

GCRC (CR-Assist)  
Study Visit Setup form

Instructions: This form should be completed electronically or manually by the main study coordinator or the principal investigator. The form should be emailed [GCRC@emory.edu](mailto:GCRC@emory.edu). **Please complete one form for each study visit.**

**Study Visit Entry**

**All fields are required (Please do not alter this form)**

Study Name: (Acronym)  IRB#

Visit No.

Short Name:  (Visit 1, Visit 2, V1, V2, etc)

Long Name:  (Screening, Baseline, Follow up, blood draw etc)

Visit Type: Inpatient  Outpatient  Phone  Lab

Visit Class: Enrollment  Screening  Follow up  Completion  Non GCRC Visit

Duration in hours:  (0.5, 1, 1.5, 2, 2.5 etc) Fasting: Yes  No

GCRC has to approve visit: Yes  No   
Please choose yes if you will need GCRC resources (lab, nursing, bionutrition, etc.)

Automatically calculate appointment date:

Enable: Yes  No

No of days:  After visit: Enrollment  Screening  Follow-up  Completion  Misc

Location (check all that apply):

Grady  EUH  EUHM  ECC  CHOA-Egleston  MSM  Other location

Services needed by visit (check all that apply):

Grady lab  EUH lab  GCRC Lab  GCRC Metabolic Kitchen   
EUHM lab  Off-site nursing  Room Only

**For Emory Hospital site:**

Treadmill room  iDXA scan  Ultrasound room

Chair  or Bed