|  |  |  |  |
| --- | --- | --- | --- |
| **Participant ID:** |  | **Exam Date:** |  |

|  |  |  |
| --- | --- | --- |
| **Day Start Time:** |  | Enter the time of day (military time) that the participant arrived at clinic. |

**Clinic Visit Procedure Times:**

| **Procedure** | **Start Time** | **Stop Time** | **Minutes** | **Comments** |
| --- | --- | --- | --- | --- |
| Clinic Reception | : | : |  |  |
| Consent | : | : |  |  |
| Anthropometry | : | : |  |  |
| Seated BP/Oximetry | : | : |  |  |
| Biosample Collection | : | : |  |  |
| Environmental Exposures Questionnaire | : | : |  |  |
| Medical History Questionnaire | : | : |  |  |
| Medications | : | : |  |  |
| Personal History | : | : |  |  |
| Neighborhood Questionnaire | : | : |  |  |
| Health and Life | : | : |  |  |
| Sleep Questionnaire | : | : |  |  |
| Family History | : | : |  |  |
| Cognitive Testing | : | : |  |  |
| Arterial Stiffness | : | : |  |  |
| Spirometry | : | : |  |  |
| Short Physical Performance Battery | : | : |  |  |
| UDS Physical Exam | : | : |  |  |
| Continuous Glucose Monitoring Instructions & Application | : | : |  |  |
| Hip Activity Monitor Instructions & Application | : | : |  |  |
| Wrist Activity Monitor Instructions & Application | : | : |  |  |
| Heart Monitor Instructions & Application | : | : |  |  |
| 24H ABPM Instructions & Application | : | : |  |  |
| Participant Diary Instructions | : | : |  |  |
| xit Report | : | : |  |  |

|  |  |  |
| --- | --- | --- |
| **Day End Time:** |  | Enter the time of day (military time) that the participant left for the day. |

**Home Visit Procedure Times:**

**Exam Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Start Time** | **Stop Time** | **Minutes** | **Comments** |
| Sleep Study PSG Questionnaire | : | : |  |  |
| Sleep PSG Instructions & Application | : | : |  |  |