Protocol Order Worksheet

Protocol #: 839
Protocol Name: D&D
Diagnosis: IDDM

Visit Type: Visit 02
Allergies: PCN, Latex

Vital Signs:
B/P: mmhg  Pulse: (min)  Temp: c / f  Resp: (min)

Weight: kg / lbs  Ask participant to remove shoes before weighing  Finger Stick:

Local Labs:
CBC w/Diff
HA1c
Chem 8
Lipid Panel
Sertraline Level

Aliquot: All aliquot tubes and labels must be provided by Study Coordinators
3 Tiger Top Tubes
Clot, spin, and separate into 6 tubes

Aliquot Storage: Aliquots and storage boxes should be properly labeled
-70 Freezer

Procedures:
DEXA
EKG

Addendum: Physician’s Initials required

Physician’s Signature  Completed By:

SAMPLE ORDERS

Revised: 02/13/07