

Request for Discontinuance of Study UTPB Institutional Review Board (IRB)

Identifying Information

IRB reference number _____
Principal Investigator name _____
Faculty supervisor (if applicable) _____
Mailing address _____
Phone and email _____
Title of approved study _____
Original approval date _____ Approval expiration _____
Funding status Unfunded Funded Contributed to a funding application

Subject Recruitment and Participation

Please complete the following questions about your study. If data collection or analysis is ongoing, please file a Project Update form. If data is being retained indefinitely, but not currently being used for research, please submit a new IRB application at any point that the data will again be used for research purposes.

Status of data gathered

**Please check one.*

All physical and electronic data has been destroyed.

Data does not contain personally identifying information, and is being stored indefinitely by PI.

**If such data is not currently being used for research, please submit a new IRB application before again using the data for research purposes.*

Data contains personally identifiable information and is being retained.

**Please describe ongoing data security procedures in the space below.*

Other

**Please attach documentation to explain.*

Outcome of study

Please describe known outcome(s) of the study.

Did any reported or unreported adverse events occur during the course of the study?

**If yes, contact IRB chair for further guidance.*

Please describe the finished product of the research, including course papers, completed or expected presentations, publications, or other products.

Signature of principal investigator(s)

Date

Electronic submission of this form by PI indicates signature.

This box for IRB use only.

Received by: _____

Date: _____

Approved: _____

Date: _____