

HOSPICE PALLIATIVE CARE ASSOCIATION
RESEARCH ETHICS COMMITTEE
REVIEWER'S EVALUATION FORM
GUIDELINE FOR REVIEWERS

(Check each of the categories and provide additional information where necessary, concentrating on your particular area of expertise)

	YES	NO	COMMENT			
Is there a scientific basis for initiating this study						
Social Value						
Is there equipoise						
Research falls in area of national priority.						
Research is relevant to the health needs of the community under study.						
Research includes special or vulnerable subjects in the study population (e.g. minors, prisoners, mentally handicapped, fetuses etc)						
If yes, is it possible to exclude them and still answer the same study questions?						
If yes, does the proposal include adequate measures to ensure that the populations are well protected.						
The study presents : ■ minimal risk..... <input type="checkbox"/> ■ more than min. risk. <input type="checkbox"/> ■ high risk..... <input type="checkbox"/>	Briefly Comment :					
	N/A	Satisfactory	Requires clarification	Incomplete/missing	Unsatisfactory	COMMENT
Objectives clear & achievable						
Literature reviewed						
Appropriateness of study design						
Methods/ Procedures						
Materials appropriateness						
Statistical considerations						
Study Population appropriateness						

	N/A	Satisfactory	Requires clarification	Incomplete/missing	Unsatisfactory	COMMENT
Selection & recruitment procedures (fairness)						
Incentives to participate (appropriate & non coercive)						
Consent form/statement						
Process for assuring that consent/assent is voluntary						
Privacy and confidentiality						
Research instrument(s)						
Risks/benefits						
Post trial access						

RECOMMENDATIONS

Tick one only

- 1 Approve research proposal **as submitted**
- 2 Approve research proposal **with minor modifications** please specify in the space below).
- 3 Approve research proposal as submitted with the stipulation that **the final research instruments** be submitted for further review and approval prior to initiating direct contact with human subjects.
- 4 Approve research proposal **subject to the following revisions (Please specify below)**.
- 5 **After amendments, return proposal to primary reviewer for further review.....**
- 6 **Reject** the research proposal. (***Please explain in the space provided below***).....
- 7 For discussion at a full sitting of the Committee

ANY ADDITIONAL COMMENTS / CONCERNS / REQUIREMENTS.....

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Signature of reviewer

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Date

Note to reviewers: Please use additional paper if your comments cannot fit in the spaces provided.
August 2006