

**Palawan State University**

RES EA RCH ETHICS REVIEW CO M MI T TEE

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US DOHHS-OHRP Registration No.: IRB00014070

PHREB Accreditation No.: L1-2023-058-01

WORKSHEET FOR PROTOCOL INITIAL ASSESSMENT

Instructions to the Investigator/Researcher: Please fill out Part I of this form and be specific with the details required.

PART I

|  |  |
| --- | --- |
| **TITLE OF THE**  **STUDY** |  |
| **PSURERC CODE** *(to be filled out by PSURERC Staff)* |  |
| **PRINCIPAL INVESTIGATOR/LEAD RESEARCHER** |  |
| **INSTITUTION** |  |
| **TYPE OF RESEARCH** *(e.g., clinical, public health, evaluation, market study, behavioral, cultural, social, etc.)* |  |
| **DATA COLLECTION METHOD/S** *(e.g., survey, interview, experiment, laboratory, observation, etc.)* |  |
| **DATA THAT WILL BE COLLECTED (***identify all data that will be collected and provide a brief description for each; e.g., personal identifiers, opinions, biospecimen, secondary numerical data, feedback, etc.)* |  |
| **TARGET PARTICIPANTS** |  |
| **RISK/S OR HARMS TO PARTICIPANT/S** *(identify all; e.g., inconvenience, physical discomfort, emotional distress, stigma, legal sanctions, loss of income, etc.)* |  |
| **RISK/S OR HARMS TO RESEARCHER/S** *(identify all; e.g., inconvenience, physical discomfort, emotional distress, stigma, legal sanctions, loss of income, etc.)* |  |

**PART II** *(to be filled out by the reviewer)*

|  |  |
| --- | --- |
| **ASSESSMENT POINTS** | **EVALUATION** |
| Kind of Data |  |
| Risks or Harms to the Participants |  |
| Risks or Harms to the Researcher/Investigator |  |
| Vulnerability |  |
| **DECISION**  [ ] **Exempt from Review** if data is non-sensitive, risks are negligible, and no vulnerable participants and vulnerability  [ ] **Expedited Review** if data is sensitive, or risks are minimal, or no vulnerable participants and vulnerability  [ ] **Full Board Review** if risks are more than minimal, or vulnerable participants or vulnerability issues are involved | |

Signature over Printed Name of Reviewer Review Date