Research Management System (RMS) serves as the case registration application for ALZ-NET.
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**RMS Overview**

The Research Management System (RMS) will be used to register patients and confirm eligibility criteria.

**Link to RMS:** [https://acr-patientregistration.acr.org/](https://acr-patientregistration.acr.org/)

*Accessing RMS Requires the use of an ACR Okta Account*

- This account is needed before creating an RMS account. This will serve as your ACR ID. If you do not have one, you will be redirected before creating your RMS account.
Creating an ACR Okta Account

Each user must have their own Okta Account. Ensure that the email being entered is a current email address.

Passwords must be changed every 90 days.

If you have participated in a previous ACR Study, you already have an ACR Okta Account, and may just log in directly. If you have issues accessing your account, please reach out to alz-net@acr.org
Creating an ACR Okta Account

1. Create your account and click “Register.”
2. Locate the ‘Welcome to ACR ID’ email in the email inbox you used to register and follow the one-time link to activate your account. Simply clicking on this link will activate your account (Note: check spam folder)
3. Return to the application’s home page (on previous slide).
4. Type in your username underneath Please Enter Your ACR Login (email address used to create ACR ID).
5. Set up Okta (two-factor authentication).
6. Return to the login portal and login with username and two-factor authentication.

Note: You will have to utilize a ‘multifactor authentication’ mechanism to log in each time. This is for security purposes.

Save your username and password. This is your ACR ID to be used across all ALZ-NET applications.

When you are done filling out the required fields, click ‘Register’
Logging into ACR Okta

ACR Okta will prompt to send a push to the mobile device that was registered with Okta. This is the multi-factor authentication. This is an example of what the prompt will look like.
RMS User Account Creation

For new RMS users – one time account set up
RMS User Account Creation

Login with your email address. You must be logged into Okta before accessing RMS.
Click ‘ALZ-NET’ from the drop-down menu
Select your institution from the drop-down menu. You can also search by Site ID (begins with a ‘6’)

Enter all mandatory fields, denoted with a (*)

Please enter your email and ensure that it is current, and you have access to it.

Check no

Select No for Reader ID

Enter your site’s address

The Protocol Number for ALZ-NET is 4709
RMS User Account Creation

Upload your Human Subjects Research Certificate

Check the check box

Type your name and date of registration, then click ‘Submit’
RMS User Account Creation

User Registration

Account activation is required for data center access on the ACRIN Website. Also, radiologists who will provide data for imaging-related case report forms must obtain a Reader ID. To obtain account access or a reader ID, please supply all information requested.

Registration Successful. You will be notified by ACR staff after your account has been approved to submit the DDSI Forms.

A member of the ALZ-NET Operations Team will approve your RMS account.
How to Register a Patient in RMS

New Patient Registrations
Select your Institution Name. It will have ‘ALZ-NET’ at the end of it.

Your Institution ID will start with a ‘6’. If you do not know your Institution ID, contact alz-net@acr.org
RMS Patient Registration

Click ‘view’ for new patient registration

Click ‘view’ to see list of enrolled and incomplete patients
RMS Patient Registration

If you need to go back at any point, click the ‘Institution Information’ or ‘Main Menu’ buttons. **Do not** click on your browser’s back button. This will log you out.

Click ‘Register’
### RMS Patient Registration

**Demography**

<table>
<thead>
<tr>
<th>Section 1</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of person registering case</td>
<td></td>
</tr>
<tr>
<td>Name of treating clinician</td>
<td></td>
</tr>
<tr>
<td>Date informed consent signed by patient or Legally Authorized Representative (LAR)*</td>
<td></td>
</tr>
<tr>
<td>Date of protocol version enrolling to *</td>
<td></td>
</tr>
<tr>
<td>Informed consent provided by</td>
<td>Select Option</td>
</tr>
<tr>
<td>In what language was the consent form completed?</td>
<td>Select Option</td>
</tr>
<tr>
<td>Has consent been provided for the patient to be contacted about other research studies investigating Alzheimer’s disease for which he or she may be a candidate?</td>
<td>Select Option</td>
</tr>
<tr>
<td>Patient’s country of residence *</td>
<td>Select Option</td>
</tr>
<tr>
<td>Patient’s year of birth</td>
<td></td>
</tr>
<tr>
<td>Patient’s sex assigned at birth</td>
<td></td>
</tr>
<tr>
<td>Patient’s self-reported identification of their gender</td>
<td></td>
</tr>
</tbody>
</table>
Click ‘Next’ to go to the Eligibility Checklist
### Eligibility Checklist

