**화이자 연구의 경우 계약서 상 조건 확인 후 아래의 내용까지 추가 작성 후 제출 부탁드립니다 (문서보관기간 종료시 의뢰사에 전달해야 할 내용입니다)**

|  |  |
| --- | --- |
| Product: |  |
| Indication: |  |
| Sponsor Name: |  |
| Pfizer/Sponsor Protocol Number: |  |
| Name of Principal Investigator (PI): |  |
| Site Number: |  |
| Country: |  |
| Dates the study was conducted and completed: |  |
| Were any subjects screened at your site? |  |
| If no subjects were enrolled, was IRB/IEC approval obtained? |  |