

## Rhode Island Department of Corrections Medical Research Advisory Group

## RESEARCH UPDATE FORM

(TO BE SUBMITTED EVERY JUNE/DECEMBER)

Project Title:	
Project Short Title:	d as a reference in all future correspondence
Principal Investigator:  Name, Ti	
Phone #:	Email:
Key Contact:Name, Title	
Phone #:	Email:
Estimated Completion Date:	

Please provide the following information for existing projects:

- Copy of the most recent IRB Update Report
- Report(s) of any adverse events (If this box if checked, please provide a written report to the Medical Program Director/MRAG and the Administrator of Planning and Research)
- Names of individuals requesting RIDOC security clearance/badges
- Number of patients to be enrolled

**NOTE**: Every six months, (June and December) an Update Report must be filed with the Medical Program Director/MRAG and the Administrator of Planning and Research. All correspondence and questions regarding this process should be directed to:

Medical Program Director
Medical Research Advisory Group
Rhode Island Department of Corrections
39 Howard Avenue
Cranston, RI 02920
Phone: (401) 462-1115

Phone: (401) 462-1115 Fax: (401) 462-2000 Administrator, Planning & Research Planning & Research Unit Rhode Island Department of Corrections 18 Wilma Schesler Lane, Dix Bldg., 1<sup>st</sup> Floor Cranston, RI 02920

Phone: (401) 462-3920