

# Institutional Review Board Proposal Form (Checklist)

University of Public Health, Yangon

Ministry of Health and Sports, The Republic of the Union of Myanmar

Application number (for office use): \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Title of research study: \_\_\_\_\_

Supporting Agency: \_\_\_\_\_

Project Status: New study

Continuation

Secondary data analysis

**Please circle the relevant response  
(NA=Not-applicable)**

**1. Study population**

- |  |     |    |
|--|-----|----|
| (a) Ill subjects                         | Yes | No |
| (b) Non ill subjects                     | Yes | No |
| (c) Minors or persons under guardianship | Yes | No |
| (d) National groups                      | Yes | No |

- |   |     |    |
|---|-----|----|
| (h) Confidential handling of data?                              | Yes | No |
| (i) Compensation where there are risks or loss of working time? | Yes | No |

**2. Does the study involve**

- |  |     |    |
|--|-----|----|
| (a) physical risks to the subjects?                          | Yes | No |
| (b) social risks?  | Yes | No |
| (c) psychological risks to subjects?                         | Yes | No |
| (d) discomfort to subjects?                                  | Yes | No |
| (e) invasion of privacy of subjects?                         | Yes | No |
| (f) disclosure of information damaging to subject or others? | Yes | No |

**5. Will consent be required**

- |   |     |    |
|---|-----|----|
| (a) from participants?                                    | Yes | No |
| (b) from parent or guardian (if participants are minors?) | Yes | No |

**3. Does the study involve**

- |  |     |    |
|--|-----|----|
| (a) use of record? (hospital, medical, death, birth or others) | Yes | No |
| (b) use of fetal tissues or abortuses?                         | Yes | No |
| (c) use of organs or body fluids?                              | Yes | No |
| (d) use of left-over specimens?                                | Yes | No |

**6. Will precautions be taken to protect anonymity of subjects?**

**7. The following documents (circled) are submitted**

1. Application Proposal Form (Checklist)
  2. Covering letter
  3. Proposal summary
  4. Full research proposal
  5. Agreement to carry out according to guidelines
  6. Investigator's curriculum vitae
- The following documents (circled) are submitted if applicable**
7. *Informed consent form*
  8. *Assent form*
  9. *Permission form*
  10. *Consent/Assent document for taking biological samples*
  11. *Information to be provided to participant concerning biological samples*
  12. *Forms and questionnaires for participants*
  13. *Materials for recruitment of participants*
  14. Relevant documents/tools/products
  15. Material/Data Transfer Agreement
  16. Any previous decision(s) made by other Ethical Committees(s)/IRB(s)
  17. Copy of MOU/LOA

**4. Are subjects clearly informed about**

- |  |     |    |
|--|-----|----|
| (a) nature and purpose of study?                           | Yes | No |
| (b) procedures to be followed including alternatives used? | Yes | No |
| (c) physical risks?  | Yes | No |
| (d) intrusive questions?                                   | Yes | No |
| (e) invasive procedures?                                   | Yes | No |
| (f) benefits to be obtained?                               | Yes | No |
| (g) right to refuse to participate or withdraw from study? | Yes | No |

<sup>NB</sup> No. 7,8,9,10,11,12 and 13 must be submitted in both English and Myanmar language.

If there are two Principal Investigators, both shall sign the proposal.

Signature

Name :

Designation:

Signature

Name:

Designation: