**Attachment 3**

# CHCB Research Ethics & Ethics Committee

# PROGRESS/FINAL REPORT (please specify)

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| **1**. Project Reference No:  | **4**. Project Title:  |
| **2**. Project Report Date: / / |
|
| **3.** Project Commencement Date: / / |
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| 1. Provide a brief statement of progress so far and results, (if any) including titles of publications,

(if any): |
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| 1. Have there been any changes to the project methodology that have not been brought to the attention of Calvary Health Care Bethlehem’s Research Ethics & Ethics Committee?

 If “Yes” please detail: | Yes/No |
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| 1. Have any ethical issues/adverse events emerged in the course of the project for:
2. Patient, (b) Researcher, (c) Hospital.

 If “Yes” please detail: | Yes/No |
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| 1. Have there been any complaints about the project?

If “Yes” please detail nature of complaint(s): | Yes/No |
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| **Statement:**I confirm that this project is being conducted as originally approved by the Calvary Health Care Bethlehem Research Ethics & Ethics Committee (and subject to any subsequently approved changes). **Researcher**: ………………………………….  **Date:** / /*Name:*  |