**Instructions: This institutional project update form should only be used for studies that no longer require annual continuing review by the R&D Committee (exempt studies, expedited studies that do not require continuing review by the IRB, or studies that are required to submit a progress report to the IRB).**

**Submit this form through IRBNet. An acknowledgement will be received through IRBNet after administrative review.**

**This form should only be used to submit institutional updates. Please complete and submit an amendment/modification request form to submit proposed changes to the research or an inactivation form to close the study.**

1. **Project and Investigator Information**

|  |  |
| --- | --- |
| **Project Number** | Click or tap here to enter text. |
| **VA Facility** | Click or tap here to enter text. |
| **Title of Project** | Click or tap here to enter text. |
| **Principal Investigator** | Click or tap here to enter text. |
| **PI Email** | Click or tap here to enter text. |
| **PI Telephone** | Click or tap here to enter text. |
| **Name of Point of Contact other than PI:** | Click or tap here to enter text. |
| **POC Email** | Click or tap here to enter text. |
| **POC Telephone** | Click or tap here to enter text. |

1. **Project Team Members**

**Have there been changes to study personnel?**

No, Personnel on VA-Project Cover Sheet are current

Yes, Submit a revised VA-Project Cover Sheet with this package

***Submit an updated Financial Conflict of Interest Form for all research investigators. This includes all PIs, Co-PIs, and Sub-Investigators. Please submit in electronic format only and do not lock document.***

***Note: Personnel on VA-Project Cover Sheet will be used to verify VA Research Privileges.***

1. **Updates Since last Report**

|  |
| --- |
| ***Please provide responses to the following questions.*** |
| 1. Please indicate the total number of participants, records/charts reviewed, or specimens received to date:   Number of Veteran Participants or Veteran Records/Specimens  Number of Non-Veteran Participants or Non-Veteran Records/Specimens  Other  N/A   1. Is/was this project funded by any source?   No.  Yes.  If yes, please provide funding source & grant or funding #:  Check if no cost extension   1. Since the last review, have there been any budget changes or changes in requirements for space, personnel, equipment, or supplies that may impact the STVHCS?   No.  Yes.  If yes, please explain: |