



**Continuing Medical Education & Research Center  
Qassim Region Research Ethics Committee  
Research proposal reviewer Checklist**

<b>Research title</b>			
<b>IRB number</b>			
<b>Principal Investigator</b>			
<b>Sponsor (if any)</b>			
<b>Reviewer name</b>			
<b>Reviewer position</b>	<input type="checkbox"/> IRB chairman <input type="checkbox"/> IRB deputy of chair	<input type="checkbox"/> IRB coordinator <input type="checkbox"/> IRB member	<input type="checkbox"/> External reviewer

**SECTION A: Introduction & Methods**

Dear reviewer, in case you have comments, please use the specified space.

No.	Item	Yes	No	Not available	Not applicable
1.	Title: Is it suitable /satisfactory?	<input type="checkbox"/>	<input type="checkbox"/>		
2.	Background information and relevant literature review been provided	<input type="checkbox"/>	<input type="checkbox"/>		
3.	Rationale for the study clearly stated in the context	<input type="checkbox"/>	<input type="checkbox"/>		
4.	Objectives clearly specified	<input type="checkbox"/>	<input type="checkbox"/>		
5.	Objectives match the title	<input type="checkbox"/>	<input type="checkbox"/>		
6.	The study design clearly specified	<input type="checkbox"/>	<input type="checkbox"/>		
7.	The study design appropriate to answer the research question(s)	<input type="checkbox"/>	<input type="checkbox"/>		
8.	Study setting mentioned	<input type="checkbox"/>	<input type="checkbox"/>		
9.	The study setting appropriate for the study design	<input type="checkbox"/>	<input type="checkbox"/>		
10.	Inclusion and exclusion criteria complete, appropriate, and justified	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
11.	Sampling technique clearly described	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
12.	Sample size calculation clearly described and appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13.	Clinical procedures fully described and appropriate	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
14.	Tools / devices fully described	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.	Drugs fully described (if present)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16.	The laboratory tests and other diagnostic procedures fully described and appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.	The proposal describe how specimens will be coded, stored, transported, etc	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18.	Data collection tools (questionnaire/form) provided	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
19.	Data collection tools (questionnaire/form) complete& appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20.	Analysis plan provided and appropriate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21.	Limitations of the study mentioned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.	Conflict of interest addressed and seems valid	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>COMMENTS:</b>

**SECTION B: Ethical considerations & miscellaneous items**

Dear reviewer, in case you have comments, please use the specified space.

No.	Item	Yes	No	Not available	Not applicable
23.	The informed consent attached	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
24.	The informed consent available, Is it satisfactory as per NCBE* regulations.	<input type="checkbox"/>	<input type="checkbox"/>		
25.	The participant information sheet attached	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26.	The participant information sheet available, Is it satisfactory	<input type="checkbox"/>	<input type="checkbox"/>		
27.	The study include vulnerable population? If yes, please comment.	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
28.	The confidentiality of the subject's identity positively guaranteed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29.	Time plan of research is provided	<input type="checkbox"/>	<input type="checkbox"/>		
30.	References are provided	<input type="checkbox"/>	<input type="checkbox"/>		
31.	If, references are provided, Are they properly cited and up to date?	<input type="checkbox"/>	<input type="checkbox"/>		
32.	Publication intended	<input type="checkbox"/>	<input type="checkbox"/>		
33.	Team member roles in the research project specified	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>COMMENTS:</b>

**SECTION C: Recommendation**

<input type="checkbox"/> Fit for approval	<input type="checkbox"/> Needs modification	<input type="checkbox"/> Lacks essential requirements
<input type="checkbox"/> Requires consultation	<input type="checkbox"/> Disapproval	

<b>Reasons for Disapproval:</b>

<b>Reviewer name</b>	<b>Reviewer signature</b>	<b>Date</b>
_____	_____	_____

\*NCBE: National Committee of Bio-Ethics

**Note:** The above checklist items are derived from literature review, STROBE checklist, and protocol reviewer tool; IRB- King Abdullah Medical City.