



**COUNTY OF ORANGE HEALTH CARE AGENCY
HUMAN SUBJECTS REVIEW COMMITTEE**



Status Report

INVESTIGATOR:

TITLE OF RESEARCH:

Project Start Date:

Number of Subjects Accrued to Date:

Anticipated End Date:

Expected Total Number of Subjects:

PROJECT SUMMARY. Briefly describe the project.

PROGRESS. Describe the progress of the project.

ADVERSE EVENTS. Describe any adverse events or unanticipated problems involving risks to subjects or others, withdrawal of subjects from the research, or complaints about the research. List events, severity, resolution, and number of subjects affected.

RECENT LITERATURE. Summarize any recent literature, findings, or other relevant information on risks associated with the research.

INFORMED CONSENT. Attach a copy of the current informed consent document. Has the consent document or consent procedure, previously approved by the Human Subjects Review Committee, changed? If yes, how?

Signature:

Today's Date:

Typed Name:

Phone:

Attach additional pages as needed.