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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| **# Subjects Withdrawn After Enrollment** |  |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** |
|  |
| **Comments:** |  |
|  |
| **Signature:** |  | **Date:** |  |