

Study Closure Form

1. When did the study actually begin?
[Click here to enter text.](#)
2. When was the completion of the involvement of human subjects?
[Click here to enter text.](#)
3. How many total participants were in the study?
[Click here to enter text.](#)
4. How many participants withdrew from the study?
[Click here to enter text.](#)
5. Were there any occurrences in the study that involved risk to the participant or others?
[Click here to enter text.](#)
6. Did any participant experience negative effects associated with the study?
[Click here to enter text.](#)
7. Were there any changes in the research protocol?
[Click here to enter text.](#)
8. Please include a brief summary of preliminary results.
[Click here to enter text.](#)