

Research Proposal Approval Format

Research Title:

IRB Kanti Children's Hospital

Maharajgunj, Kathmandu – 3, Nepal. Phone: +977-1-4411140.

E-mail: irckanti@gmail.com

For Official Use Only

(Please see the check list before Registration of the application form)

Registration No.:

Registration Date:

Approved Date:

Name of PI:

Total Budget of the Project:

IRB Processing Fee:

Research Site:

Tentative Date of Initiating the Project:

Duration of the Research Project:

Name of Internal Reviewer:

Expedited review: yes/No

Full House Review yes/NO

Name of External Reviewer:

Signature & Seal of IRB kanti Hospital:

Part – I

Passport size
photograph

Administrative Information

1. Research Title:

2. Name and Title of Principal Investigator responsible for the proposed research:

Last (Surname)

Middle (if any)

First name

Nationality:

Citizenship Number with district name from where it was obtained (only for Nepali)

Passport Number (only for non Nepali citizen):

Signature: Date:

Postal Address:

Telephone No.:

Mobile No.:

Fax No.:

e-mail:

Alternate e-mail:

3. Full name of the Institution associated with the Principal Investigator (if applicable) :

Designation:

Postal Address (if different from the address given above):

Telephone No.:

Fax No.:

e-mail:

Website:

4. Declaration of the head of the Institution (if applicable)

If the proposed research is approved, we will allow him/her to conduct the research in this institution.

Signature: Date:

Last (Surname)

Middle (if any)

First name

Designation:

Name of the Institution

Contact/Postal Address:

Telephone No.:

Fax No.:

Institutional e-mail:

Website:

5. Name and Title of Co-investigators responsible for the proposed research

(Use the similar format if more than one):

Last (Surname)

Middle (if any)

First name

Passport size
photograph

Nationality:

Citizenship Number with district name from where it was obtained (only for

Nepali)

Passport Number (only for non Nepali citizen):

Affiliated Institution (if applicable):

Designation:

Signature: Date:

Postal Address (if different from the address given above):

Telephone No.:

Fax No.:

e-mail:

(Use additional sheet if necessary)

6. List the name(s) and institutional affiliation to the researcher(s) (other than co-investigator) to assist your project in Nepal and abroad (if any)

<i>Name</i>	<i>Institution and Address</i>
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(a)	<input type="text"/>	<input type="text"/>
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(b)	<input type="text"/>	<input type="text"/>
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(Use additional sheet if necessary)

7. List the name(s) of Nepali researcher(s) (other than co-investigator) or Nepalese Institution/hospital/NGO(s) etc. from whom you may seek co-operation (if any)

(a)	<input type="text"/>
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(b)	<input type="text"/>
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(Use additional sheet if necessary)

8. List major equipment(s) in relation to your research project you plan to bring/import to Nepal (If applicable)

(a)	<input type="text"/>
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(b)	<input type="text"/>
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(Use additional sheet if necessary)

- 8.1 List details of all specimen(s) (if any) that you may transport from Nepal in relation to your research.

(a)	<input type="text"/>
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(b)	<input type="text"/>
-----	----------------------

(c)	<input type="text"/>
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(d)

8.2 Country of Destination:

Name of Institution:

8.3 Mode of Transportation of Specimen

8.4 How will you ensure duplicate specimens remain in the country?

(If necessary use additional sheet)

9. Is this research part of your Thesis?

Yes

No

If yes,

For what degree and in which subject?

From which university?

From which country?

Part – II

Financial Information

10. Research Title:

11. Name of the funding organization:

Contact information of funding organization or agency:

Postal Address:

Telephone No.:

Fax No.:

e-mail:

Contact person at the funding organization or agency:

Last (Surname)

Middle (if any)

First name

Designation:

Total amount of funds (in NRs / US \$) allocated for the proposed research project:

Itemized budget (in detail) and justify the resources required for the proposed research work (*use additional sheet*)

