

**Institutional Review Board (IRB)
Bangabandhu Sheikh Mujib Medical University**

Protocol Completion Report

1.	Protocol Number	Protocol Title:		
2.	Principal Investigator:		Faculty:	
3.	Grant No.		Budget Source:	
4.	IRB Approval Date:		Actual start date:	Actual end date:
Abstract (objectives, main findings, recommendation/policy implications): Objectives: Main findings: Recommendation/policy implications:				
Ethical concerns (protocol deviation, violation, SAEs etc.):				

Signature of the Principal Investigator

Signature of the Designated person of IRB, BSMMU (with Seal and date)