



QAS RESEARCH PROJECT STATUS REPORT

| | |
|--|--|
| Name of Project | |
| Chief Investigator/s (And organisation/s) | |
| Collaborating Organisation/s | |
| Funding (Funding body and amount) | |
| Period covered by status report | |
| Project Start Date | |
| Original expected completion date | |
| Current expected completion date | |

| | |
|---|--|
| <p>Have there been any protocol changes since the project started?</p> <p><i>(If yes-please attach a copy of the current protocol with changes highlighted)</i></p> | |
| <p>Have there been any changes to the Ethics Approvals</p> <p><i>(List committees and dates and please send a copy of all ethics approval certificates not previously supplied)</i></p> | |
| <p>Publications / presentations</p> <p><i>(Please list any publications / presentations arising from the project and attach a copy of all publications)</i></p> <p>*Note <u>ALL</u> prospective publications must be sent to QAS for review prior to submission</p> | |

| Data Collection | | Date |
|-----------------------|--------------------------|------|
| Has commenced | <input type="checkbox"/> | |
| Is ongoing | <input type="checkbox"/> | |
| Has been completed | <input type="checkbox"/> | |
| Has not yet commenced | <input type="checkbox"/> | |
| Comment: | | |

| Subject Recruitment | This quarter | Total project |
|---|--------------|---------------|
| Time period | | |
| Number of subjects expected in trial | | |
| Number of subjects recruited into trial | | |
| Comment: | | |

| Adverse Events | This quarter | | Total project | |
|---|------------------------------|-----------------------------|------------------------------|-----------------------------|
| Time period | | | | |
| Have any adverse events or findings arisen during the course of this study? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| If yes, have QAS and the relevant ethics committee been notified? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Please provide details for this period (or those not yet reported): | | | | |

| Other information |
|---|
| <i>Please provide a description of the current project status including results and any issues to date. If the project timeline has changed please indicate and state reason:</i> |