

Progress Report Form

MMERC Protocol No.		Approval Date	
Protocol Title			
Investigator		Sponsor	
Type of Review	<input type="checkbox"/> Full Board <input type="checkbox"/> Expedited		

Summary of protocol participants:

- ☐ Accrual ceiling set by ERC
☐ New participants accrued since last review
☐ Total participants accrued since protocol began

	YES	NO	REMARKS
1. Any amendment since the last review?			<i>Describe briefly:</i>
2. Any change in participant population, recruitment or selection criteria since the last review?			<i>Explain the changes:</i>
3. Any change in the Informed Consent process or documentation since the last review?			<i>Please explain:</i>
4. Is there any new information in recent literature or similar research that may change the risk/ benefit ratio for participants in this study?			<i>Discuss and attach a narrative:</i>
5. Any unexpected complication or side effect noted since the last review?			<i>Discuss and attach a narrative:</i>
6. Did any participant withdraw from this study since the last approval?			<i>Reasons for withdrawal:</i>
7. Any new investigator that has been added to or removed from the research team since the last review?			<i>(Please identify them and submit the CVs of new investigators.)</i>
8. Are there any new collaborating sites that have been added or deleted since the last review?			<i>Please identify the sites and note the addition or deletion:</i>

Impaired Participants:

- ☐ None
☐ Physically
☐ Cognitively
☐ Both

(to be filled-out by MMERC)

Received by: _____

Name and Signature

Date Received: _____

Comments of Primary Reviewer: _____

FOR MMERC

RECOMMENDATION

Decision	<input type="checkbox"/> Approved <input type="checkbox"/> Request Information, Specific; _____ <input type="checkbox"/> Require Specific Action, Specific; _____ <input type="checkbox"/> Disapproved	
Reviewer's Name		Date
Signature		