

## Marshfield Clinic Research Institute

<https://www.marshfieldresearch.org/>

PCORnet® Network Partner in GPC since 2013

The purpose of this Site Profile is to provide an overview of the basic research processes at Marshfield Clinic Research Institute. This profile can help you understand: the types of patients within the electronic medical records; current PCORnet® Study participation; patient recruitment methods and institutional procedures related to Institutional Review Board and contracting; and data linkages.

**Table 1. Characteristics of the patient population between January 1 – December 31, 2024**

The characteristics of the patient population presented in this table are based on data from the health system’s electronic health records mapped to the PCORnet® Common Data Model as of September 2025 and do not reflect any public-facing or official characteristics reported by the health system or its partners. This data can be used to help inform researchers of the types of patients, care settings, and location data that are available for research.

Unique Patient Records	100,001-500,000 [presented as range]
<b>AGE IN YEARS</b>	<b>%</b>
Children 0-9	11 %
Children 10-19	11 %
Adults 20-34	13 %
Adults 35-54	20 %
Adults 55-64	14 %
Adults 65-74	16 %
Adults 75+	14 %
<b>SEX</b>	
Female	53 %
Male	47 %
Unknown	0 %
Missing	<1 %
<b>RACE</b>	
White	88 %
Black or African American	1 %
Asian	1 %
Multiple race	5 %
American Indian or Alaska Native	1 %
Native Hawaiian or Other Pacific Islander	<1 %
Unknown	3 %
Missing	<1 %
<b>HISPANIC</b>	
No	91 %
Yes	4 %
Unknown	3 %
Missing	2 %
<b>CARE SETTING</b> – <i>patients may have more than one encounter type</i>	
Ambulatory Visit	93 %
Emergency Department	21 %
Telehealth	1 %
Inpatient hospital stay	7 %
Emergency to inpatient	0 %
Observation stay	1 %
Non-acute institutional stay	<1 %
<b>AREA DEPRIVATION INDEX</b>	
Quartile 1 (Highest Socioeconomic Status)	10 %
Quartile 2	56 %
Quartile 3	28 %
Quartile 4 (Lowest Socioeconomic Status)	2 %
Missing	3 %

**RURAL-URBAN RESIDENCE**

Metropolitan/Urban area	29%
Microropolitan/Large rural area	26%
Small town	18%
Isolated rural area	24%
Missing	3%

**US STATE\***

Wisconsin	93%
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\*For state data, the site profile report will only list states with ≥ 10% of the patients.

**PCORnet® Study Leadership (Studies listed below where Marshfield Clinic Research Institute is the lead site)**

**Consented Studies (interventional trials & studies with patient-reported data collection)**

None

**Observational Studies**

None

**Data Science**

None

**Engagement (for example, PCORI-funded Science of Engagement projects)**

None

**PCORnet® Study Participation (Studies listed below where Marshfield Clinic Research Institute is participating)**

**Consented Studies (interventional trials & studies with patient-reported data collection)**

- Aspirin Dosing: A Patient-Centric Trial Assessing Benefits and Long-term (ADAPTABLE)
- HERO Registry & Trial: Healthcare Worker Exposure Response and Outcomes
- HERO-TOGETHER: A Safety Surveillance Study of Post- Vaccination Events of Interest among People Vaccinated Against COVID- 19
- Pragmatic Evaluation of Events and Benefits of Lipid-Lowering in Older Adults (PREVENTABLE)

**Observational Studies**

- Characterization of Patients with Heart Failure and Patients with Atrial Fibrillation and Atrial Flutter in PCORnet Data
- Comparing the Benefits and Harms of Three Types of Weight Loss Surgery -- The PCORnet® Bariatric Study
- Understanding How Antibiotic Use Affects Childhood Obesity and Growth
- Using PCORnet to Compare Blood Pressure Control Strategies

**Data Science**

None

**Engagement (for example, PCORI-funded Science of Engagement projects)**

None

**Participant Recruitment Capabilities**

**Mechanisms**

- Patient portal       Email       Post mail       Schedule-driven clinic intercept

**Outreach**

- System-wide outreach permitted       Clinic-specific outreach (physician approval required)

**Institutional Review Board (IRB) Policy**

- Recruitment messaging with “opt-out” language permitted

**Primary Patient Groups**

- Adult       Pediatric       Safety net

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## Institutional Procedures

### *Institutional Review Board (IRB) Arrangements*

- May rely on single/central IRB for federally mandated studies only
- May rely on single/central IRB for non-federally mandated studies
- May accept commercial IRB review

### *Order of Activation*

- IRB approval required before contract execution
- Contract execution required before IRB approval
- IRB and contract can be executed in parallel

### *Administrative Efficiencies*

- Will accept PCORnet® Master Clinical Research Agreement without redlines for PCORI-funded studies
  - Has signed the PCORnet® Master Data Sharing Agreement
  - Has contracted directly with Industry funders
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## Linkage with Other Data Sources

### *Health Plan Claims*

- In same or adjacent data mart with common ID
- Established linkage infrastructure and regulatory

### *Name(s) of Plan(s)*

Medicare claims linked to Common Data Model (CDM), hospital tumor registry, and social/geographic data in a centralized repository maintained at the University of Missouri (“GROUSE”)

### *Other (non-EHR) Data*

- Linked in DataMart\*
- Established linkage infrastructure and regulatory

### *Name(s) of Data Source(s)*

Hospital tumor registry, Social Security Death Master File (SSDMF)

\*DataMart refers to a specific data source consisting of data collected, captured or otherwise obtained by the health system. Each site’s PCORnet DataMart houses data standardized to the PCORnet® Common Data Model.

Marshfield Clinic Research Institute is a Network Partner in PCORnet® which has been developed with funding from the Patient-Centered Outcomes Research Institute® (PCORI®). Marshfield Clinic Research Institute’s participation in PCORnet is funded through a PCORI Award (RI-MISSOURI-01-PS8). PCORnet® is intended to improve the nation’s capacity to efficiently conduct patient-centered health research, particularly comparative clinical effectiveness research (CER), by providing a large, highly representative network of health data, research expertise, and patient insights.