

HANDWRITTEN FORMS WILL NOT BE ACCEPTED

SOUTHEASTERN UNIVERSITY INSTITUTIONAL REVIEW BOARD		
CONTINUATION/RENEWAL FORM		IRB Number
SUBMIT THIS FORM A MINIMUM OF 6 WEEKS PRIOR TO THE EXPIRATION DATE TO ALLOW TIME FOR PROCESSING		
Title of Project:		Expiration Date
Principal Investigator(s): <i>I acknowledge that this represents an accurate and complete description of the research.</i>		
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Name of PI (typed)	Signature of PI	Date
Department	College	
PI's Address (Street, City, State, Zip)	Phone	E-Mail
Required IRB Training Complete: <input type="checkbox"/> Yes <input type="checkbox"/> No (Training must be completed before application can be reviewed)		
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Name of Student Investigator (if applicable)	Signature of Student Investigator	Date
Department	College	
PI's Address (Street, City, State, Zip)	Phone	E-Mail
Required IRB Training Complete: <input type="checkbox"/> Yes <input type="checkbox"/> No (Training must be completed before application can be reviewed)		
<i>If there are additional investigators, provide information on a separate additional principal investigators form.</i>		

1. Do you propose any changes in principal investigators for the research during the next continuation period?

Yes No

If yes, list changes, submit vitae and explain why the changes were made.

2. Research Activity Status

- New subject enrollment still in progress
- Enrollment closed, but subjects are still undergoing study procedures.
- Enrollment closed, subjects have completed study procedures, but are still in follow-up
- Subject involvement completed, need approval for data analysis of **identifiable** data only

3. Subject Status

Number of subjects approved in original application: _____

Number of additional subjects approved in previous modifications/continuations (if any): _____

Are more subjects than currently approved needed/desired? If so, how many? _____

Number of subjects actively enrolled in study: _____

Number of subjects that have completed the study: _____

4. Summarize the purpose of the research, as originally approved, to include description of the study population, sample procedures and methodology.

5. Thoroughly describe your research progress to date including the reasons for continuing the research. Sufficient information is required in the summary so that the IRB can determine whether the research continues to fulfill the criteria for approval.

6. (a) Has the research protocol been modified from that originally approved by the IRB?

Yes No

(b) If yes, please summarize changes.

(c) Did you submit these changes to the IRB as a modification to the original protocol?

Yes No

7. Describe **in detail** any new changes to the currently approved protocol that you plan to implement in the next year and explain why each change is being requested. Attach copies of any new or revised instruments for review.

8. Describe any changes in the risks or benefits to subjects that have been identified during the previous approval period or that may result from any proposed changes.

9. Are you continuing to recruit participants? Yes No

If **yes**, please submit clean copies of the documents (flyers, letters, emails, etc.) to be used for recruitment during the next continuation period.

10. Are you currently using a written consent/assent form? Yes No

If yes, please submit a copy of the **current** informed consent document(s) (with the IRB approval stamp).

Also submit for IRB approval a clean copy of the consent document(s) (with no IRB approval stamp), with any necessary or desired changes.

If no, please explain how you are ensuring that subjects are giving voluntary consent to participate in the research.

11. Reportable Events

(a) Have any adverse events or unanticipated problems involving risks to subjects or others occurred during this last reporting period? Yes No

If yes, were these events previously reported to the IRB? Yes No If No, download the form from the IRB website, complete it and send it to the IRB@seu.edu with this continuation/renewal form.

12. Have any subjects withdrawn or been withdrawn from the research?

Yes No

If yes, state how many have withdrawn and describe the circumstances

13. Have there been any complaints about the research during this last reporting period?

Yes No

If yes, please report and summarize the complaints and your response/action.

14. Has new/additional funding for this activity been awarded?

Yes No

If yes, submit one complete copy of the statement of work and explain if there are any differences between this new award and what is approved in this application. Additionally, complete the information

requested below for each **new** funding source:

Funding Agency:

Principal Investigator (on proposal):

Routing Number:

Start Date:

End Date:

Funding Agency:

Principal Investigator (on proposal):

Routing Number:

Start Date:

End Date:

Funding Agency:

Principal Investigator (on proposal):

Routing Number:

Start Date:

End Date:

Submission Address:

IRB@seu.edu

For assistance, please contact the IRB staff at IRB@seu.edu