Feasibility Form for RFA-DK-21-001
Initial and Resubmission

Purpose: To describe the participants, design, methods, and resources needed for the proposed RFA.

When: Form must be submitted no later than September 22, 2021

Completed by: Investigator submitting the RFA.

Instructions: The form should be completed and signed by the proposing investigator for the RFA (electronic signatures are accepted). Email completed forms (along with any supporting materials) to DFC-Ancillary@umich.edu

1. Name and contact information for principal investigator for the proposed study:

   Name:

   Institution:

   Phone number:

   Fax number:

   Email:

2. Study Title:

3. Is this a resubmission from first round of the RFA? ☐Yes ☐ No

   If Yes, please highlight any changes to study design and number of patients in the box below:

   If No continue.

4. Total number of patients*:

*Please note that requests for >100 patients for Phase I or protocols requiring significant deviation from current DFC protocols should be discussed with Dr. Teresa Jones **(jonest@extra.niddk.nih.gov)**

For the patient population, including inclusion/exclusion criteria, please refer to the current DFC studies: http://diabeticfootconsortium.org/dfc-studies/

5. Will study recruit patient population currently enrolled in DFC protocols 001 (CMYC), 002 (TEWL), or 003 (Biorepository)? [Select only one box]

   ☐ Yes- only DFC patient population
   ☐ Yes- DFC patient population plus additional population described below
   ☐ No

If "Yes- only DFC population", skip to question 9.
If "Yes-DFC patient population plus additional population described below" or "No", specify how patient population and/or inclusion criteria differ:

6. Patient Population:

7. Inclusion Criteria:

8. Exclusion Criteria:

9. Primary/Secondary Outcomes:

10. Specify all types and amounts of biospecimen and data collection.

10a. Tissue Collection:

10b. Other Biosamples:

10c. Patient-reported Outcomes:

10d. Other – specify:

11. Specific collection methods/requirements:

12. Timeline and frequency of biomarker and other data collection:
See the schedule of evaluations for each of the 3 DFC studies. Will your study schedule of visits follow that of current/active DFC protocols?

☐ Yes

☐ No

If No, provide visit table highlighting differences (as an attachment).

DFC 001. CMYC Study Schedule of Evaluations.

	Baseline / Biomarker				Biomarker									Confirmation of Primary Endpoint [a]
Visit	1	2	3	4	5	6	7	8	9	10	11	12	13	Confirmation Visit
Week	0	1	2	3	4	5	6	7	8	9	10	11	12	2 weeks after wound healing
Study Day	-10 to 0	7	14	21	28	35	42	49	56	63	70	77	84	14 days after wound healing
Visit Window, days	N/A	± 3	± 3	± 3	± 3	± 3	± 3	± 3	± 3	± 3	± 3	± 3	± 3	± 3
Informed Consent	X													
Inclusion/Exclusion Criteria	X													
Demographics	X													
Medical/Surgical History [b]	X													
Sitting Blood Pressure & Pulse Rate	X													
Focused Physical Exam [c]	X													
Weight/Height/BMI	X													
Lab Values [d]	X												X[h]	
Vascular/Neurological Evaluation	X													
QOL Assessment (SF-12, DFS-SF) [e]	X												X	X
PROMIS Pain Interference Questionnaire	X												X	X
Interim Major Medical Events (including adverse events)	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Concomitant Medications & Therapies [f]	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Wound Assessment	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Wound Debridement (optional)	X	X	X	X	X	X	X	X	X	X	X	X	X	
Off-loading	X	X	X	X	X	X	X	X	X	X	X	X	X	

	Baseline / Biomarker				Biomarker									Confirmation of Primary Endpoint [a]
Wound Imaging	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Discharge Instructions														X
Wound Tissue Collection for Biomarker Testing [g]	X				X									

[a] complete wound healing at or before week 12 (Visit 13) is the primary endpoint. It can occur any time between Week 1 and Week 12 (Visits 2 - 13). After this initial determination, it must be confirmed two weeks later at an in-person visit. The Confirmation Visit is the final visit for the participant. Amputation that occurs at or prior to week 12 would be considered non-healing and participant should be withdrawn from the study. See section 7.1 for details.

[b] includes history of previous treatments of diabetic foot ulcers

[c] description of focused physical exam in section 8.1.2

[d] values are to be collected from the medical record; except for HbA1c which is collected at Visit 1(if not collected within 3 months of V1)

[e] SF-12 = Medical Outcomes Study Short Form; DFS-SF = Diabetic Foot Ulcer Scale-short form

[f] Standard of care medications and therapies will begin after baseline assessments are collected.

[g] wound tissue collection for the biomarker assessments (c-myc, p-GR); At screening visit, wound tissue collection should be performed after all the eligibility criteria are met.

h. Only HbA1C

DFC 002. TEWL Study Schedule of Evaluations.