**Section - 1**

- Patient or patient’s legally authorized representative (LAR) (e.g., spouse or legal guardian) has the ability to understand the purpose and risks of ALZ-NET and provide signed and dated informed consent and authorization to use protected health information (PHI) in accordance with national and local patient privacy regulations. *

- Patient is at least 18 years of age at the time of informed consent. *

- Patient has a diagnosis of MCI or dementia with clinical suspicion of Alzheimer’s disease (AD) as contributing pathology and 1) is being evaluated for treatment or 2) will be initiating treatment or 3) has already initiated treatment with novel FDA-approved AD therapies in real world clinical practice. *

- If treatment is initiated at time of consent, patient meets appropriate label requirements and treatment follows appropriate use recommendations for novel FDA-approved AD therapy/therapies. *

- Patient's treating clinician has made the decision to provide clinical care or treatment prior to patient consent and independently of the purpose of ALZ-NET. *

*Click ‘Validate and Save’ to complete registration*
### RMS Patient Registration

**Patient Information**

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**PATIENT CONSENT & ELIGIBILITY**

ALZ-NET participants provide authorization via the informed consent process to have the below personal information provided to ALZ-NET. This data is kept secure and separate from the patient’s clinical data and only accessed and used to collect health insurance claims data and/or contact for future research if the patient provided additional consent to that optional component of ALZ-NET. Sites must enter the patient’s name exactly as it appears on their primary insurance ID card or medical record.

<table>
<thead>
<tr>
<th>Patient Information</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Name: *</td>
<td></td>
</tr>
<tr>
<td>Middle Name:</td>
<td></td>
</tr>
<tr>
<td>Last Name: *</td>
<td></td>
</tr>
<tr>
<td>Patient's date of birth: *</td>
<td></td>
</tr>
<tr>
<td>Patient's country of residence: *</td>
<td>--None--</td>
</tr>
<tr>
<td>Primary address: *</td>
<td></td>
</tr>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>City: *</td>
<td></td>
</tr>
<tr>
<td>State: *</td>
<td></td>
</tr>
</tbody>
</table>
# RMS Patient Registration

## Patient Information

<table>
<thead>
<tr>
<th>Field</th>
<th>Input Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zip Code:*</td>
<td></td>
</tr>
<tr>
<td>Primary phone number:</td>
<td></td>
</tr>
<tr>
<td>Primary email address:</td>
<td></td>
</tr>
<tr>
<td>Social Security Number (SSN):</td>
<td></td>
</tr>
<tr>
<td>Primary Insurance ID Number</td>
<td></td>
</tr>
<tr>
<td>Primary Insurance Group ID Number</td>
<td></td>
</tr>
</tbody>
</table>
RMS Patient Registration

PATIENT CONSENT & ELIGIBILITY
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First Name: *
Middle Name:
Last Name: *
Patient’s date of birth: *
Patient’s country of residence: *
Primary address: *
Address: 
City: *

Please click on the Submit button to register the patient.

Click ‘Submit’
RMS Patient Registration

Submitted

Case has been submitted successfully.

Go to Home
RMS Patient Registration

Hi,

This is to inform you that you have registered patient successfully.

Study Number: 4709
Case Number: 4709-282
Institution #: OH007
Institution Name:
Treatment Assignment: ALZ-NET N/A

Thanks,
ACR

A confirmation email will be sent to your email with the Patient ID. After registration, the Patient ID will be seen in Medidata Rave to begin data input for baseline.
How to Register a Patient in RMS

Incomplete Patient Registrations
If you began a patient registration and did not complete it, you can retrieve it by clicking ‘Incomplete Registration’.

Incomplete registrations must be completed within **7 calendar days** of the initial registration date. Any progress will be deleted if not completed in this timeframe.
Click ‘view’ on the patient you would like to finish registering and complete registration as normal.
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