

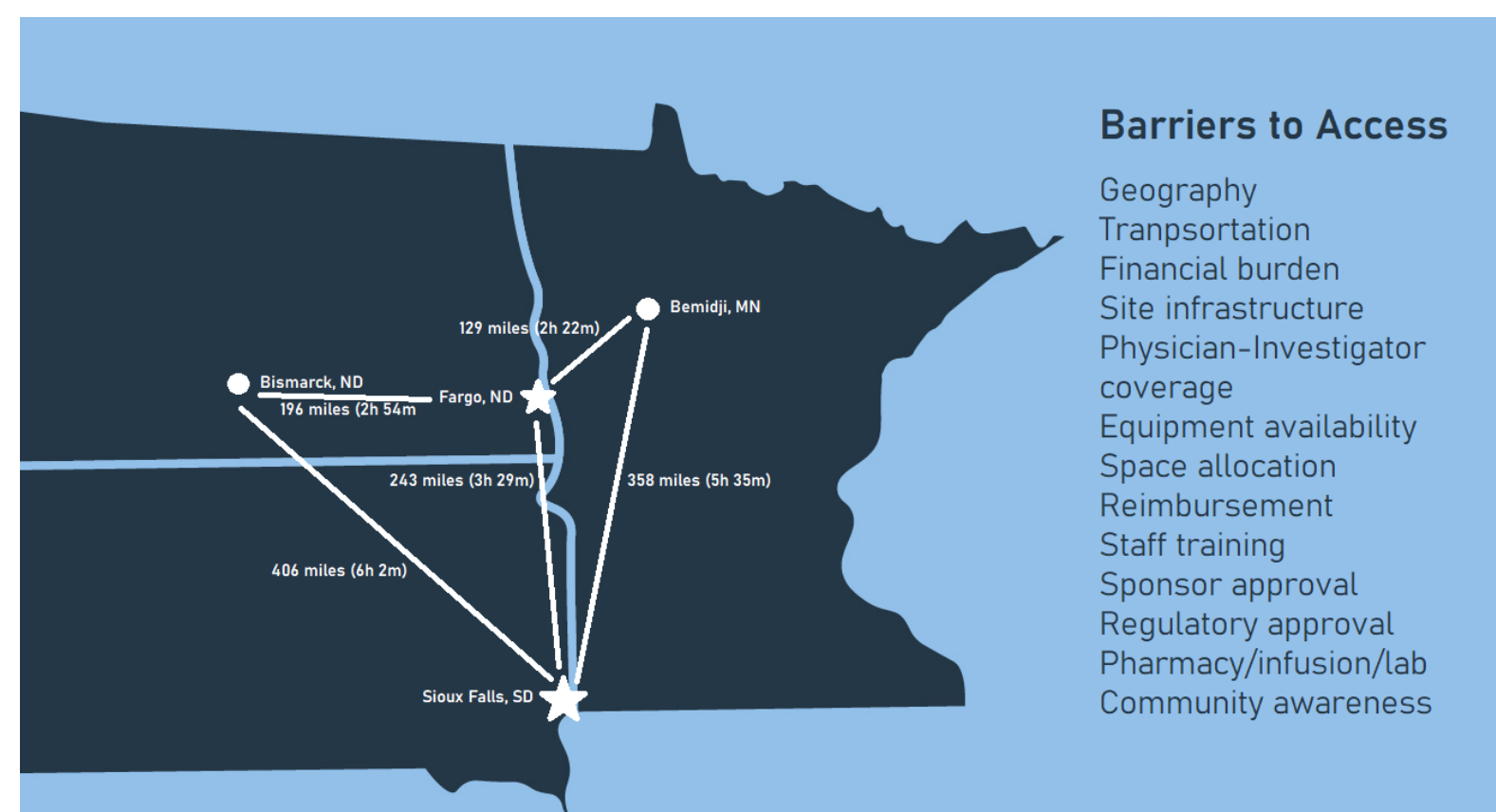
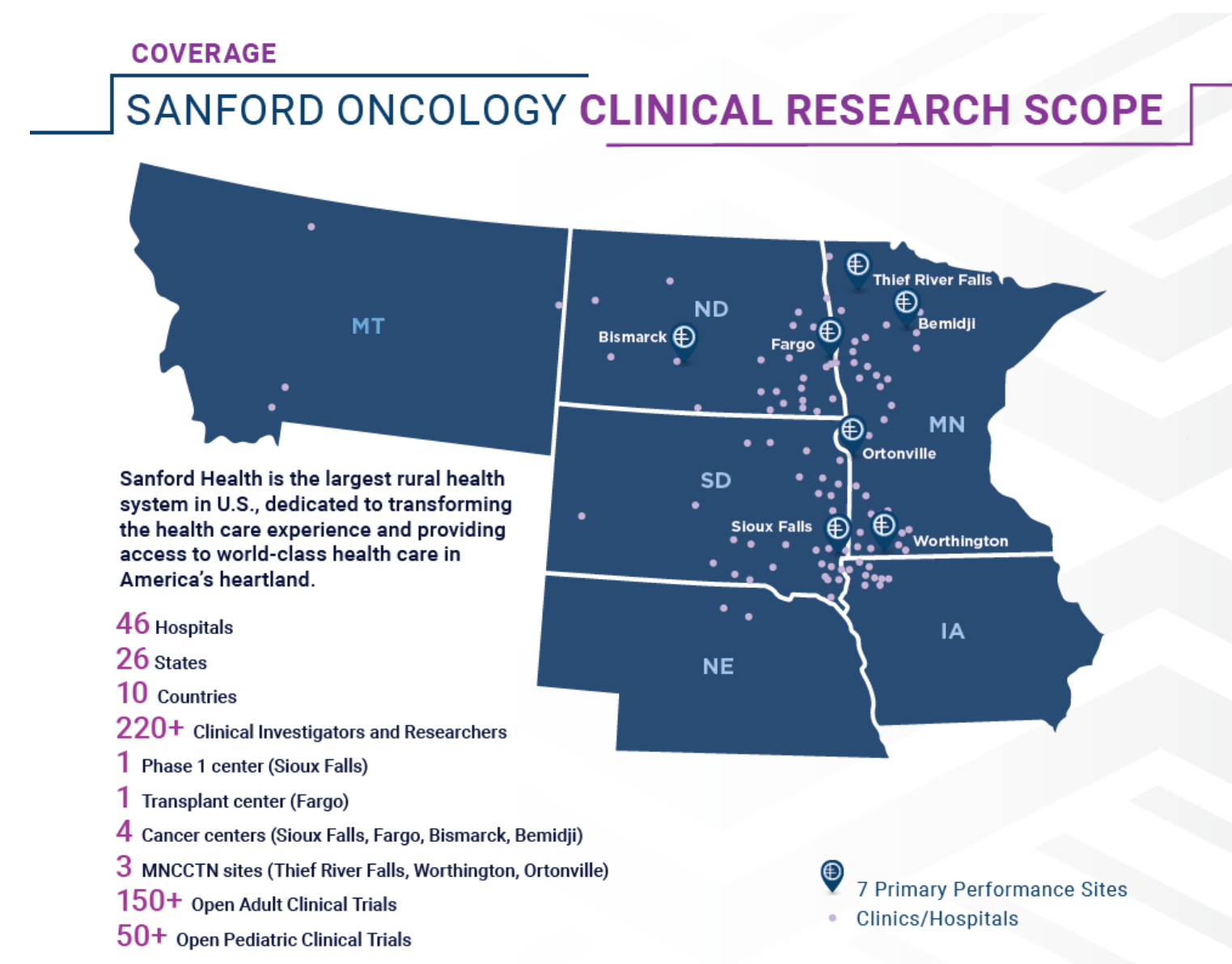
Decentralizing Clinical Trials for a Rural Population

