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| Principal Investigator |  | IRB # |  |

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| Protocol Title |  |

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|  | **Document Title** | **Date sent to IRB**  **(mm/dd/yyyy)** | **Date of IRB approval or Response**  **(mm/dd/yyyy)** | **Affect Consent/Assent** | **Changes or reason for the revision** | **Comments** |
| 1 | Initial  Submission |  |  | Yes  No |  |  |
| 2 |  |  |  | Yes  No |  |  |
| 3 |  |  |  | Yes  No |  |  |
| 4 |  |  |  | Yes  No |  |  |
| 5 |  |  |  | Yes  No |  |  |
| 6 |  |  |  | Yes  No |  |  |
| 7 |  |  |  | Yes  No |  |  |
| 8 |  |  |  | Yes  No |  |  |
| 9 |  |  |  | Yes  No |  |  |
| 10 |  |  |  | Yes  No |  |  |

Reasons: Amendment Final report

Other Annual report

Change in protocol

Continuing reviewing