**PROJECT COMPLETION REPORT FORM**

**(To be filled by Principal Investigator)**

|  |  |
| --- | --- |
| IHEC Project No.:  |  |
| Project Title:  |  |
| Principal Investigator  | **Co-investigator:** |
| Department  |  |
| Major project  | Minor project | In-vitro study | In-Vivo study |
| Duration of the study  |  |
| Date of completion of study |  |
| Objective as approved |  |
| Deviations made from original objectives |  |
| Total no. of study participants recruited /sample size as approved by IHEC |  |
| No. of patients withdrawn |  |
| Reasons for Withdrawal of Patients |  |
| Any deviations in the protocol (methodology, change in study rationale) |  |
| Number of Serious Adverse Events (SAES) reported during the study |  |
| Whether all SAEs intimated to the IHEC | Yes No |
| Is there a change in guide? **If yes attach letter with signature of guide** | Yes No |
| Publications / presentations, if any |  |

**Note: To submit an abstract of the completed study (Introduction/ Rationale, Objectives, Materials & methods, Results, Benefits of the study & Conclusion), achievements & indications of scope for future research and a report on Presentations/ publications if any**

**Undertaking**: I hereby declare that contents of the soft and hard copies of this document submitted to the IHEC are the same and is true to my knowledge

Dated Signature of Principal Investigator: Signature of Guide: