

University of Wisconsin – Madison
 Health Sciences Human Subjects Committee
 2500 Overlook Terrace #B3088 Madison, WI 53705
PROTOCOL CLOSURE REPORT

Instructions: Please note that a protocol previously approved by the Human Subjects Committee (HSC) should be closed if the protocol has been completed (including subject participation, subject follow-up, long-term observation, and data analysis) or if the study is terminated. Please complete the following information and submit one original to the HSC office.

Principal Investigator Name: Kreg Gruben	
Protocol Title: Accessible Ergometer	
PI Office Address: 1081 Gymnasium-Natatorium, 2000 Observatory Drive, Madison WI	E-mail: gruben@education.wisc.edu
Phone: (608)262-2711	Fax: (608)262-1656

Point of Contact Name: Carla M. Phillips, M.A.	
Office Address: B3067 2500 Overlook Terrace	E-mail: cmp@medicine.wisc.edu
Phone: (608)261-1156	Fax: (608)265-5811

1. Reason for Protocol Closure/Termination:

- Protocol and Data Analysis Complete
- Protocol Terminated (Specify reason _____)
- Lack of Funding or Funding Not Renewed
- Other (Explain: _____)

2. Enrollment:

Total number of subjects enrolled or samples obtained 4 control subjects, 4 experimental subjects
 Total number of subjects who completed participation/number of samples analyzed 4 control subjects, 4 experimental subjects

3. Adverse Events (AE's):

Number of serious AND unexpected related to study treatment or intervention 0

Previously reported to the HSC? Yes No (If no, please attach an Adverse Event Report for HSC review)

Number of UW or VA subject deaths _____

Previously reported to the HSC? Yes No (If no, please attach an Adverse Event Report for HSC review)

 Signature of Principal Investigator

 Date