February 4, 2021

Dear Clinical Research Teams,

As we continue to move forward in our response to Covid-19 the below guidelines are in place 101 IKD Approved Clinical Research studies.

In parallel with the Phases of the Upstate Campus and Hospital, Clinical Research Visits are resumed under the 90% density guidelines as of 7/1/2020:

If Clinical Research Visits are conducted at the Clinical Research Unit (CRU) please follow all CRU guidelines. If you have any questions please contact Teresa Koulouris @ KoulourisT@upstate.edu

Please follow all ambulatory setting guidelines when conducting Clinical Research Visits. Below are the guidelines for Ambulatory Clinics:

Starting on Wednesday, July 1, 2020, each clinic will be responsible for the screening process of their patients and visitors, which includes:

- Masks: Provide each clinic patient/visitor with an ear-loop mask when they arrive.
 - Note: Each clinic will need to maintain their own supply of ear-loop masks for their patients/visitors.
- Hand Sanitizer: Have hand sanitizer available for use by clinic's patients/visitors.
- **Temperature:** Take the temperature for clinic's patient/visitor when they arrive.
- Screening Questions: Ask each patient/visitor the screening questions.
 - Note: Policies and Procedures: The following link provides detailed instructions and information on the screening process and COVID-19 related policies that screeners must know: COVID-19 Patient, Visitor, Staff, and Student Screening Process

Enforcing Policies and Procedures:

- Mask Policy: All people in the building must wear the ear-loop mask provided by Upstate.
- Visitor Policy: The following link provides the current COVID-19 Policy related to "Visitor Restrictions During Prevalence of COVID-19" that screeners must know: https://upstate.ellucid.com/documents/view/10484/active
- o **Positive Screen Procedure:** Refer to the "COVID-19 Patient, Visitor, Staff, and Student Screening Process" link above for Positive Screen Procedure.

During the pandemic we have asked that all clinical trial monitoring visits and sponsor audit visits be handled remotely. We have broadly heard, from clinical researchers, that these visits can be done remotely. We do this to reduce exposure risk, especially in ambulatory settings. Our initial concern was focused on out of state monitors but with the alarming rise in cases in many regions of New York State, we would also ask that in-state monitors and auditors also perform their work remotely.

If you have any questions please let me know.

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