

## Every visit, every study, every day. One hub, built for coordinators.

CRC-Hub turns each protocol into complete checklists and a live, resource-aware schedule the team works from. AI sets a study up in minutes, and it runs alongside your CTMS, eSource, and EDC — or on its own, if the site still runs on spreadsheets and paper.

## Checklists: where a study becomes work

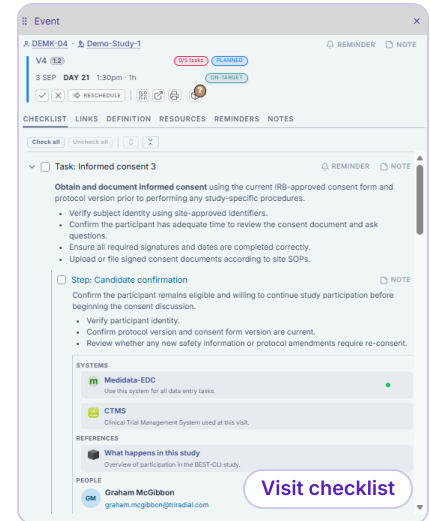
Checklists Tasks Steps

Checklists are the foundation. Every visit gets one, built from the protocol, manuals, SOPs, and the site's own know-how, holding what the visit actually takes.

- Every task and step, in order, with its timing
- The system, document, or person the step needs
- Site know-how, on the step it belongs to
- Roles, timing, and delegation of authority
- Printable, and linked back to the app

Experience isn't what prevents missed steps. A checklist is:

- ✓ Frees the mind for the unexpected
- ✓ Catches the missed step
- ✓ One standard way of working, team-wide
- ✓ Know-how stays when staff move on



## Scheduling for the work no other system covers

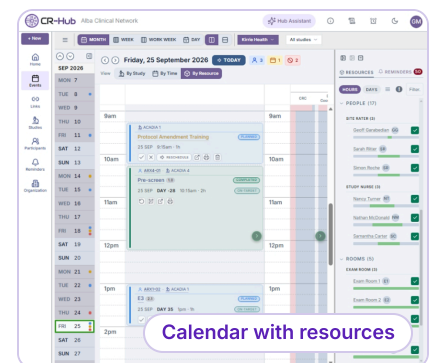
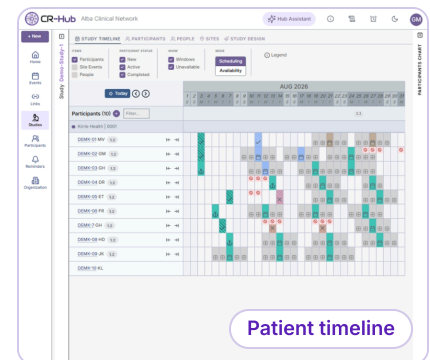
Roles Rooms Equipment Delegation of authority Working hours

A CTMS, if you have one, schedules what's billable. The real complexity is everything else: finding a slot for a pre-screen or screening visit, then flowing that patient smoothly into an auto-generated schedule of every visit. CRC-Hub manages all the team's day-to-day work, minute by minute.

CRC-Hub re-plans as visits shift or slip, and catches clashes at booking. Automatic and manual reminders form a task-board inside the trial schedule, with every open item on the right day.

Billable isn't the day. A schedule is:

- ✓ Factors in every constraint
- ✓ Keeps up when a visit shifts
- ✓ Tied to that visit's checklist
- ✓ One day, across every study

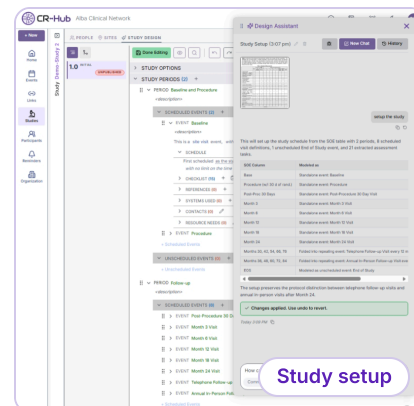


## AI + Guided Editing: A new study is live in minutes

Building checklists and schedules has always meant days of work before a patient is seen, and doing it again with every process change or amendment.

The Assistant AI reads your protocol, manuals, SOPs and training material and drafts the whole study: every visit, window, task and step.

Hours of setup become minutes.



### 1 AI drafts it

From the documents you already have. No blank page, no spreadsheet to fill in.

### 2 You refine it

In plain language. The guided editor is the language of a CRC for even the most complex trials.

### 3 You see it run

Change a rule and the schedule updates instantly, for any real or what-if patient.

First scheduled when Post-Procedure 30 Day Visit has any state + 15 days  
with a window of 3 day(s) before and 3 day(s) after  
and a compliance window of 1 additional day(s) before and 1 day(s) after  
repeats biweekly up to 3 times until condition  
starting after 3:00 PM

It reads like a sentence, and it is exactly what runs. The AI does the heavy lifting to a draft; the CRC makes the judgment calls.

## Built for CRCs. Not adapted for them.

|                   | CTMS, spreadsheets & paper             | CRC-Hub                                            |
|-------------------|----------------------------------------|----------------------------------------------------|
| <b>Built for</b>  | Billing, compliance, reporting         | The coordinator's day, every day                   |
| <b>Scheduling</b> | Visit due dates                        | People, rooms, equipment and DOA, minute by minute |
| <b>Change</b>     | Validated, deliberately hard to change | In minutes, by your team, fully versioned          |
| <b>Daily use</b>  | Periodic, form-based                   | Continuous via mobile, laptop, paper               |
| <b>Your data</b>  | Your records, wherever they live       | Links to them — never re-keyed                     |

### Built for site networks

Run the same study at every facility, each with its own staff, rooms and processes.

- One study design, local variations
- Network-wide view of capacity
- Staff shared across sites, booked once

## Start with one study. Grow at your own pace.

### 1 Pick a current study

Send us the protocol, manuals and SOPs. We'll build the schedule and checklists with you, in minutes.

### 2 Run it alongside today's tools

No CTMS? You're up and running the same day. Have one? CRC-Hub links to it. Paper-based? Print it.

### 3 Add every study, every site

Bring in each active study, then every facility in your network. No re-implementation.