Visit Designation	Visit 1 DFU closure		Visit 2 Confirmation of DFU closure																	Visit 3a – No Recur[1]	Visit 3b – Recur[2]
Type of Visit	Clinic Visit	Phone Call	Clinic Visit	Phone Calls																Clinic Visit	Clinic Visit
Target Week	-2	-1	0 (Day 0)	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16[1]	17	Within 2-4 weeks of recurrence
Target Day	-14	-7	0	7	14	21	28	35	42	49	56	63	70	77	84	91	98	105	112	119	
Window (days)	None	±2	±2	±2	±2	±2	±2	±2	±2	±2	±2	±2	±2	±2	±2	±2	±2	±2	±2	±7	None
Informed Consent	X																				
Eligibility Criteria	X		X[3]																		
Clinician Wound Site Assessment[4]	X		X[3]																	X	X
Demographics	X																				
Medical History[5]	X																				
Focused Physical Exam[6]	X																				
Imaging (digital photos of wound and reference sites)	X		X																	X	X
TEWL measurement	X		X																	X[7]	
Standard of Care DFU Therapies[8]	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	
QOL Assessment (SF-12)[9]	X																			X	X
Adverse events	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Education / Training Video[10]	X																				
Ascertainment of DFU wound recurrence (patient reported)		X		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X

[1] If participant does not report DFU wound recurrence by Week 16 post-visit 2, then a subset of these participants (see Section 9.5) will be asked to schedule Visit 3a – No recur, which should occur at Week 17. This will be their final visit. Clinical assessment of DFU wound status is obtained to confirm participant self-report of no DFU wound recurrence. TEWL measurements will be taken if clinical assessment of DFU wound status confirms no DFU wound recurrence.

[2] If a participant reports DFU wound recurrence at or prior to Week 16, they will be asked to schedule Visit 3b – Recur, which should occur within 4 weeks of the notification by the participant. This will be their final visit. Clinical assessment of DFU wound status is obtained to confirm participant self-report of DFU wound recurrence. TEWL measurements are not taken at this visit.

[3] If participant does not have complete DFU wound closure, the participant will be withdrawn from the study after assessment of adverse events and digital photos of the wound are taken; no further procedures will be performed (i.e., no TEWL measurements, no collection of SOC DFU therapies).

[4] DFU wound closure as determined by designated wound physician at Visits 1 and 2, and at Visit 3a – No Recur or Visit 3b – Recur.
[5] Includes history pertinent to DFU disease including duration of the target ulcer, previous and current treatments.
[6] Description of focused physical exam in Section 8.1.7, including vital signs [weight, height, BMI, heart rate, blood pressure], lower extremity integument and structural deformities, vascular, and neurological [monofilament sensory test, Michigan neuropathy screening instrument].
[7] If there is DFU wound recurrence per clinical assessment, then no TEWL readings will be collected.
[8] Off-loading (TCC or removable walker) is required for 2 weeks between Visit 1 to Visit 2. After Visit 2, standard of care for post-DFU wound closure, including offloading, should be strongly advised for all participants.
[9] SF-12 = Medical Outcomes Study Short Form.
[10] Education, including a training video, will be provided to participants on how to assess DFU wound recurrence

DFC 003. Biorepository Study Schedule of Evaluations.

**Please note: The Biorepository study collects data and biomaterials from subjects in DFC 001 (cMyc) and DFC 002 (TEWL)	**Baseline**				**Biomarker**		**Telephonic Visits**			
Visit	**1**	2	3	4	**5**		6	7	8	9
Week	**0**	1	2	3	**4**	12	26	52	78	104
Visit Window, days	N/A	± 7	± 7	± 7	± 7		± 14	± 14	± 14	± 14
Informed Consent	X									
Wound Imaging	X	X	X	X	X					
Collection of Additional Biorepository Samples – Whole Blood [a]	X					X				
Collection of Additional Biorepository Samples – Urine [b]	X					X				
Collection of Biorepository Samples – Wound debridement tissue [c]	X				X					
Collection of Additional Biorepository Samples – Wound dressing material [d]	X				X					
Collection of clinical outcome related data (recurrence, amputation event, and/or participant death) [e]						X	X	X	X	X

[a] Whole blood, as applicable
[b] Urine, as applicable
[c] Wound debridement tissue, as applicable
[d] Wound dressing material e.g. wound fluid analysis, as applicable
[e] Type of clinical outcome at 12 weeks will be recorded for enrolled participants and completed as part of the other study protocols.

- I acknowledge that the DFC Ancillary Studies Policy, including the policy on publications and presentations arising from ancillary studies, applies to the ancillary study proposed herein.

- I understand that if there is a change to one or more of the aims or if additional Diabetic Foot Consortium resources are needed, I must gain approval from the DFC Ancillary Studies Committee to proceed.

13. Date form submitted to DFC Ancillary Studies Committee: _____ (Day Month Year)

14. Signature of proposing investigator: _____

15. Date received by DFC Ancillary Studies Committee: _____ (Day Month Year)

16. Signature of DFC Ancillary Studies Committee chair/vice-chair: _____