* All submissions should be forwarded to NPHresearchgovernance@healthscope.com.au
* Please attach a copy of the HREC approval letter, as well as any document that require governance review.
* Include the NPH Research Governance Reference in the Email Subject

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| **1. Project Details** |
| **NPH Research Governance Reference:***(as per initial NPH Governance approval)* |  |
| **Study Title:** |  |
| **Study Acronym:** |  |
| **Study Sponsor:** |  |
| **NPH Principal Investigator:** | **Name:** |  |
| **NPH Study Coordinator (administrative contact):** | **Name:** |  |

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| **2. Type of Submission**  |
| **Please indicate the type of submission*:*** |
| [ ]  Annual Progress report – *active projects*  |
| [ ]  Final report – *completed projects* |
| ***Please Specify:*** | [ ]  Study completed | [ ]  Study abandoned |

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| **3. Report Details** |
| **Status/outcomes and summary of project at NPH:** |
|  |
| **Were participants recruited at NPH?** |
| [ ]  Yes |
| [ ]  No *- please specify reasons (e.g. project is a registry)* : \_\_\_\_\_\_\_\_\_ |
| **Participant Activity:** |  | [ ]  N/A |
|  | **Target enrolment** | **Actual enrolment** |
| **NPH:** |  |  |
| **Overall Study:** |  |  |
| ***Final Reports only* - Will participants be informed of research project results?**  |
| [ ]  Yes |
| [ ]  No *– please provide an explanation: \_\_\_\_\_\_\_\_\_\_\_\_\_* |
| [ ]  N/A |

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| **4. Study Documents Checklist – *provide a copy of the below documents*** |
| Current HREC progress report and approval/acknowledgment letter.  | [ ]  Yes | [ ]  N/A |
| Final HREC report and approval/acknowledgement letter.  | [ ]  Yes | [ ]  N/A |
| Current Certificate of Currency insurance for this project, if applicable.  | [ ]  Yes | [ ]  N/A |
| **Have all HREC approved project amendments been submitted to NPH Governance?** *i.e updated protocol, etc.*  |
| [ ]  Yes |
| [ ]  No  | *Please complete the* [*NPH Research Governance Amendment Form*](https://newcastleprivatehospital.com.au/doctors/research) *and submit for review.* |
| [ ]  N/A  | *No project amendments have been made since last NPH Governance review.* |

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| **5. Signature of Principal Investigator** |
| I certify that the information in this form is truthful, accurate and complete to the best of my knowledge.The project is being conducted in keeping with the conditions of approval of the reviewing HREC and in accordance with the protocol. The project is being conducted in compliance with the National Statement on Ethical Conduct in Human Research (NHMRC, 2007) and Safety monitoring and reporting in clinical trials involving therapeutic goods (NHMRC, 2016), or as amended. **Name of the Principal Investigator / delegate\*:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*(NB: A delegate may sign this form in place of the PI , as long as the PI is copied in to the submission email)* |