Every year, more than 35 million patients walk through the doors of hospitals and clinics with questions about their health and about their care. At the DCRI, we work with patients and leaders in government agencies, payors, professional societies, patient advocacy groups, industry and other research sponsors to find those answers. We are committed to leading and advancing innovation that improves the quality, value, and outcomes of patient-centered care.

**A FOUNDATION BUILT TO TRANSFORM**

DCRI Health Services Research’s breadth of expertise and thought leadership includes:

- Outcomes research
- Quality improvement
- Implementation science
- Comparative effectiveness research
- Medical decision making
- Cluster randomized trials
- Empirical bioethics
- Drug and device safety
- Health economics
- Health policy
- Methods development
- Patient-reported outcomes
- Decision modeling
- Pharmacoepidemiology

**Health Services Research Leadership**
- Pragmatic health systems research
- Disease registries
- Comparative effectiveness studies
- Stated preference research
- Patient-reported outcomes
- Quality improvement
- Health economics
- Health policy hub
- Evidence synthesis
- Participant engagement
- Implementation Science

**Therapeutic Expertise**
- Cardiovascular
- Gastroenterology
- Infectious Diseases
- Musculoskeletal
- Nephrology
- Neurosciences Medicine
- Nutrition in Surgery
- Pediatrics
- Respiratory medicine
- DCRI Research Together™

**NUMBERS THAT MATTER**

- **10 million+** patients in outcomes studies
- **3,000+** publications in the past 10 years
- **50+** clinical and statistical faculty
- **150+** full-time employees

As the world’s largest academic research organization, the DCRI is positioned to approach research challenges from a unique perspective.

**Our ARO advantage:**

- Strong faculty thought leadership combined with experienced operational leadership for successful study conduct and execution
- Knowledge of clinical practice and regulatory requirements for improved design, quality, efficiency, and impact of research studies
- Practicing physicians who implement trials that are grounded in the realities of patient care
- Well-developed site communities
- Innovative research approaches
- Extensive collaboration with government, research sponsors, investigators, and other academic institutions
- Strong partnerships with patients and participants: people come first
THE LARGEST DISEASE-BASED REGISTRIES AND PRAGMATIC TRIALS

Over the past decade, clinical registries have become potent contributors to scientific knowledge by offering a glimpse into real-world trends and patterns of care. The DCRI optimizes the operational efficiency of clinical registries, as well as expanding their application for maximal clinical and policy impact. We are nationally recognized as experts in the data management and statistical analysis of large clinical registry datasets, not limited to:

Signature Registries with Professional Societies
- American College of Cardiology (ACC) National Cardiovascular Data Registry (NCDR)
- Society of Thoracic Surgeons (STS) National Cardiac Surgery Database
- American Heart Association and American Stroke Association’s Get With The Guidelines Program

Multicenter Pragmatic Randomized Trials
- ADAPTABLE: the first PCORnet trial
- Affordability and Real-world Antiplatelet Treatment Effectiveness after Myocardial Infarction Study (ARTEMIS)
- Care Optimization Through Patient and Hospital Engagement Clinical Trial for Heart Failure (CONNECT-HF)

Pioneering Research
- Can Rapid Risk Stratification of Unstable Angina Patients Suppress ADverse Outcomes with Early Implementation of the ACC/AHA Guidelines (CRUSADE)
- The Idiopathic Pulmonary Fibrosis Outcomes Registry (IPF-PRO)
- Patient and Provider Assessment of Lipid Management Registry (PALM)
- Cascade Screening for Awareness and Detection of Familial Hypercholesterolemia (CASCADE FH)
- Childhood Arthritis & Rheumatology Research Alliance (CARRA)
- The Project Baseline Health Study

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