

Institutional Ethics Committee



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FORM NO: 32 STUDY COMPLETION REPORT TEMPLATE

IEC Protocol Code	
Protocol No.:	
Principal Investigator:	
Protocol Title:	
Date of Final IEC Approval	
Phone number: E-mail address:	
Study site(s):	
No. of Participants as each site:	
Study Design and Sample Size:	
Objectives:	
Duration of the study:	
Total Number of study participants:	
Study dose(s):	
Provision for follow-up of patients:	
Whether the study samples are being retained for future use:	
Outcome and Implications of the Study:	
Presentations (If any):	
Date and signature of the PI	