





#### RESEARCH ETHICS BOARD FOR HUMAN SUBJECTS

# End of research project notice

SECTION 1 – GENERAL INFORMATION		
1.1 Date of submission of notice:	Click here to add date	
1.2 Short title (if applicable):	Short title	
1.3 Complete project title :	Complete project title	
1.4 Case number :	Case number	
1.5 Principal investigator	Principal investigator	
Establishment :	Establishment	
Postal code :	Postal code	
Telephone:	Telephone	
Email:	Email	
1.6 Project support person (e.g., student, post-doctorat)	First and last name	
Establishment :	Establishment	
Telephone:	Telephone	
Email:	Email	
1.7 Approval date :	Click here to enter the date	
1.8 Approval end date :	Click here to enter the date	
1.9 Project end date :	Click here to enter the date	

## SECTION 2 – RESEARCH PROJECT INFORMATION

1 Has the project taken place?	
No	
Yes	
not, please explain :	
nswer	

## 2.2 If the project required the recruitment of research subjects:

2.2.1 Indicate the proposed number of research subjects to be recruited.

Answer		

Date 1







2.2.2 Indicate the number of research subjects actually recruited.

	Answer
	AMOVO
	2.2.3 Indicate if there is a significant difference between 2.2.1 et 2.2.2., please explain.
	Answer
	2.2.4 Indicate the number of research subjects withdrawn from the project.
	Answer
_	the project involved only the review of medical records or the usage of red biological specimens, how many records or specimens were evaluated?
Answe	er
2.4 Di	d the project end earlier than what was proposed?
	No Yes
If yes:	
	End date of research project: Click here to add date Why?
	Answer
c)	Please describe how the research subjects were informed of the premature ending of the project.
	Answer
d)	Have the research subjects been informed of potential risks associated with the premature ending of the project (if applicable)?
	<ul> <li>□ No</li> <li>□ Yes</li> <li>□ NA</li> </ul>
e)	Is a clinical follow-up anticipated for the safety and well-being of the research subjects?
	<ul><li>□ No</li><li>□ Yes</li><li>□ NA</li></ul>
If y	yes, indicate the number and the main reason (if known):
A	nswer
<b>2.5 Pa</b> etc.):	rticular reports (e.g., recruitment difficulties, unexpected adverse events, ambiguities,

Date 2







#### **SIGNATURE**

By signing this form, I agree that all information in this form is truthful and at the best of my knowledge. I also agree that I am responsible for the storage of all data documentations pertaining to the aforementioned research project for a period of 5 years (starting at the end date of the research project).

The signees attest that all researchers implicated in the submission has revised the form and approved its content. **Signature of Principal Investigator Date** Name (printed) I confirm that if the ethics approval submission was written by a student, research student or postdoctoral student, I revised the form before submission to the Research Ethics Board. **Signature of supportive Investigator** (if Principal Investigator is a student) Date Name (printed) For the Ethics Office use only **Approval:** □ Full REB □ Delegated Evaluation **Ethics Office Manager** 

Date 3