what occurred that was specifically non-compliant.
- Do not include opinions and information extraneous to the determination of non-compliance.

Other suggestions are to write in the third person and to avoid personal pronouns such as you and I, and to not include individual staff names in the narrative.

Example #1: Study visit/study requirement out of window or not completed

"Protocol ABC123 requires subjects to undergo a CT scan and toxicity assessment within ± 7 days of the Cycle 2 study visit. The CT scan and toxicity assessment occurred 13 days after the Cycle 2 study visit and was out of window."

Example #2: Research-related policy not followed

"'MCRI Procedure for Reporting and Review of Unanticipated Problems' requires investigators to report unanticipated problems to the IRB within 10 business days of identification. In this case, an unanticipated problem was reported to the MCRI IRB 27 days after identification by the investigator."

Example #3: Inclusion/exclusion criteria

"Eligibility criteria in Study XYZ789 require subjects to be ± 0.5 of the normal range for thyroid hormone (TSH). During review of Cycle 3 TSH lab value, it was determined that baseline value was -0.75 of the normal range and subject was ineligible for participation in the study."

Example #4: Consent/assent/authorization error

"Study DEF456 requires both minor assent and parental consent to be signed and completed prior to engaging the subject in any research study activities. In this case, only the parental consent was signed (required minor assent was not obtained) prior to engaging the minor subject in the baseline visit research study activities."

More information can be found in the MCRI Non-Compliance Reporting policy. Please direct all questions regarding non-compliances to Linda Jaros or Molly Dowden.

AAHRPP to Make Site Visit for Re-accreditation

In December 2014, the Marshfield Clinic Research Institute was granted Full Accreditation for three years by the Association for the Accreditation of Human Research Protections Programs (AAHRPP). Accreditation indicates that our institution follows rigorous standards for ethics, quality and protections for human research. Accreditation is a public affirmation of our commitment to protecting research participants. MCRI's research participants, our peers, sponsors looking for sites, government agencies and the general public can be reassured knowing that we have attained the highest level. The AAHRPP seal places us among the world's most respected, trustworthy research organizations.

Since being granted accreditation, the institution has continued to maintain these standards and in January 2016 began preparing for re-accreditation. Part of being re-accredited involves a site visit from AAHRPP staff to MCRI which is scheduled to take place on Thursday, September 14 and Friday September 15, 2017. AAHRPP staff will access relevant records, policies, procedures, minutes, audits, a sample of protocols, consent forms and other materials. In addition, AAHRPP will select and interview key MCRI personnel such as investigators, research support staff, IRB staff, Institutional leadership, research compliance, fiscal, legal counsel, etc. Upon notification from AAHRPP, key personnel will be informed and requested to make time in their schedules for the interviews, which should range from 20-40 minutes. Prior to the site visit date, the IRB Administrator and Research Compliance Educator will assist key personnel in preparing for these interviews.

Your knowledge, continued adherence to the AAHRPP standards, and your flexibility in this process is key to the success of our re-accreditation. Thank you as it is most appreciated!

Updates from ORIP/IRB

Lori Scheller,
IRB Administrator

USE OF A SINGLE INSTITUTIONAL REVIEW BOARD (sIRB) FOR MULTISITE RESEARCH

For many years now worldwide there have been questions from researchers as to how the same research submitted to different Institutional Review Boards (IRBs) doesn't end up having the same determination or outcome as to how the research should be conducted. This lengthy process in getting all the IRBs to approve without significant multiple revisions, in some situations, causes serious practical problems for the researchers who are competing for studies and for the sponsors who are attempting to get the drug or device research completed.

These concerns have been taken in to consideration by IRBs and in an effort to help resolve them a number of IRBs have chosen to sign IRB authorization agreements (IAA) or reliance agreements to allow for utilization of a single IRB for multi-site research. However, not all IRBs had opted to do this.

