



# ST. PAUL'S HOSPITAL OF ILOILO, INC.

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## INSTITUTIONAL REVIEW BOARD

### **INACTIVE FILE DATABASE (FORM 7.3)**

<b>IRB PROTOCOL #</b>	
<b>SPONSOR PROTOCOL CODE</b>	
<b>TITLE</b>	
<b>PRINCIPAL INVESTIGATOR</b>	
<b>SPONSOR</b>	
<b>SUBMISSION DATE</b>	
<b>TYPE OF REVIEW</b>	
<b>PRIMARY REVIEWER</b>	
<b>APPROVAL DATE</b>	
<b>SUBMISSION DATE OF EARLY OR FINAL TERMINATION REPORT</b>	
<b>MEETING DATE OF THE APPROVAL OF TERMINATION (EARLY OR FINAL); OR</b>	
<b>MEETING DATE OF THE RECLASSIFICATION OF UNFINISHED OR INCOMPLETE STUDIES AS INACTIVE</b>	
<b>DATE OF ARCHIVING</b>	
<b>DATE OF SHREDDING AND DISPOSAL</b>	