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| **Date:** | |  | | | | |
| **IRB Protocol # of non-exempt or expedited:** | | | | |  | |
| **Study Title:** | | |  | | | |
| **Researcher’s Name:** | | |  | | | |
| **Completion/Closure Date:** | | |  | | | |
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| |  |  | | --- | --- | | **# Subjects Proposed for Study** |  | | **# Subjects Enrolled** |  | | **# Subjects Withdrawn After Enrollment** |  | | **# Subjects Completed** |  | | **# Serious Adverse Events** |  | | | | | | | |
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| |  | | --- | | **Reason for closure: (i.e., end of study, accrual met, etc.)** | |  | | **Briefly describe any Serious Adverse Events (SAEs) or unanticipated risks encountered in this research. Use separate page if needed.** | |  | |  | |  | |  | | | | | | | |
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| **IRB Response:** | | | | | | |
| **Final Report Received** | | | | | | |
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| **Comments:** | |  | | | | |
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| **Signature:** |  | | | **Date:** | |  |