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| THE HONG KONG POLYTECHNIC UNIVERSITY**PolyU Institutional Review Board** Research Interim / Completion\* Report *(\* Please delete as appropriate.)* |
| Please complete and return this form to Miss Cherrie Mok by email (cherrie.mok@polyu.edu.hk) before the due date. You can refer to the [Handbook for Projects and Grants](https://www.polyu.edu.hk/ro/download-corner/handbook-and-guidelines/) for more details on the reporting requirement. |

**Section A: General Information**

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| --- | --- |
| 1. Project Title: |  |
|  |  |
| 2. Funding Scheme (Please tick the appropriate box below) |
|  |
|  | RGC General Research Fund (GRF) |  | Research Fund for the Control of Infectious Diseases (RFCID) |
|  |  |
|  | RGC Collaborative Research Fund (CRF) |  | Health and Medical Research Fund (HMRF) |
|  | Others. Please specify:  |  |
|  |  |  |
|  |  |  |  |  |
| 3. Project Duration (dd-mm-yyyy): | Start Date: |  | End Date: |  |
|  |  |  |  |  |
| 4. Human Subjects Ethics Approval Reference Number (HSEARSyyyymmddxxx) : | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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**Section B: Report**

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| --- | --- | --- | --- | --- |
| 5. Report Period\*\*:  | Start Date: |  | End Date: |  |
| (dd-mm-yyyy) | (dd-mm-yyyy) |
|  |  |
| *(\*\* For interim report, the period should be from the start date of the project to half of the approved project period. For completion report, the period should be the whole approved project period.)* |
| 6. Maximum number of participants/ samples/ records planned (local): | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
| 7. Number of subjects who have completed study: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
| 8. Number of subjects recruited: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |
| 9. Number of subjects withdrawn: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |  |
|  Withdrawal reasons: |  |
|  |  |

10. Summary of Serious Adverse Events (SAE), if any:

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| 11. Does the SAE affect the study, and how? |  | Yes |  | No |
|  |  |  |  |  |
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12. Summary of Complaints from Subjects, if any:

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13. Study Duration

|  |  |  |  |  |  |
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|  | According to schedule |  | Extended |  | Premature termination |

14. Summary of Study Outcomes:

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**Section C: Public Disclosure of Clinical Trial\*\*\***

\*\*\* When you applied to IRB for human subjects research ethics approval, you were strongly advised to register your trial through the Clinical Trials Unit at the University of Hong Kong ([www.hkuctc.com](http://www.hkuctc.com/)) or with US National Institutes of Health (NIH) ([www.clinicaltrials.gov](http://www.clinicaltrials.gov/)) if your study is a clinical trial.

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| --- | --- | --- | --- | --- |
| 15. Is this study a Clinical Trial? |  | Yes |  | No |
|  |  |  |  |  |
| 16. This clinical trial is registered in a publicly available, free to access, searchable clinical trial registry |  | Yes |  | No |
|  |  |
| 17. Name of the clinical trial registry |  |
|  |  |
| 18. Registry identifier code/number for this clinical trial |  |
|  |  |
| 19. Main findings are to be submitted for publication in a peer reviewed journal within 12 months after study completion; OR made available publicly within 24 months of study completion Is this study a Clinical Trial |  | Yes |  | No |
|  |  |
| 20. Key outcomes are to be made available publicly within 12 months of study completion by posting to the results section of the primary clinical trial registry, or a free-to-access, publicly available and searchable institutional website where the registry used does not constitute a result database for key outcomes posting |  | Yes |  | No |

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| Report by: | Name | Signature | Date |
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