Part – III

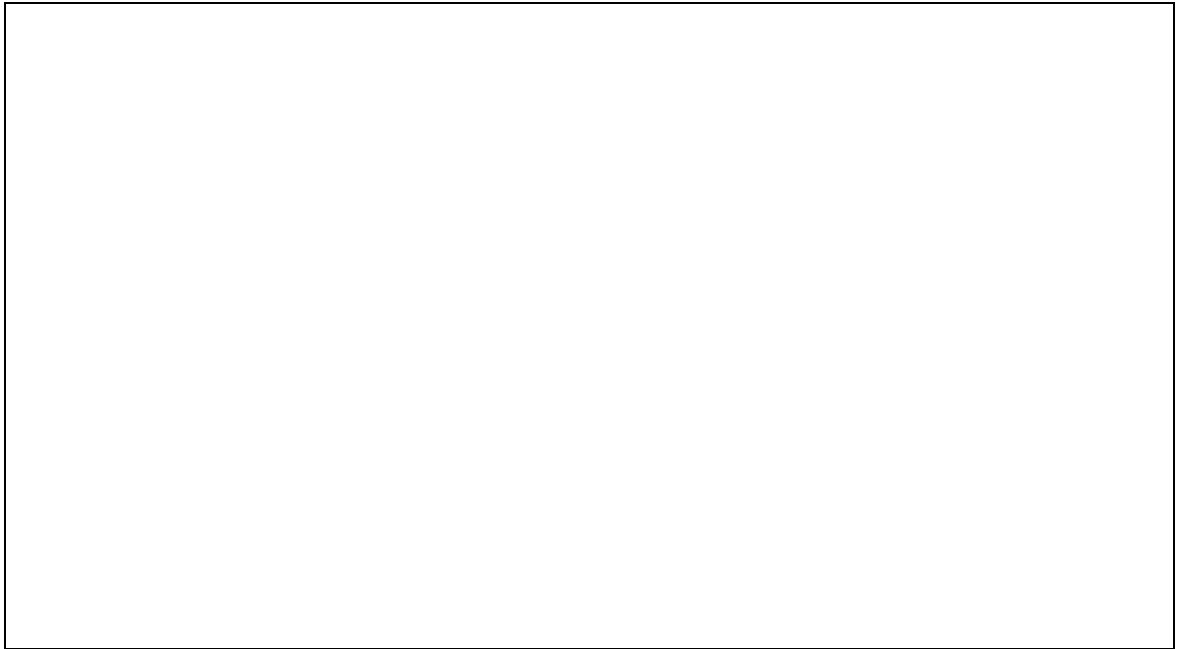
Research Proposal Description

12. Research Title:

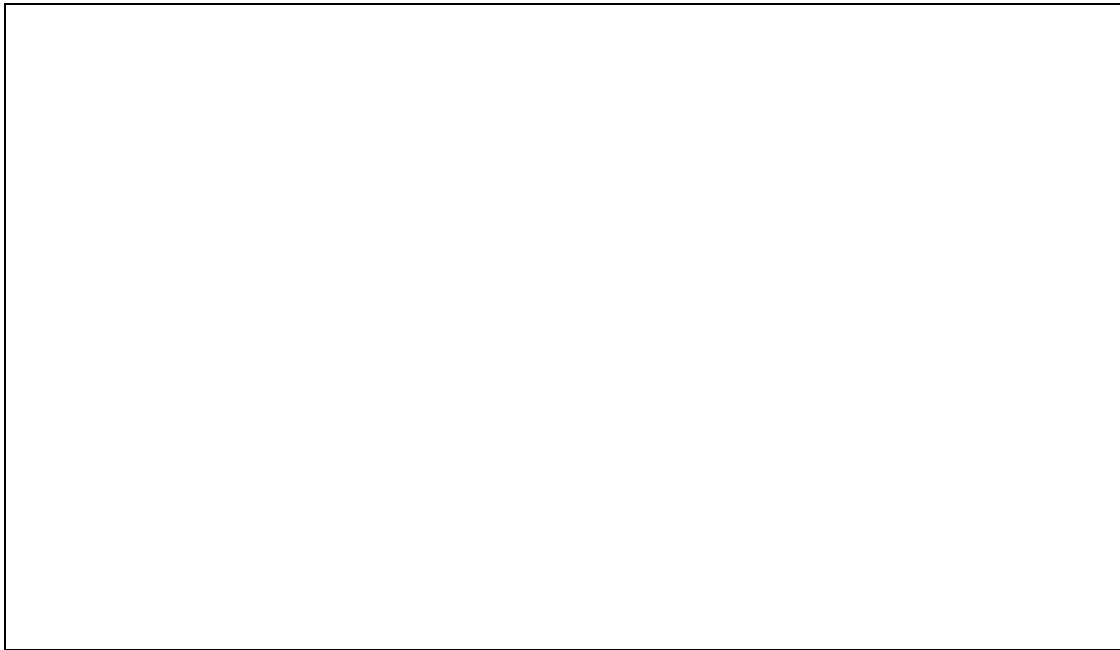
13. Proposal Summary (maximum 500 words):

14. Introduction:

14.1 Background of Study (maximum 500 words):



14.2 Statement of the Problem and Rationale / Justification (maximum 500 words)



14.3 Conceptual framework

14.4 Research Objectives / purpose / aim of the study:

General

Specific

15. Research Design and Methodology

Research Method

Qualitative Quantitative Combined

Study Variables:

Type of Study (Specify):

Study Site and Its Justification:

Study Population (Specify):

Study Unit:

Sampling Methods / Techniques (Specify):

Sample size (with justification):

Criteria for Sample Selection:

Data Collection Technique / Methods (Specify):

Data Collection Tools: (please attached in annex)

Pre-testing the Data Collection Tools (if applicable):

Validity and Reliability of the Study Tools:

Potential Biases (if applicable):

Limitation of the Study:

16. Plan for Supervision and Monitoring:

17. Plan for Data Management and Analysis:

18. Expected Outcome of the Research:

19. Plan for Dissemination of Research Results:

20. Plan for Utilization of the Research Findings (optional):

How is the research project going to strengthen the research capability of the host institution: Nepali Researcher (if submitted from abroad):

21. Work Plan (*should include duration of study, tentative date of starting the project and work schedule / Gantt chart*):

Part – IV

Ethical Consideration

22. Regarding the human participants:

Are human participants required in this research? If yes, provide justification.

