

Study Completion Report Form

(To be filled by Principal Investigator)

IRC Proposal No.				
IEC Proposal No.				
Review Date				
Study title				
Principal Investigator (with affiliation)				
Study site				
Study completed as per protocol approved by IEC	YES		NO	
Study duration				
Study start date				
Study completion date				
Any amendments/modifications done in IEC approved research protocol	YES		NO	
If Yes, whether it was communicated to IEC prior to its implementation	YES		NO	
Protocol deviations/violation (Number and Nature)				
Total no. of study participants approved by the IEC for recruitment				
Total no. of participants recruited				
No. of patients withdrawn				
Reasons for withdrawal				

Objectives of the study					
Results (Summary) with Conclusion (Use separate sheet, if more space is required)					
No. of SAEs at our Center					
Whether all SAEs were reported to IEC	<table border="1"> <tr> <td>YES</td> <td></td> <td>NO</td> <td></td> </tr> </table>	YES		NO	
YES		NO			
Signature of Principal Investigator with Date & Seal (for student's project: signatures required of both student and guide)					