**Review of Resubmitted Study Protocol Form**

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| --- | --- |
| MMMC-RERC Code:  | Date of Initial Submission: <dd/mm/yyyy> |
| Study Protocol Title:  |
| Total Participants :  | [ ]  2nd Review [ ]  3rd Review |
| Principal Investigator: <Title, Given Name, Surname> | Telephone no: |
| Initial Review Date: <dd/mm/yyyy> | Last Review Date: <dd/mm/yyyy> |
| Board recommendations and comments from last review:  | Principal Investigators’ response: | Primary Reviewers’ Comments: |
| **Study Protocol** | **Study Protocol** | **Study Protocol** |
| 1. | 1. | 1. |
| 2. | 2. | 2. |
| 3. | 3. | 3. |
| 4. | 4. | 4. |
| 5. | 5. | 5. |
| **ICF** | **ICF** | **ICF** |
| 1. | 1. | 1. |
| 2. | 2. | 2. |
| 3. | 3. | 3. |
| 4. | 4. | 4. |
| 5. | 5. | 5. |
| PRINCIPAL INVESTIGATOR SIGNATURE: |

|  |  |
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| **RECOMMENDATION OF PRIMARY REVIEWER:**[ ] APPROVED[ ]  MINOR MODIFICATION[ ]  MAJOR MODIFICATION[ ]  DISAPPROVED | **JUSTIFICATION FOR RECOMMENDED ACTION**: |
| **PRIMARY REVIEWER** |  | Signature  |  |
| Date: <dd/mm/yyyy> |  | Name | <Title, Given Name, Surname> |