## Patient Visit Priority List



#### While A Patient is On-site

- 1. Collecting data and entering into source
- 2. Processing any labs that need immediate attention (i.e. to be put on ice right away, etc)
- 3. Completing visit checklist items (copy of ICF if applicable, patient stipend entered and paid, schedule next visit in Google).
- 4. All paper source (ECG tracings, lab requisitions, etc.) are to be affixed AT ALL TIMES to a clipboard so they are not lost or placed with other patient's documents.

### After Patient Leaves (Same day)

- 1. Complete all lab processing and package for shipment.
- 2. Complete eSource including progress note and any additional documentation that still needs to be filled out.
- 3. Ensure payment check box is marked for patient stipend card.
- 4. Communicate any items to note about the visit to the PI as appropriate (if an AE occurred then speak with PI on the phone to give him/her the details and record their assessment of the AE (causality and severity) in the eSource.

# Items NOT to do on the same day unless all of the above have been completed

- 1. Check email. Email is non-essential and can wait until the above items are complete. Email is a distraction from the above and takes away the focus on our main priority.
- 2. Unpacking shipments- research receives a lot of supplies. Unless it is IP unpacking supplies can be done on another day and/or after the above items are complete. If the shipment is IP complete the above tasks and then ensure IP is unpacked on the same day it is delivered.
- 3. Calling patients back regarding other studies or other visits. Unless you're calling the patient you just saw the above "Same Day" procedures should be completed before moving onto another task.

### After Patient Leaves (Can be same day or anytime within 72 hours)

- 1. Scan in all paper source (ECG tracings, lab requisitions, IRT emails, ICFs) to applicable visit within CRIO.
  - a. Ensure proper "certified copy" procedure are completed for each of these.
  - b. Utilize common language for each form when uploading so forms are named and categorized with the same naming convention across the study. For example, if you use "Main ICF" as the label for Subject 1 don't switch to "Main Informed Consent Form" for Subject 2. This makes it easier for everyone to find the documents they need.
  - c. Also be sure to redact all PHI from these uploads using the CRIO redacting tool
- 2. Place ICF, patient registration form, and medical records release form in the patient tracking binder. All other paper source documents should be shredded. If you're more comfortable keeping them for a bit do not store them in the tracking binder but, rather a bin for old source waiting to be shredded.

## Patient Visit Priority List



- 3. Enter data into the Sponsor database. To split screen your view to assist with going between CRIO and the database click the window icon on your keyboard plus the right or left arrow depending on which side you want the screen to go.
- 4. Tag the PI on any forms that need his review (ECG tracings and lab results are the most common).