

W. Martin Smith Interdisciplinary Patient Safety Awards Program

Award Final Report

Project Title

Award Amount

Amount Used

Award Date

Date of IRB Approval

Final Report Date

Principal Investigator

Department

Phone #

Co-Investigator

Department

Phone #

Co-Investigator

Department

Phone #

Co-Investigator

Department

Phone #

Co-Investigator

Department

Phone #

Date CME Program Completed and Submitted

1. Discuss each project goal and final achievement/implementation status.
2. Itemize each budget item and amount of award funds used for each.