Yes (*provide justification*) No

How many participants are required for the research? Explain.

What is the frequency of the participant's involvement in the research?
Explain.

Clearly indicate the participant's responsibilities in the research. What is expected of the research participants during the research?

Are vulnerable members of the population required for this research? If yes, provide justification.

Are there any risks involved for the participants? If yes, identify clearly what are the expected risks for the human participants in the research and provide a justification for these risks.

Are there any benefits involved for the participants? If yes, identify clearly what are the expected benefits for the participants.

23. Informed Consent Form / Ethical Issues:

Statements required in the Informed Consent Form include:

A statement that the human participants can withdraw from the study at any time without giving reason and without fear. State clearly how the participants can opt out the study.

A statement guaranteeing the confidentiality of the research participants.

If required, a statement on any compensation that might be given to the research participant and or their community.

A statement indicating that the participants has understood all the information in the consent form and is willing to volunteer / participate in the research.

Signature space for the research participants, a witness, and the date.

(Informed Consent form should be submitted in English and in the language appropriate to the research participants)

Obtaining the Consent

How informed consent is obtained from the research participants?

Verbal

Written

Please indicate who is responsible for obtaining informed consent from the participants in this research study?

.....

Is there anything being withheld from the research participants at the time the informed consent is being sought?

If yes, explain

.....

Is the research sensitive to the Nepali culture and the social values?

Yes No Explain.

.....

Is health insurance (*if applicable*) being made available to the research participants? If yes, please provide the necessary insurance data.

.....

(Include in consent form)

24. Regarding Clinical Trial:

In case of a clinical trial address the following:

The trial treatment

.....

A detailed explanation of the trial procedures including all invasive procedures.

.....

The potential or direct benefits (if any) for the research participants.

.....

Alternative procedure(s) or treatment(s) that may be available.

.....

The risks, discomforts, and inconveniences associated with the study

.....

Provisions for management of any adverse reactions

.....

The provisions of insurance coverage for any permanent disability or death caused directly by the investigational treatment or procedure.

.....

The provision of including the name and address, including telephone numbers of person to be contacted in case of adverse events or for any information related to the trial.

.....

Is there going to be a transfer of any biological materials from the country? Explain.

.....

Is there a Data Safety Monitoring Board?
If Yes, Mention

.....

Is this trail internationally registered?

.....

Part – V

**ACCEPTANCE OF GENERAL CONDITIONS AND DECLARATION
BY THE PRINCIPAL INVESTIGATOR**

I hereby certify that the above mentioned statements are true, I have read and understood the regulation of the IRC kanti children’s Hospital on the approval of research proposal and will act in conformity with the said regulation in all respects.

If the research is terminated, for any reason, I will notify IRC of this decision and provide the reasons for such actions. I will provide IRC kanti Hospital with a written notice upon the completion of the research as well as a final summary/full report of the research study. If I publish the results in a journal, I shall acknowledge the IRC and shall provide the Council with three copies of any such articles.

.....

Signature of Applicant

Date:

INFORMED CONSENT:

- ⌚ Describe the manner in which informed consent will be obtained.
- ⌚ Indicate what kind of consent (e.g. parental, child, adult, etc) will be used.
- ⌚ If the subjects are children/adolescents ages 7-18 years, an Assent Form must be included with the IRB application. The signed Assent Form along with the Parental/Guardian Consent Form must be retained on file for at least three years after completion of the research project.
- ⌚ If prisoners / pregnant women, or fetuses are to be included in the research sample, it is likely that a full IRB review will be required and additional human subjects' protections will be expected.
- ⌚ If the subjects do not read or comprehend English, you must provide a consent form in their language as well as in English for IRB review and approval.
- ⌚ If you are requesting a waiver of written consent (i.e. a signature on an informed consent form) from the subjects, you **MUST** justify this request by providing an explanation of why obtaining written consent would add additional risk to the subjects and your alternative provisions for informing them about the study.
- ⌚ If consent documents from another site will be used, you will have to indicate this and provide a copy of the authorized consent document and IRB approval with your application.
- ⌚ You will have to provide any other relevant information if necessary. Please be aware that the PI is legally required to retain all signed Informed Consent forms for at least three years after the project terminates
- ⌚ The Informed Consent form must be written at a level that the subjects will understand. Please use simple language, and avoid clinical jargon.
- ⌚ Attach a copy of the written informed consent form (assent or parental consent where applicable). Consent documents **MUST** be in format requested. See examples on line.
- ⌚ If the study uses database or archival data the use of informed consent is not applicable.

CONFIDENTIALITY OF DATA: *Confidentiality of data **MUST** be address for all studies.*

- ⌚ Indicate the extent to which confidentiality of records identifying subjects will be maintained.
- ⌚ Describe the storage and disposal of information where applicable.