In June 2016, the National Institute of Health (NIH) created a paradigm shift in the Protection of Human Subjects by issuing a policy that will **require** federally-funded clinical trials conducted at multiple sites to use a single Institutional Review Board (sIRB). The effective date of this policy was initially, May 25, 2017, but has since been changed to January 25, 2018. Details of the policy can be found at https://grants.nih.gov/grants/guide/notice-files/NOT-OD-16-094.html

Furthermore, the section on cooperative research in the revised Common Rule which goes into effect on January 19, 2020, states that cooperative research must rely upon approval by a single IRB for that portion of the research that is conducted in the United States. If further states that for research for which any Federal department or agency supporting or conducting the research determines and documents that the use of a single IRB is not appropriate for the particular context.

Locally in 2008 to address the researchers concerns, MCRI partnered with Aurora Health Care, Medical College of Wisconsin and UW Madison to form the Wisconsin IRB Consortium (WIC) which allows for these institutions to rely on each other's IRB when collaborating on research projects. MCRI has also signed reliance agreements with institutions involved in the Greater Plains Collaborative (GCP), Healthcare Services Research Network (HCSRN), and with an independent commercial IRB (Western IRB) for some pharmaceutical sponsored studies. Most recently, MCRI signed a SMART IRB Master Common Reciprocal Institutional Review Board Authorization Agreement.

SMART IRB is designed to harmonize and streamline the IRB review process for multisite studies, while ensuring a high level of protection for research participants. The agreement will allow for the MCRI IRB to serve as the IRB of record or for us to rely on other institutions who have also signed on as members of SMART IRB, without needing to execute a separate IAA for each study. It is intended to help researchers collaborate with the other 245+ institutions who are members and serve as a roadmap for institutions to implement the National Institutes of Health (NIH) policy on the Use of a Single IRB for Multi-site Research. Additional information about SMART IRB can be found at https://smartirb.org/ as well as a listing of the 245+

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institutions who are potential collaborators.

WISCONSIN IRB CONSORTIUM (WIC) / SMART IRB

The Wisconsin IRB Consortium (WIC) held a meeting in July hosted by Medical College of Wisconsin. The IRB members discussed the importance of WIC, the strong relationships developed over the years and its impact on the development of IRB Consortiums and SMART IRB. Since there are many similarities between WIC and SMART IRB plus all WIC institutions are members of SMART IRB, the group agreed to replace the WIC agreement, retire the WIC forms, WIC consent template, SOPs and the WICshare.com website as it is an outdated system. These will be replaced by the SMART IRB agreement, SOPs, consent template and the SMART IRB Online Reliance System, once the Beta testing has been completed. The SOPs and the consent template can found at https://smartirb.org/

In an effort to keep up with reliance requests from various institutions including WIC, all WIC IRB members have agreed to streamline and consolidate our processes needed to review, consider and process reliance requests. Effective **August 1, 2017,** investigators and research staff should complete their own institution's IRB reliance/deferral/cede Request form then provide the request form, the protocol and the consent form (utilizing the SMART IRB consent template) to their own IRB point of contact for WIC collaborations. Once received by the WIC IRB point person, the request form, protocol and consent will be reviewed, shared and discussed among the IRB personnel from all involved institutions. After deliberating among the IRBs, the investigator who submitted the request will be notified by his/her IRB point of contact person as to if the single IRB review is acceptable and which IRB will be the IRB of Record for oversight. Upon notification the PI should inform all other collaborating sites and begin to prepare and submit the IRB application form. Investigator(s) and research staff should make certain that their human subject's protection training and conflict of interest training is completed and current, otherwise the reliance request will not be able to be processed.

IRB FORM - CHANGE

Effective July 2017, the "**Request to Defer IRB Oversight**" form has been revised. The revisions include:

- new title of form "**IRB Reliance Request Form**"
- added Introduction/ Instructions /definitions
- added questions to provide more clarity of the deferral/reliance request
- formatting changes

For medical devices, this pathway is known as the humanitarian device exemption (HDE), and is intended for products meant to treat diseases affecting fewer than 4,000 people per year.

