UGANDA CANCER INSTITUTE RESEARCH AND ETHICS COMMITTEE

Date received: _____

REC Form 105

STUDY TERMINATION FORM

This form will constitute your notice of termination and final report to the REC and UNCST. Submit this form and the information requested prior to the expiration date for the protocol.

Note: In order to terminate REC approval, all research related to this protocol must have ceased, including subject enrollment, subject follow-up, and work with identifiable information related to the study subjects, including medical or research records. Data analysis utilizing identifiable data collected from study subjects requires REC approval. If you are performing data analysis, you must submit the Continuing Review application.

It is the responsibility of the Principal Investigator to notify all study personnel associated with this protocol that it has been terminated.

Table 1: STUDY IDENTIFYING INFORMATION AND PI CONTACTS

UCIREC Protocol #:	Effective Date of withdrawal: *(Must be on or before expiration date.)*	
Study Title:		
Principal Investigator: Name : Phone: email:		
Site/Institution investigator: Name: Phone: email:		
Study Sponsor:		
Report prepared by:		

Table 2: STUDY INFORMATION

Total number of subjects enrolled since start of the study? (May be for more than one year)	☐☐☐
How many subjects have voluntarily withdrawn participation in the study at their own request?	☐☐☐
How many subjects have withdrawn participation at the request of the PI?	☐☐☐
How many serious adverse events have occurred at your site(s)? (deaths, serious incidents, significant adverse events)	☐☐☐
How many serious adverse events have occurred for entire study? (If multi-site)	☐☐☐
Have there been any significant new findings (either good or bad) that should be disclosed to subjects who participated in the study	Check one: ☐ Yes ☐ No
If yes, explain briefly about the outcome and any plans for informing subjects. …… …… …… …… …… …… ……	

Principal Investigators'	Primary : Co – Investigators'
Signature :	Signature:
Print Name :	Print Name: