中華崇仁總醫院暨醫學中心
CHINESE GENERAL HOSPITAL AND MEDICAL CENTER
EXCEPTIONAL CARE WITHIN REACH

Department of Medical Education and Research
RESEARCH ETHICS REVIEW BOARD (RERB)
Contact#: 8711-4141 local 418 and 481
Email Address: cghmc.irb@gmail.com

FINAL REPORT

CGHMC RERB Protocol No.	Approval Date: (dd/mm/yyyy)
Protocol Title	
Principal Investigator	Contact Number
Study Site	
Total number of participants	Study Arms
Study materials ☐ Drug ☐ Device ☐ Biologic specimen ☐ Others	
Summary of Recruitment Accrual ceiling set by RERB New participants accrued since last review Total number of participants accrued since protocol began No. of participants who are lost to follow up No. of participants withdrawn from the study No. of participants who experienced SAEs/ SUSARs Number of participants who completed the study	
Duration of the Study	
Study objectives	
Summary of Findings in the Site	
Signature of Principal Investigator	Date Submitted

To be filled up by RERB

Date Received:	Received by: (Printed Name/Signature)
COMMENTS OF PRIMARY REVIEWER	

RECOMMENDED ACTION: ☐ Accepted ☐ Request additional Information: (Specify) ☐ Recommend Further Action: (Specify) ☐ Not accepted	**Type of Review** ☐ Full Board ☐ Expedited Meeting Date:
PRIMARY REVIEWER: _____ _____ Signature over name Date RERB CHAIR: _____ _____ Signature over name Date	