

OFFICE OF THE DEAN & PRINCIPAL FAKIR MOHAN MEDICAL COLLEGE & HOSPITAL, BALASORE



(Formerly known as Government Medical College & Hospital, Balasore) At/Po/Dist.- Balasore, Pin- 756019 (Odisha)

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1286 No.

/D/FMMCHB

Date: 20:04.22

NOTICE

The Institutional Ethics Committee meeting shall be held on the 3rd week of May 2022. In this regard, the interested students, Residents, Faculty Members are informed to submit their research proposal in proper format in the Office of the undersigned by 4 P.M. of 05.05.2022. Late submission of the proposal shall not be accepted. The IEC form is available in the website www.blsmch.nic.in

> Dean & Principal Fakir Mohan Medical College 2996

Memo No. 1287/D/FMMCHB

Date: 20.04.2)

Copy forwarded to the Chairperson, Institutional Ethics Committee, FMMCH, Balasore for information. You are requested to make it convenient to attend the meeting.

Copy forwarded to all the members of Institutional Ethics Committee, FMMCH, Balasore for information & necessary action.

Copy to the Notice Board/ website for wide circulation.

Fakir Mohan Medical Co

Institutional Ethics Committee, Fakir Mohan Medical College & Hospital, Balasore

Model form to be filled by the Principal Investigator (PI) for Submission to Institutional Ethics Committee (IEC)

(Prepared with reference to ICMR Format)

	to B. Common Co. C.	
Proposa	VI Tit	0.
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	Name, Designation	Address	Signature
	&	Tel & Fax Nos.	
	Qualifications	E mail ID	
PI			
Co-PI/			
Collaborator			
1.			
2.			
3.			
Please attach detailed	curriculum Vita of all	investigators (With sub	ject specific publications
to previous 5 years)			
Tick appropriately			
Sponsor Information:			
1. Indian a) Government Central State Institutional			
b) Private			
2. International Government Private Others			
3. Industry National Multinational			
Contact address of the sponsor:			
Total Budget:			

1. Type of Study:	Clinical			Epidemio	logical	
	Behavioral					
	Other					
			Specify	'		
Whether:	Multicentric					
	Single Center					
2. Status of Review:	New		Revise	.4		
3. Clinical Trials:	New		Kevise	eu (
	/Device/ Herbal R	amadia				
Drug/ vaccines,	Device, Herbark	emedies				
i. Does the study in	volve use of:					
	Drug	\neg	Devices		Vaccines	
	9					
Indian Systems o	f Medicine		Any Other		NA	
Alternate System	of Medicine					
ii. Is it approved ar						
	In India		Europe		USA [
Other countries, Specify						
iii. Does it involve a administration?	Change in use, d	osage, r	oute of		Yes	No
administration?						
If ves Whether [OGCI's/ Any other	Regulat	ory author	rity's	Yes	No
permission is ob		negulat	ory author	ity s	163	INO
permission is ob	tumeu.					
If yes, Date of Pe	ermission:					
iv. Is it an investiga	tional New Drug	?			Yes	No
If yes, IND No:	-					17 MYA217
a) Investigational Brochure Submitted						
b) In vitro studies data						
c) Preclinical Stud	ies done					
d) Clinical Study is:	: Phase I) Phase	:II	Phase III	Phase	e IV
e) Are you aware	if this study/simil	ar			Yes	No
study is being d	one elsewhere?					
If yes, attach de	tails					

4. Brief description of the proposal- Introduction, review of literature, aim(s) &			
objectives justification for study, methodology describing the potential risks & benefits,			benefits,
outcome measures, statistical analysis & whe			
rationale (attach sheet with maximum 500 we	ords)		
5. Subject selection:			
i. Number of subjects			
ii. Duration of study			
iii. Will subjects from both sexes be	recruited:	Yes	No
iv. Inclusion/ Exclusion criteria giver	1:	Yes	No
v. Type of subjects:	Volunteer [Patient	is
vi. Vulnerable subjects Ye	es N	0	
(Tick the appropr	iate boxes)		
Pregnant Women C	Children	Iderly	
Fetus 🔲 II	lliterate	Handicappe	ed
	Seriously ill	Mentally Challe	enged
Economically &			
Socially backward	Any other L		
Special group subjects Yes No			
(Tick the appropriate boxes)			
Captives Institutionalized Employees			
Students Nurses/Dependent Armed forces			; <u> </u>
Any other Staff			
6. Privacy and Confidentiality			
The state of the s	ct identifiers		
	irect identifiers/0		
Completely anonymised/ delinked			
ii. Confidential handling of data by staff		Yes	No
7. Use of biological/hazardous materials		Yes	No
i. Use of fetal tissue or abortus			
ii. Use of organs or body fluids		Yes	No
iii. Use of recombinant/gene therapy Yes No		No	
If yes, has Department of Biotechnology (DBT)			
approval for DNA products been obtained Yes No			No
Iv. Use of pre-existing/ stored/left over samples Yes No		No	
v. Collection for banking / future research Yes No		No	
vi. Use of ionizing/radioisotopes	vi. Use of ionizing/radioisotopes Yes No		
if yes, Has Bhaba Atomic Research Center(BARC)			
approval for radioactive isotopes been obtained? Yes No			No

