*Text in italics is explanatory and should be deleted in completed documents.*

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| **PTA Number:** | *(e.g. PTA-1234567-123-ABCDE)* |
| **Project Name:** | ***SCI 2018 Fellowship Award*** |
| **PI(s):** | *(e.g., First Last, Degree)* |
| **Funding Start Date:** | **07/01/2018** |
| **Funding End Date:** | **06/30/2019** |
| **Report Submission date:** | *(Due 07/30/2019)* |
| **Name of Institutional Mentor:** |  *(e.g., First Last, Degree)* |
| **Section One: Training Progress Summary** |
| *Please provide a summary of the clinical and research* ***training*** *progress during the reporting period. (1-2 paragraphs):* |
| **Section Two: Research Project Progress Summary** |
| *Please provide a summary of the research* ***projec****t progress to date (published and unpublished results). (1-2 paragraphs):* |
| **Section Three: Summary (Lay language for use in newsletters, blogs, donor communication)** |
| *Please provide a summary of the Fellowship training and research in lay language that will be published in the SCI newsletters, blogs, and donor correspondence. (1-2 paragraphs):* |

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| **Section Four: Results**  |
| *Please provide a list of publications and presentation supported by the Fellowship grant, including peer-reviewed publications, abstracts presentations that have been submitted, currently in review or accepted for publications. Also provide a list of any new clinical or research tools that you developed, or patents that were submitted during the course of the Fellowship. \*\* Please attach reprints of publications if applicable.***PUBLICATIONS: *(e.g.*** *Freedman SB, Adler M, Seshadri R, Powell EC. Oral ondansetron for gastroenteritis in a pediatric emergency department. N Engl J Med. 2006 Apr 20;354(16):1698-705. PubMed PMID: 16625009, PMCID*Citation:PMID:PMCID:Status:**RESULTING CLINICAL TRIALS:**Trial Title:PI: Approval Number(s):Status:**PATENTS:**Title:PI:Patent Number:Date Filed:Date Approved:**RESULTING STARTUPS:**Name:PI:Status:**COMMENTS:** *Provide any additional information on the items noted above* |

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| **PI Name:** | **Signature and date:**  |