

Institutional Ethics Committee



KLE Academy of Higher Education and Research
(Nehru Nagar, J.N.Medical College campus, Belagavi 590010, India)
KLES Dr.Prabhakar Kore Hospital, Belgaum-590010, Karnataka State India
1: 0831-2470400 www.kledeemeduniversity.edu.inE mail:kleclinicalresearch@gmail.com

FORM NO: 31 ANNUAL REPORT TEMPLATE FOR THE SITE

Sl.No	Particulars	Filled by the Investigator
1.	IEC protocol code	
2.	Protocol No: and Version & date	
3.	Protocol Title:	
4.	Principal Investigator:	
5.	Name of the Co-Investigator:	
Study status		
6.	Study duration	
7.	PI Presented to IEC Meeting Date	
8.	Date of Final Approval	7
9.	Date of Study initiation (SIV)	
10.	Date Amendments and its approval if Any	
11.	Financial Status	
12.	Objectives	
	Study participants status at site	
13.	Sample size	
14.	Screened	
15.	Randomized	
16.	Drops outs/ screen failures	
17.	Ongoing	
18.	Summary of the work done (preferably in 01 paragraphs):	
19.	Study follow ups	
20.	AE/SAE	
21.	Completion/Termination of the study – date	
22.	Protocol deviation and violations:	
23.	Next due for the study Approval:	
24.	Name & Signature of the Principal Investigator with date	