**NAPNAP Foundation Funded Grant Closure Report**

Your Name:   
Study Name:

*Please complete the following info based on your study results.*

|  |  |
| --- | --- |
| Category | Response |
| a. Completed (number of participants completed study visits per protocol) |  |
| b. Participant withdrew consent (explain): |  |
| c. Discontinued by investigator (participant did not meet inclusion criteria, non-compliant, protocol deviation, etc.) (explain): |  |
| d. Discontinued due to adverse events (explain): |  |
| e. Lost to follow-up (number of participants): |  |
| **Total Enrolled** (sum of a-e) |  |
|  |  |
| Final Costs for Implementation of Research\*: | $ |
| Where there challenges to recruiting participants? |  |
| How do you plan to disseminate the information from your study? |  |
| Conclusion of study? |  |
| How do you view your successes? |  |
| Institution IRB notified of study completion? |  |