**Post Approval Activities**

* Select one of the following options to submit to the Research Ethics Board based on the guidelines (Click blue question mark for guidance):

<table>
<thead>
<tr>
<th>Options</th>
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<tbody>
<tr>
<td>☐ Annual Renewal</td>
</tr>
<tr>
<td>☐ Annual Renewal with Amendments to the Study (UBC BREB, UBC CREB and C&amp;W REB studies only)</td>
</tr>
<tr>
<td>☐ Amendments to Study</td>
</tr>
<tr>
<td>☐ Completion of Clinical Study</td>
</tr>
<tr>
<td>☐ Request for Acknowledgement</td>
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</tbody>
</table>

* Nickname

Enter a nickname for this PAA. What would you like this PAA to be known as to the Principal Investigator and study team?

(If you are notifying the REB of a protocol deviation or an unanticipated event or local serious adverse event please include the words "protocol deviation" or "unanticipated event" or "local SAE" as applicable in the nickname)

Clear

Comment [u1]: Text in Comments boxes are guidance notes/instructions to researchers.

Comment [u2]: Annual Renewals
For Clinical studies click [here](#) for information on annual renewals. If this is an annual renewal of a for-profit (industry or pharmaceutical) sponsored study, a renewal fee is required. For more details about fee payment please consult the applicable REB administration or their website. For Behavioural studies click [here](#) for more details on annual renewals.

Amendments to Study
Amendments are changes to an ongoing study. If you are changing any part of the study (e.g. co-investigators, title, agency, documentation) you must submit an amendment. Click [here](#) for more information on amending clinical studies.

Completion of Clinical Study
For Clinical studies click [here](#) for criteria on study completion.

Completion of Behavioural Study
The researcher will have no further contact with subjects for the purpose of data collection, follow up, or research. Click [here](#) for more information on completion criteria.

Request for Acknowledgement
Protocol deviations, unanticipated problems, new information, safety letters, local serious adverse events, studies on hold, off hold, closed to accrual/enrollment, or miscellaneous information (PI, Sponsor or REB requires acknowledgement). Click [here](#) for more information on Request for Acknowledgement criteria. Any other changes to an ongoing study must be submitted through an amendment.
Clinical Annual Renewal Coversheet

* 1. Reason

1.1. Why is this renewal being requested, e.g. still recruiting or data collection is ongoing etc.? (Unless required by the study sponsor, studies that no longer require interaction with participants or access to their data generally can be completed. Please click blue question mark)

1.2. If this research has not started please explain why and indicate your plan for moving forward. If the study is on hold, please explain and indicate the anticipated start date.

* 2. Level of Review

Does this Annual Renewal qualify for Minimal Risk/Delegated Review? Click blue question mark for the criteria.

- Yes
- No

* 3. Participant Recruitment

3.1. Is participant consent obtained by researchers? (If no, skip to question 4. If yes,
3.2. Is this study currently recruiting or will it be recruiting in the near future?
- Yes ☐  ☑ No  Clear

3.3. How many participants (including controls and normals) are enrolled at institutions covered by this Research Ethics Approval?

a. Enrolled to Date: 

b. Enrollment Goal: 

3.4. For multi-institutional studies, how many participants (including controls and normals) are enrolled in the entire study across all sites?

a. Enrolled to Date: 

b. Enrollment Goal: 

3.5. How many participant withdrawals have there been at this site?

3.6. To your knowledge, did any participant withdraw as a result of study misconduct or complaints? If yes, please explain.

Comment [u5]: Controls are people acting in a control capacity, including normal participants.

Comment [u6]: Reference: ICH-GCP (E6) Guidance 4.3.4 states: Although a participant is not obliged to give his/her reason(s) for withdrawing prematurely from a trial, the investigator should make a reasonable effort to ascertain the reason(s), while fully respecting the participant's rights.

Note: Participants must not be required to give their withdrawal notice in writing; verbal notice must be accepted.
4. Chart Reviews, Database Records and Sample Collection Studies

4.1. Complete section **only if** you are **not** required by the REB to consent individuals for the use of their data or biospecimen.

How many charts/records and/or samples have you included in this research?

a. Included to Date

b. Inclusion Goal

4.2. Confirm the dates of the charts being reviewed.

* 5. Study Progress

5.1. Summary: Provide a brief summary on the progress of the study.

Comment [u7]: Complete if you received a waiver of consent for secondary use of data (such as a chart review, Popdata) or biological materials (such as left over samples from diagnostic tests or surgeries) for part of or all of your study. If you are consenting participants for the use of their data or tissues, please fill out section 3 only.

Comment [u8]: Dates of extracted charts/records should match those indicated in the initial application.

Comment [u9]: The summary of progress to date should include information on whether participants are still participating in the research study.

Clinical trials:
Indicate if the trial is open or closed to enrollment and the status of enrolled participants, i.e. if on study treatment or if all are now on long term follow up only.

For studies open to enrolment, remarks about the ability to recruit participants are also appropriate, as is any information about the results from any interim analyses.
5.2. Please attach a Summary and/or Monitoring report if one is available. If you are conducting a clinical trial, a sponsor’s summary report containing up-to-date information about the safety of participants is required. **If a report is not being attached**, please explain why below and whether or not any monitoring or interim analyses of this study took place. If so, indicate by whom and summarize the results.

| Add
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There are no items to display

* **6. Unanticipated Problems**

6.1. Are there any outstanding actions that the REB, Data Safety Monitoring Board, and/or study sponsor has requested that you take with regard to an unanticipated problem (including any serious and unexpected adverse event or Safety Letter)?

- [ ] Yes
- [ ] No

6.2. If “Yes”, please explain.

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* **7. New Information**

7.1. Provide the REB with any new information related to the study.
8. Changes in Conflict of Interest

Please provide details of any changes in relation to conflict of interest status of the Principal Investigator and/or other members of the study team.

9. Lapsed Studies

If the study has expired, please provide the following information:

a) Provide an explanation for the late renewal;

b) Confirm that NO study activities took place during the time over which there was no valid ethical approval;

c) Explain what strategies have been put in place so that this will not happen in the future.

10. Additional Comments:

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This is the end of the Post Approval Activity (PAA) Coversheet.

1) Clicking "Continue" will bring you to the PAA homepage.

2) To work on this again, click the "Edit PAA Coversheet" button on the left side of the PAA homepage.

3) ONLY the Principal Investigator or a Co-Investigator with full signing authority will be able to "Submit PAA" from the PAA homepage for the initial submission.