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Background

Rural cancer patients (RCPs) account for approximately 15-20% of cancer diagnoses in the United States and experience reduced access to oncology specialists, increased travel burden, limited clinical trial availability, and socioeconomic barriers that negatively influence outcomes. In recent years, decentralized clinical trials (DCTs) have emerged as a key strategy to support a shift to improve RCP outcomes.

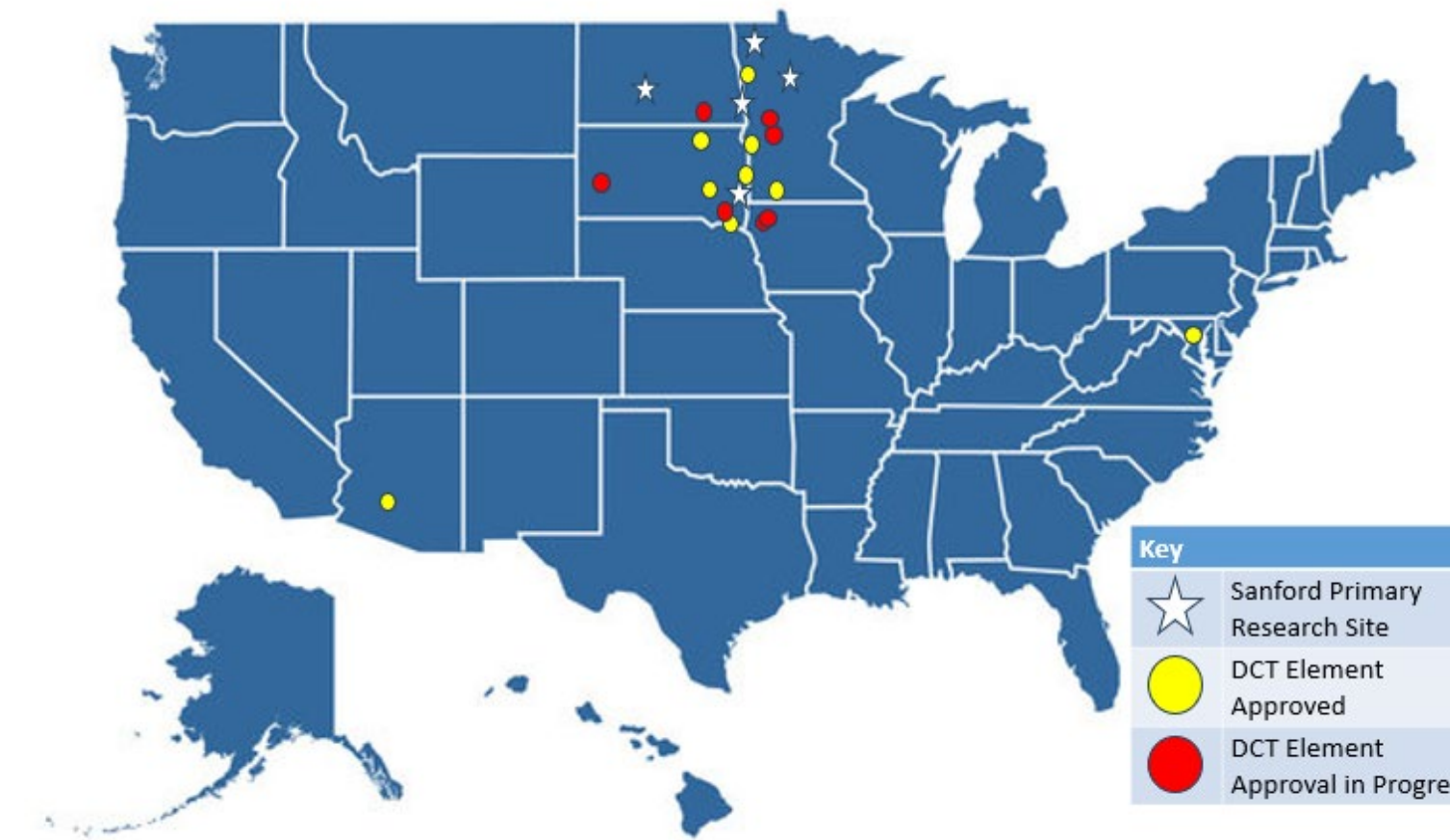
In September 2024, the U.S. Food and Drug Administration released guidance on conducting DCTs to facilitate implementation across research sites. Sanford Health has historically incorporated telemedicine into select clinical trials, particularly in gynecologic oncology, and is now expanding infrastructure to support broader integration of decentralized elements across its oncology clinical research portfolio.



Methods & Outcomes

In December 2024, Sanford Health launched the Sanford Virtual Care Center (VCC) to advance virtual healthcare delivery across rural communities. Through collaboration with the VCC, Sanford Clinical Research established a Decentralized Clinical Trial (DCT) Navigator role in September 2025. The DCT Navigator serves as a liaison among patients, clinical sites, and sponsors, facilitating participation in decentralized and hybrid trials through patient education, logistical coordination, and ongoing engagement to optimize participant experience, adherence, and protocol compliance.

Since September 2025, decentralized support has allowed eligible patients to complete select trial-related activities closer to home, including laboratory testing, imaging, clinic visits, and growth-factor support.



DCT Metrics as of May 2026

- 53 DCT Inquiries
- 16 Patients Supported
- 7,283.6 Miles of Travel Avoided
- 455.2 Miles Saved per Visit (average)
- 10 Oncology Trials Utilizing DCT Elements

Conclusions & Future Directions

Implementation of decentralized trial components requires rapid coordination and complex logistical planning to meet protocol-specified timelines. Early engagement with sponsors during study start-up, rather than post-activation, may improve feasibility and execution. Strengthening partnerships with rural healthcare providers and organizations experienced in decentralized research will be essential for continued growth.

As the DCT Navigator role matures, future evaluation will focus on patient satisfaction, rural enrollment expansion, and protocol compliance to demonstrate the effectiveness of decentralized approaches. Long-term goals include expanding access to more complex oncology trial procedures closer to home and pursuing fully decentralized trial models where appropriate.

- **Fast Facts**

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