



Status on Human Research Subject					
<b>Human Research Subject</b>	<b>Expected</b>	Organization	persons (Total:	persons)	
<b>Registration Status (As of Report Date)</b>	<b>Number of Human Research Subject</b>				
	<b>Registration Status</b>	Number of human research subject registered in research: _____ persons (Total: _____ persons)			
	<b>Details</b>	Number of screening ( _____ ) persons = Number of failure in screening ( _____ ) persons + Number of registration ( _____ ) persons			
		Number of registration ( _____ ) persons = Number of dropout ( _____ ) persons + In progress( _____ ) persons + Completed ( _____ ) persons			
	<b>Reasons for Failure in Screening</b>	Below Selection Criteria: _____ persons			
		Others: _____ persons			
	<b>Reasons for Dropout</b> (※ Add cells for fill-out when necessary)	<b>Category</b>	<b>Details</b>		
<b>Consent Withdrawal</b>		persons			
<b>Adverse Reaction</b>		persons			
<b>Others</b>		persons			
<b>Report Regarding Human Research Subject Safety</b>	<b>Serious Adverse Reaction</b>		_____ cases		
	<b>Unexpected Adverse Reaction</b>		_____ cases		
	<b>Unexpected Problem</b>		_____ cases		
<b>Summary of Serious Adverse Reaction</b> (※ Add cells for fill-out when necessary)	<b>Adverse Reaction</b>	<b>Relation with Research</b>	<b>Expected/Not Expected</b>	<b>Result</b>	
<b>Others</b>	<b>Violation/Breakaway from Proposal</b>	<input type="checkbox"/> Yes:			
		<input type="checkbox"/> No			
	<b>Complaints from Human Research Subject</b>	<input type="checkbox"/> Yes:			
		<input type="checkbox"/> No			

We submit (Early) Completion Report as Above.

\_\_\_\_\_  
Name & Signature of Lead Researcher

\_\_\_\_\_  
Date