

## The Mount Sinai Hospital Clinical Research Unit

## GENERIC FLOWSHEET

GCO	
DAT	:: *ALLERGIES:
	Arrive at CRU for
	Valid Consent & HIPAA form in Chart
	H & P completed by
	Vital Signs: B/P HR R T
	Htincm; Wtlbskg
	EKG done
	Jrine specimens done (please circle) U/A U-tox. Other
	Jrine pregnancy test (please circle) positive negative SG: (follow MSH policy if SG < 1.005
	After cleansing with alcohol, blood specimens drawn withgauge butterfly/angiocatheter viavein with/without difficulty. (List IV Fluid if applicable)
	The following specimens were drawn:
	Specimens processed, aliquotted, and placed in
	picked up by coordinator (total # of tubes)
	refrigerator (total # of tubes)
	20°C freezer (total # of tubes)
	80°C freezer (total # of tubes)
	D/C subject/patient home in no acute distress @ TIME:
CRU	staff signature: Title:

<sup>\*</sup> Allergies must be noted