



KMCT
MEDICAL COLLEGE

APPLICATION FORM NO: 2
INSTITUTIONAL ETHICS COMMITTEE,
KMCT MEDICAL COLLEGE
Manassery (P.O), Mukkam, Kozhikode, 673602
APPLICATION FORM FOR EXPEDITED
REVIEW

IEC Ref. No. _____ (For office use)

Title of study:

Principal Investigator (Name, Designation and Affiliation):

1. Choose reasons why expedited review from IEC is requested?

- i. Involve non-identifiable specimen and human tissue from sources like blood banks, tissue banks and left-over clinical samples
- ii. Involve clinical documentation materials that are non-identifiable (data, documents, records).
- iii. Modification or amendment to approved protocol (administrative changes/correction of typographical errors and change in researcher(s))
- iv. Revised proposals previously approved through expedited review, full review or continuing review of approved proposals
- v. Minor deviations from originally approved research causing no risk or minimal risk
- vi. Progress/annual reports where there is no additional risk, for example activity limited to data analysis. Expedited review of SAEs/unexpected AEs will be conducted by SAE subcommittee.
- vii. For multicentre research where a designated EC has approved the proposal, a participating EC may review participating centre specific information and modification in the study proposal through full committee meeting/ expedited review depending on the importance of local consent related issues involved specific to the centre.

viii. Research during emergencies and disasters (See Section 12 of ICMR Ethical Guidelines, 2017).

ix. Any other (please specify)

2. Is waiver of consent being requested ? Yes No

3. Does the research involve vulnerable person? Yes No

If Yes give details:

Signature of PI:

Comments of IEC Secretariat:

Signature of Member Secretary: