Nursing Flowsheet
(serial specimen sampling and processing template)

Study: ________________________________
GCO#: __________
PI: __________________
Co-I: __________________
Research Coordinator: ________________

Date: ___________ Time: ________ Allergies: __________

☐ Confirm signed consent & HIPAA forms
☐ Contact study team upon patient’s arrival.
☐ Record last meal date: _______ & time: _______ (diabetics do not have to fast/non-diabetics should have fasted x 8hrs)
☐ VS (after sitting x 10 minutes) BP: _______ HR: _______ RR: _______ T: _______
☐ Ht: _______ Wt: _______ (no shoes)
☐ 24 hour urine: Date/Time start: _______________ Date/Time end: _____________ Volume:___________
   Aliquot 24 hour urine into yellow 2ml screw cap tube s x 2. (notify study team if urine collection is <24hrs). Store in -80°C freezer. Use CRU freezer label: u24A & u24B

   Use a graduated cylinder to measure the volume

☐ Urine Collection (for entire length of CRU visit):
   ▶ Time: _____ Discard first void then begin to collect urine for entire length of visit.
   ▶ Use first void for pregnancy test (♀ of child bearing potential only) positive negative N/A

☐ Time: _______ FS Glucose: ______ Notify study team if FS <70 or >200. N/A
☐ Time: _______ Insert _______G IV via _______ vein to saline lock for blood draws.
   ▶ 2ml green TT x 1 (provided by study team)
   ▶ 4ml LTT x 1
   ▶ 5ml gold TT x 2

☐ May eat after initial blood draw

Blood Processing: (use CRU freezer labels)
   ☐ green TT: Spin at 2000 G x 10 minutes, immediately aliquot 0.5ml plasma into clear 2ml screw cap tubes x 2 and store in -80°C freezer. Use CRU freezer labels: plasma ph +10, ph +30, ph +120, ph +240, ph +360
   ☐ LTT: Invert the tube then transfer 1ml into purple 2ml screw cap tubes x 2 and store in -80°C freezer. Use CRU freezer labels: whole blood wA & wB
   ☐ gold TT: Let blood clot x 30 minutes and spin at 2000 G x 15 minutes. Aliquot 1.5mls into red 2ml screw cap tubes x 3 and store in -80°C freezer. Use CRU freezer labels: serum sA, sB, & sC

☐ Anaphylactic kit at bedside

☐ Time: _______ Insert _______G butterfly needle via _______ vein to saline lock (in contra lateral arm). Use for study drug administration. Follow with Normal Saline 10ml flush then d/c butterfly needle.

☐ Syringe Weights obtained by study team:
   ▶ Empty syringe in wrapper (nearest tenth): _______ G
   ▶ Syringe with wrapper, red cap tip, & _______ (nearest tenth): _______ G
   ▶ Syringe, post-administration, with wrapper & red cap tip (nearest tenth): _______ G
- Notify study team if patient experiences any of the following: allergic reactions, sensations of warmth & pain, dizziness, lightheadedness, headaches, abnormal vision, nausea, diarrhea, abdominal cramps, anxiety, fever, unable to move & speak, seizure, coughing or sore throat.

- Give subject 6oz of water every hour.

- Patient activity is ad lib.

- D/C IV after last blood draw. Patient must stay for at least 30 min after the removal of the IV.

- VS (prior to d/c): BP: _______ HR: _______ RR: _______ T: _______

- Remind patient to void one last time prior to discharge. Time of last void: _______ and total volume: _______

  *Use a graduated cylinder to measure the volume*

- D/C home stable at TIME: ________

Urine processing for urine collected at CRU: (use CRU freezer labels) Study team will provide the additives (to be stored at CRU, room temperature, ideally not in direct sunlight).

- **Blue** 2ml screw cap tubes x 2: (neutral urine aliquots) transfer 2ml into each tube and store in -80°C freezer. Use CRU freezer labels: urine unA & unB

- **Green** 2ml screw cap tubes x 2: (acidified urine aliquots) transfer 2ml into each tube. Using the **P20** Pipetteman, add 12 microliters of **6 N hydrochloric acid** into the vial. Fasten the top to the vial and gently mix by inverting 8 times. Store in -80°C freezer. Use CRU freezer labels: urine ua A & ua B

- **Orange** 2ml screw cap tubes x 2: (alkaline urine aliquots) transfer 2ml into each tube (study team will provide these tubes). Using the **P20** Pipetteman, add 12 microliters of **1 N sodium carbonate** into the vial. Fasten the top to the vial and gently mix by inverting 8 times. Some precipitate may form, which is normal. Store in -80°C freezer. Use CRU freezer labels: urine ub A & ub B

<table>
<thead>
<tr>
<th>Time</th>
<th>Actual Time</th>
<th>Procedure</th>
<th>RN Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time 0</td>
<td></td>
<td>Administer _______ (_______), followed by Normal Saline 10ml flush, then d/c IV. End time of IVP: _______</td>
<td></td>
</tr>
<tr>
<td>+10 min</td>
<td></td>
<td>Draw 2ml green TT (provided by study team)</td>
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<tr>
<td>+ 30 min</td>
<td></td>
<td>Draw 2ml green TT (provided by study team)</td>
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<tr>
<td>+ 120 min</td>
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<td>Draw 2ml green TT (provided by study team)</td>
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<tr>
<td>+ 240 min</td>
<td></td>
<td>Draw 2ml green TT (provided by study team)</td>
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</tr>
<tr>
<td>+ 360 min</td>
<td></td>
<td>(if box was checked) Draw 2ml green TT (provided by study team)</td>
<td></td>
</tr>
</tbody>
</table>