MCRI Seeks Nominations for the Gwen D. Sebold Award

This year, the Marshfield Clinic Research Institute (MCRI) celebrates the 30th Anniversary of the Gwen D. Sebold Research Fellowship Award with an event showcasing outstanding research at Marshfield Clinic Health System. This event will celebrate shining discoveries, milestones or achievements in research. The purpose of the Gwen D. Sebold Research Fellowship Award is to recognize an outstanding medical researcher and support continued research in his or her chosen field. Since its beginning in 1988, each year one award of $5,000 and a memorial plaque has been presented to a distinguished staff member by D. David "Dewey" Sebold in memory of his sister, Gwen.

Mr. Sebold congratulating the 2016 Gwen D. Sebold Award recipient, Dr. Jennifer Meece.

This year's award will be presented on Wednesday, October 11, 2017 at 6:00 p.m. in the Robert Froehlke Auditorium of the Laird Center for Medical Research. All persons submitting nominations and all nominees should plan on attending the ceremony.

Medical and dental providers, scientists, and all staff actively engaged in research and who have worked for the Marshfield Clinic, including the regional centers, for at least three years are eligible for nomination. Previous recipients of the award are also eligible. Nominees must be employed at the time of the award ceremony. Any physician, scientist or staff member may submit a nomination. Several people may collaborate to nominate a candidate.

Documentation Required:
1. Letters explaining why the nominee deserves the award should be addressed to Andy Keogh, Chair of MCRI BOT. These documents should be routed to Jeanette Normington in MCRI Administration, 1R3, or emailed to normington.jeanette@marshfieldresearch.org. The documents should be received by Friday, August 11, 2017.

In the letter(s), please address the originality, uniqueness, and significance of the research. The research must primarily focus on human health issues and must have contributed to the improvement of patient care or public health. Also describe the researcher's reputation and involvement with collaborators from Marshfield Clinic and others nationally or internationally known.

2. A copy of the nominee's CV

Selection of Recipient:
The Executive Committee of the MCRI Board of Trustees will review the nominations and select the recipient in September. The award shall be based upon the sole discretion of the Committee, and its decision will be final.

The recipient of the award will have discretion for its use in support of the recipient's research activities within the guidelines of the MCRI's disbursement of funds policy. A brief report summarizing the utilization of the funds and the results or activities that occurred as a result of the award is expected to be provided by the recipient.

Volunteer Opportunity

South Wood County Mobile Food Pantry
Marshfield Clinic and Security Health Plan partnered on a contribution to the South Wood County Mobile Food Pantry located at 441 Garfield Street in Wisconsin Rapids. There will be a food distribution event **Wednesday, September 27**. For more information about the volunteer opportunities, click here. For a volunteer waiver/release form for the food pantry, click here.

Upcoming Talks and Presentations

Scientific Seminars (Froehlke Auditorium)
Wednesday, August 16th
12:05pm-1:00pm
"Prefrontal Contributions to Visual Attention"
Behrad Noudoost, MD, PhD, Associate Professor, Department of Ophthalmology and Visual Sciences, University of Utah

Grand Rounds (12:15-1:00 p.m. in the Froehlke Auditorium)

Friday, August 4th
Minimally Invasive Approach to Complex Aortic Disease- A Contemporary Review
Shameem Kunhammed, MD, Vascular and Endovascular Surgery, Marshfield Clinic

Friday, August 11th
Temporomandibular Disorders/Orofacial Pain
Daniel E. Tache, DMD, Clinician & Lecturer, TMJ & Orofacial Pain Treatment Centers of Wisconsin

In Addition:

- The next MCRI Full Staff meeting is scheduled for August 3, 2017 at 10:00AM in the Froehlke Auditorium. Questions can be routed or emailed to Jeanette Normington at 1R3 or normington.jeanette@mcrf.mfldclin.edu.
- The next Board of Trustees meeting will be held on September 13, 2017 at 6PM in the Laird 50 conference room.
- For the latest UW-ICTR news, please visit: https://ictr.wisc.edu/news/.
- For updates on the Wisconsin Network for Health Research (WiNHR), please visit: https://ictr.wisc.edu/winhr
- The Marshfield Clinic Research Institute website can be accessed through this link: http://marshfieldresearch.org/.
- Archived issues of *Research Matters* are available online.

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