vii. Use of infectious/bio-hazardous specimens	Yes	No
viii. Proper disposal of material	Yes	No
ix. will any sample collected from the patient be	Yes	No
sent abroad?		
If yes, justify with details of collaborators		
a) Is the proposal being submitted for clearance	Yes	No
from Health Minister's screening committee		
(HMSE) for International collaboration?		
b) Sample will be sent to abroad because (Tick appr	opriate box)	
Facility not available in India		
Facility in India inaccessible		
Facility available but not being accessed		
If so, Reasons		
8. Consent: *Written Oral	Audio-visual	
i. Consent form: (tick the included elements)		
Understandable language Ulternatives to pa	rticipation	
Statement that study involves research Confidentiality of	records	
Sponsor of study Contact information		
Purpose and procedure Statement that consent is voluntary		
Risks & Discomforts Right to withdraw		
Benefits Consent for future use of Biological material		
Compensation for participation Benefits if any on future commercialization		
Compensation for study related injury (eg. Genetic basis	for drug deve	lopment)
* If written consent is not obtained, give reasor	ns:	
ii. Who will obtain consent? PI/Co-PI	Nurse/Couns	selor
Research staff	Any other	
9. Will any advertising be done for requirement of subjects?	Yes	No
(Posters, flyers, Brochure, websites- if so kindly attach a copy)		
10. Risk & benefits:		
i. Is the risk reasonable compared to the anticipated benefits?	Yes	No
to subject/ community/ Country?		
ii. Is there physical/social/psychological risk/discomfit? Ye	s ſ	No
If yes, Minimal or no risk		
More than minimum risk		
High Risk		
iii. Is there any benefit a) to the subject?		
Direct Indirect		
b) Benefit to society		

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11. Data monitoring	Yes	No
i. Is there a data & safety monitoring committee/Board(DSMB)		
ii. Is there a plan for reporting an adverse event?	Yes	No
If Yes, reporting is done to		
Sponsor Ethics Committee DSMB		
iii. Is there a plan for interim analysis of data?	Yes	No
iv. Are there plans for storage & maintenance of all trial	Yes	No
database?		
If Yes, How long?		
12. Is there compensation for participation?	Yes	No
If yes, Monetary In kind		
Specify amount & type:	- Inner	
13. Is there compensation for injury?	Yes	No
If yes, by sponsor by investigator		
by insurance by any other		
Company		
14. Do you have conflict of interest?	Yes	No
(Financial/non-financial)		
If yes, specify		
Checklist for document attached		
Drainst proposal 12 Carias		
Project proposal – 12 Copies		
Curriculum Vitae of Investigators		
Brief description of proposal Patient information sheet		
Informed consent form		
Investigator's brochure for recruiting subjects		
Copy of advertisements/information brochures		
Copy of clinical trial protocol and/or		
questionnaire		
HMSC/DCGI/DBT/BARC clearance if obtained		
Signature of Co DI/	Docionatia	a of DI
Signature of Co-PI/ Signature & Collaborator	Designation	1 01 11
Collaborator		
Place:		
Date:		

THE BASIC PRINCIPLE TO BE FOLLOWED BY THE IEC IS -

No one shall be subjected to torture or to cruel inhumane or degrading treatment or punishment. In particular no one shall be subjected without his consent to medical or scientific treatment (International Convenant on Civil & Political Rights).

REVIEW PROCEDURES OF THE IEC

1. The IEC will review every research proposal on human subjects after the research proposal is being thoroughly scientifically evaluated.

The researcher who will submit the application in proper protocol for biomedical research in human subjects should attach a certificate of scientific evaluation of the essentiality of this research work at least from two senior teachers in or above the rank of assistant professors who have worked and have adequate knowledge in that particular field but are not directly involved in the present study.

*	
I / We, after thorough scientific evaluation of	TIFICATE OF SCIENTIFIC EVALUATION If the relevant and authentic documents available on this right research studies reached in a conclusion that this research
	has been reported in literatures by use of this new drug nder study in this particular condition except in rare
So I / We recommend this research proposal t	to the IEC for necessary approval.
Signature- Name- Seal-	Signature- Name- Seal-

Forwarded through the Head of the Department

HOD Seal