

Date Received in Office: _____

CONTINUING REVIEW FORM
For Expedited and Full Review Research

Project Title:

IRB #: _____ Investigator Name(s): _____

Expiration Date: _____ Original Type of Review: Expedited Full

1) Research Study Status (check one):

Work has not started (no subjects recruited), state reason:

Active project (subject enrollment and/or involvement continues)

Data analysis only (there will be NO additional subject contact)

2) Subject (and Control) Status Report:

- | | | |
|---|-----|----|
| a. Are subjects still being enrolled? | Yes | No |
| b. Number of subjects enrolled to date: | | |
| c. Number of subjects proposed for coming year: | | |
| d. Is the total number of subjects (and controls) different than in the original approved application (if YES, please explain): | Yes | No |

3) Is the project financially supported?
(if YES, funding source): _____ Yes No
(if externally funded, attach a copy of the annual report to the agency)

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4) Report briefly on the progress of the research to date and/or on the research findings.

5) Since the last review were there any:

a. Adverse events or unanticipated problems involving risks to subjects or others Yes No
(if YES, explain):

b. Subject withdrawals from the research Yes No
(if YES, explain):

c. Complaints about the research? Yes No
(if YES, explain):

6) Were there any amendments or modifications since the last review? Yes No
(if YES, attach updated materials)

7) Were there any changes to the consent documents? Yes No
(if YES, describe):

SIGNATURES:

I certify to the best of my knowledge the information provided herein is an accurate reflection of the research study and the research will continue to be conducted in full compliance with Federal Regulations and University of Central Arkansas policies and procedures governing human subject research.

Signature of Investigator

Date

Signature of Investigator

Date

Signature of Investigator

Date

Signature of Investigator

Date

Signature of Research Advisor (if the above are students)

Date