University of Portland Institutional Review Board for Research Involving Human Subjects

IRB Study Continuing Review/Revision Form

Completion of this form is required at least annually for all active studies¹. Please attach any revised materials. Revision means any change to the study protocol, consent form, or any supportive materials (e.g. questionnaires, advertisements, etc.) or the addition of new materials that may have human subject implications.

Principal Investigator:
Phone Number:
Email Address:
Title of Study:
Date of Initial IRB Approval:
Current status of Study (check one): Study currently in progress Study has not yet started Study has terminated: date study completed:
Request for Revisions Please describe the revision(s) to the original study protocol and/or materials and briefly explain the reason for the revision(s):
*Please attach a copy of the revised protocol and/or materials.
Questions: Please answer the following questions:
Have any revisions been made to the original study protocol or materials? Yes * No
* If yes, when was the revision approved by the IRB?
2. If the study is still active, when do you expect to complete it?

3. Have any subjects withdrawn from the study or complained about the study process?			
	Yes*	No	
*If yes, please describe in detail:			
4. Have there been significant developments in the field si might affect the risk/benefit ratio for subjects?	nce your study	began that	
	Yes*	No	
*If yes, how are you responding to those changes?			
5. Please summarize any problems or study related injurie that might have arisen since the last review. (If no problem	_	-	
Name of Principal Investigator	Date		

¹ Investigators are required to provide the information requested on this form to the IRB(s) which provided approval to the study at least annually (and more often if requested by the IRB) per the Code of Federal Regulations, Title 45 Part 46 of the Federal Register, effective July 14, 2009.