Research Study Progress Report Form

Please submit one soft copy and one hard copy of this form along with all supporting documents to the Member Secretary.

1. Research Protocol ID No.:
2. Title of Research:
3. IEC approval date:
4. Name and Designation of Principal Investigator and Address for communication (including telephone and fax numbers and email id):
5. Study Design:
6. Clinical Trial Registry- India (CTRI) Registration Number: (if applicable)
7. Start Date:
8. Expected date of completion:
9. Aims, Objectives and Scope of research:
10. Summary of the work done to date: (state numbers of participants recruited, number completed, interim analyses etc):
11. Protocol deviations: (Report deviations from the study protocol with reasons)
12. Adverse events (All important adverse events or side effects recorded so far):
13. Special concerns: (are there any concerns such as low recruitment rates, difficulties with standardizing procedures or tests, safety issues, or other problems that are likely to impede research?).
14. Signature of Principal Investigator