

# ADVANCED SPECIALTY EDUCATION STUDENT CHECK-OUT LIST

Name \_\_\_\_\_

Department \_\_\_\_\_

## ALL ITEMS MUST HAVE SIGNATURE PRIOR TO RETURNING TO THE OFFICE OF GRADUATE STUDIES

### CLINIC INSTRUMENTS AND CLINIC RECORDS:

\_\_\_\_\_  
Date

All instruments and equipment owned by School returned  
(*Clinic Assistant or Chairperson*)

\_\_\_\_\_  
Date

All items returned to dispensary including white clinic coats  
(*Dispensary Technician*)

\_\_\_\_\_  
Date

All records returned (*Chairperson or Chairperson's designee*)

\_\_\_\_\_  
Date

Patient accounts in proper order (*Cashier's Office*)

\_\_\_\_\_  
Date

Personal accounts in proper order (*Cashier's Office*)

### DOOR KEYS, STUDENT ID, PARKING:

\_\_\_\_\_  
Date

Door keys, Student ID (if applicable) Must be turned in to  
(Tori Hirsch)

\_\_\_\_\_  
Date

Parking pass (if applicable) Must be turned in to Access  
Services, located in the basement of Crawford Hall

\_\_\_\_\_  
Date

Locker cleaned out (Cheryl Silas) Student services 1<sup>st</sup> floor

\_\_\_\_\_

Department Assistant – all information cleared

### COPY CARDS:

\_\_\_\_\_  
Date

Copy card turned in. (*Departmental Administrator*)

### DEPARTMENT REPRESENTATIVE MUST SIGN OFF:

Return keys to Rollaround # \_\_\_\_\_ Return keys to Cubicle # \_\_\_\_\_ Return keys to Locker # \_\_\_\_\_

Animal Resources: Animals disposed [ ] Account cleared [ ]

Chemicals and laboratory waste properly disposed [ ]

\_\_\_\_\_  
Department Personnel

\_\_\_\_\_  
Date

**HENRY SCHEIN INC.:**

\_\_\_\_\_  
Date

All instruments/equipment returned and financial obligations to Henry Schein, Inc., fulfilled

**REGISTRAR (Ms. Barbara Sciulli):**

\_\_\_\_\_  
Date

All financial obligations to University fulfilled.

\_\_\_\_\_  
Date

Financial Aid exit interview

**RESEARCH COMPLIANCE (IRB)**

\_\_\_\_\_  
Date

IRB properly continued/**terminated** (*Program Director*)

**OFFICE OF GRADUATE STUDIES:**

**THESIS:**

\_\_\_\_\_  
Date

All required signatures received (*C. Friday*)

\_\_\_\_\_  
Date

Three approved copies submitted (*C. Friday*)

**FOR ORTHODONTICS ONLY:**

\_\_\_\_\_  
Date

Three printed copies of thesis plus digital copy of thesis submitted to Department of Orthodontics

**FORWARDING ADDRESS:**

\_\_\_\_\_  
Date

Verified (*C. Friday*)

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

**Telephone number** \_\_\_\_\_

\_\_\_\_\_  
Date

Certificate of Training Distributed (*C. Friday*)

## TERMINATION / RENEWAL OF IRB:

As students leave or graduate, the Case Western Reserve University Social/ Behavioral IRB would like to remind faculty, instructors and staff who are serving as responsible investigators or co-investigators on Case IRB protocols that the protocols **must be properly terminated or renewed via a continuing review form** before students leave or graduate.

Please note, if a responsible investigator is leaving Case and/or if a student is graduating or transferring to another school and the protocol represents the student's work, the protocol must be properly terminated.

Be sure to follow these steps to ensure that the protocols are properly terminated:

1. Download the **most current** version of the Continuing Review form from our website ([http://ora.ra.cwrw.edu/research/orc/Case%20IRB%20System/orc\\_humansubjects\\_CWRU\\_IRB.cfm](http://ora.ra.cwrw.edu/research/orc/Case%20IRB%20System/orc_humansubjects_CWRU_IRB.cfm))
2. Fully complete and sign the Continuing Review form, marking "Completed or Discontinued" (Please be sure to answer every question or expect a delay in IRB review)
3. Include a summary of research findings
4. Include a summary of addenda, if applicable
5. Follow the approved protocol's procedure for destroying identifiers
6. Ensure that you have a copy of (or access to) the research data and the student's new contact information
7. Ensure that you have a copy of the continuing review form and any attached documents, if applicable, for your records.
8. ***Acquire the student co-investigator's original signature before they leave! If there is a problem, contact the Case IRB office immediately!***

**Remember that the IRB holds the responsible investigator accountable for ensuring that these steps are followed.** It is much easier to acquire this information before the student leaves!

Also remember that failure to submit a continuing review form by the continuing review deadline (on the Notice of Approval) will result in placing the protocol and the responsible investigator on **administrative hold**, which means that research for the protocol in question has to stop completely. If we do not receive the protocol within 30 days of an administrative hold determination, the protocol would be **administratively terminated**.

An **administrative termination** means all of the RI's research must cease and IRB privileges are revoked until the protocol in question has been **formally terminated**. If a responsible investigator would like to continue conducting research on an administratively terminated protocol, the responsible investigator must submit a **fully completed and originally signed new protocol application**.

**Keep in mind that *de-identified* data can be retained indefinitely.** However, if a coded or master list still exists, the data is **NOT** de-identified and, therefore, an IRB protocol needs to be open in order to work with these data.

Please feel free to call the IRB office at 368-6925 if you have any questions.

**INCLUDE IRB CHECKOUT FORM!!!**