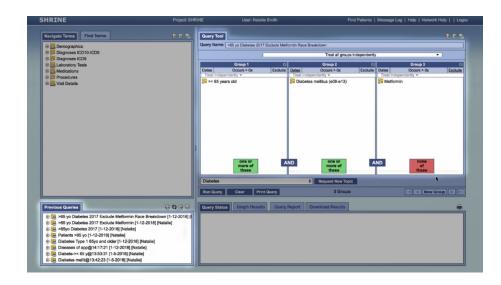**Getting Oriented To ACT**
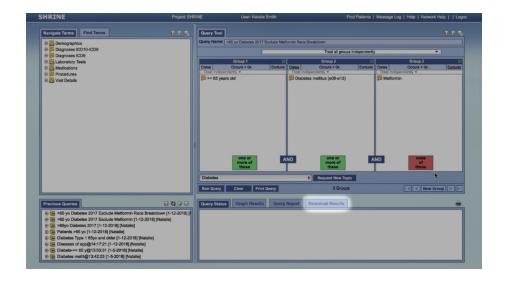Interpreting & Using ACT Query Results

Part 3 of 3

Natalie is a clinical researcher at an academic research institution.

She's already built her Query to find patients who are over 65, have diabetes, and are on a particular medication – see the previous tutorial in this series for more information on constructing queries in ACT. Past queries are saved in the lower left-hand window titled 'Previous Queries'. These queries remain there indefinitely and can be re-accessed and re-run at any time by simply dragging and dropping them in to the Query Tool.

After running her query through ACT, Natalie can click on download results in the query status window and download the data in an Excel format, allowing her to do further data manipulation or use the data in a grant application or other document.
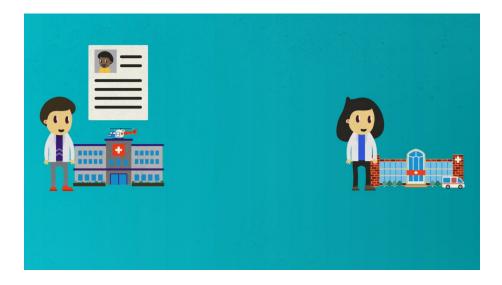
Looking through the results, Natalie finds that there are 20 patients that fit her criteria at another institution. If Natalie is interested in collaborating with this institution on a clinical trial, she can reach out directly to her own contacts there, or she can contact their CTSA institution for help finding potential collaborators.
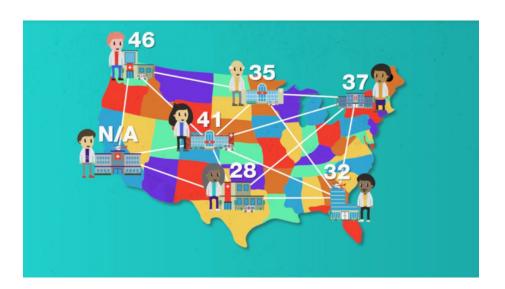
The 20 that Natalie sees is an approximate count of the patients, in reality the number of patients fitting her criteria may be slightly higher or lower. All results are +/- 10 rounded to the nearest 5 patients, to help protect patient confidentiality. It's not possible to access any identifiable patient data through ACT.

When Natalie is ready to begin recruiting patients for her study, she will need to work through her own IRB to access identifiable patient information. If her study involves additional sites, her co-investigators at those sites will need to follow their own local IRB approval processes for patient recruitment too.

Data availability, and data coding practices, can vary from institution to institution so ACT should not be used to gather your primary research data. Additionally, public, comparative reporting of query results is not supported by the ACT data use agreement. Counts from ACT are best used to validate feasibility of clinical studies, and as a starting point to identify potential partners for multi-site studies.

If Natalie sees results that are lower than she expects from another institution, she can either wait and try her search again later or use the contact info supplied on the ACT portal website and get in touch with the institution directly.

To learn more about using ACT, please visit
www.ACTNetwork.us

Explore. Discover. Connect