**OXFORD TROPICAL RESEARCH ETHICS COMMITTEE (OxTREC)**

**END OF STUDY REPORT**

**This end of study report should be sent to OxTREC within 12 months of the end of your study.** **(NB: In most cases the end of study will be the date of the last visit of the last participant.)**

**Please send your signed report by email to** [**oxtrec@admin.ox.ac.uk**](mailto:oxtrec@admin.ox.ac.uk)**.**

|  |
| --- |
| Full Title of Study: |
| OxTREC Reference: |
| Principal Investigator: |
| Sponsor: |

|  |  |  |
| --- | --- | --- |
| Listed Investigators |  | |
| Study Start and End Dates |  | |
| Brief Summary of Study Design | | |
|  | | |
| No. of Participants/Patients (planned and analysed) |  | |
| Primary and Secondary Objective(s) |  | |
| Endpoints/Outcome Measure(s) |  | |
| Summary of Results | | |
|  | | |
| Conclusions | | |
|  | | |
| Please list all publications or other research outputs (or plans for publications) arising from the research (providing links where appropriate)  [NB: in line with funder requirements, investigators should publish their findings, *including null and negative results*.] | | |
| Please list all publications/research outputs and links here: | | |
| Please confirm that all publications:   * include the clinical trial registration number (for clinical trials) * list the funder * are made freely available (*please supply full details of where they are available*) | |  |
| Please confirm that data underlying the publications are accessible to other researchers, either openly or via a managed access approach, and *indicate where they can be accessed* | |  |
| **For clinical trials and interventional studies:** | | |
| Please supply clinical trial registry & trial registration number | Please provide full details here: | |
| Please confirm that all of the following are included in the clinical trial registration:   * funder & grant reference number * sponsor * summary of trial (*please attach this*) * data sharing plan (*please attach this*)[[1]](#footnote-1) | Please provide full details here: | |
| Please confirm that the summary results from the trial have been submitted to the registry for public posting | Please provide full details here: | |
| Please confirm that the registry record has been updated to include:   * final enrolment numbers * the date the primary study was completed (i.e. the last data collection timepoint for the last participant for the primary outcome measure) | Please provide full details here: | |
| *For cases where a clinical trial has been terminated*, please confirm that the registry record has been updated to include:   * enrolment numbers up to the termination date * the termination date | Please provide full details here: | |

**Principal Investigator  
signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Principal Investigator  
name (block capitals): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. NB: in cases where there is no specific section in which to input this information in the registry, you should include this information somewhere in the registry entry, e.g. in the ‘Descriptive Information’ section on clinicaltrials.gov. [↑](#footnote-ref-1)