Continuing Review

Save all attachments in the following format (IRB#- PI Last Name- Document Name)

- ☐ **Continuing Review / Final Report Form (CR-FORM)**
- ☐ **Copy of the Current Protocol (PROTOCOL VERSION # AND/OR DATE)**
- ☐ **Current Clean Version of the Informed Consent (CC IC VERSION # AND/OR DATE)**
- ☐ **Copy of Protocol Deviation Reporting Log (if applicable) (PRTCL DEV LOG)**
- ☐ **Study Results and/or Publications (STUDY RESULTS)**
  - ☐ **Check if N/A**
- ☐ **Submit copies of all monitoring reports not previously submitted to the IRB (if applicable)**
  - ☐ **Check if N/A**

Final Report Checklist

- ☐ **Continuing Review / Final Report Form (FINAL-FORM)**
- ☐ **Copy of Protocol Deviation Reporting Log (if applicable) (PRTCL DEV LOG)**
- ☐ **Study Results and/or Publications (STUDY RESULTS)**
  - ☐ **Check if N/A**

Investigators should e-mail completed continuing reviews or final reports and supporting documentation to irb_hrpp@trihealth.com.

If your submission is incomplete, processing will be delayed.

Version: 1/21/2016