# Ethical Institutional Review Evaluation Form

**Application No: year/EIRB- ….**

**Title:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| S/N | **Particulars** | **Yes** | **No** | **N/A** | **Comments (if any)** |
| 1 | **Is all the documentation provided?** |  |  |  |  |
| 2 | **Is the area of research Scientifically important and valid?** |  |  |  |  |
| 3 | Will the study lead to increase knowledge? |  |  |  |  |
| 4 | If the study is a replication of a previous study, |  |  |  |  |
| If YES, Is it justified (mention in comments)? |  |  |  |  |
| 5 | Is there provision for dissemination of results of the research to local community / stakeholders? |  |  |  |  |
| 6 | Are the objectives stated clearly? |  |  |  |  |
| 7 | Is the study design appropriate in relation to the objectives? |  |  |  |  |
| 8 | Is the study designed using accepted ethical principles, methods  and practices? |  |  |  |  |
| 9 | Is the manner in which the results of research will be reported and published ethical? |  |  |  |  |
|  | **Assessment of Risks/Benefits** |  |  |  |  |
| 10 | Are the proposed standards / methods of risk mitigation are designed keeping in view best local practices? |  |  |  |  |
| 11 | Have adequate provisions been made for dealing with  and reporting adverse events? |  |  |  |  |
| 12 | Have adequate provisions been made for safety monitoring and termination of the research project? |  |  |  |  |
|  | **Responsibilities of the researcher** |  |  |  |  |
| 13 | Has the researcher followed any applicable legal regulations / procedural requirements and ethical guidelines? |  |  |  |  |
| 14 | Is there any mechanism for getting prior consent on methods / disclosure of information etc. from the objects / participants of the research process? |  |  |  |  |
| 15 | Are there any other ethical / legal/ social /financial issues in the study? |  |  |  |  |
| 16 | Is there a local co –investigator/Private partnership? |  |  |  |  |
| 17 | Are the provisions for intellectual property sharing fair? |  |  |  |  |
| 18 | Are there any conflicts of interest? If yes, provide details? |  |  |  |  |
| 19 | Is there a written agreement between the collaborators? |  |  |  |  |
| 20 | Is the study culturally acceptable? |  |  |  |  |

**Summary of comments**

**Risk Level:** High Medium Low

**Recommendation:** Approve Resubmit (please state conditions) Reject

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**Evaluator Name/Designation** **Evaluator Signature/Date**