# **SCIENTIFIC REVIEW COMMITTEE**

## RESEARCH Review FORM

Title:

Principal Investigator:

Scientific Reviewer:

**Background and rationale: Justification for conducting the study; results of similar or pilot data; current literature cited**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| [ ]  | Present/Acceptable | [ ]  | Present/Not Acceptable | [ ]  | Absent |

Comments:

**Study aim(s) and hypothesis: Clearly stated purpose of study**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| [ ]  | Present/Acceptable | [ ]  | Present/Not Acceptable | [ ]  | Absent |

Comments:

**Research design and methodology: Adequate to determine stated objectives**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| [ ]  | Present/Acceptable | [ ]  | Present/Not Acceptable | [ ]  | Absent |

Comments:

**Eligibility criteria: Specific inclusion/exclusion requirements**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| [ ]  | Present/Acceptable | [ ]  | Present/Not Acceptable | [ ]  | Absent |

Comments:

**Recruitment methods**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| [ ]  | Present/Acceptable | [ ]  | Present/Not Acceptable | [ ]  | Absent |

Comments:

**Data management**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| [ ]  | Present/Acceptable | [ ]  | Present/Not Acceptable | [ ]  | Absent |

Comments:

**Statistical analysis and sample size**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| [ ]  | Present/Acceptable | [ ]  | Present/Not Acceptable | [ ]  | Absent |

Comments:

**Data and safety management plan**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| [ ]  | Present/Acceptable | [ ]  | Present/Not Acceptable | [ ]  | Absent | [ ]  | N/A |

Comments:

**Qualifications of personnel to conduct the research**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| [ ]  | Present/Acceptable | [ ]  | Present/Not Acceptable | [ ]  | Absent |

Comments:

**Adequacy of institutional resources**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| [ ]  | Present/Acceptable | [ ]  | Present/Not Acceptable | [ ]  | Absent |

Comments:

**Overall assessment**

|  |  |  |  |
| --- | --- | --- | --- |
| [ ]  | Approved | [ ]  | Not approved |

Comments:

**Please summarize the committee’s discussion of the changes requested and/or questions regarding the protocol:**