

# Clinical Research Submission

## 1. Administration

Name of Research Principal: shanmuka sagar

Department: computer science

Study Title: Blockchain

Review Requested: Expedited Review

Submission Date: 24/6/2025

Submitted At: 24/6/2025, 10:47:28 am

Version Number: NBVC254

Date: 17/6/2025

Protocol Number: 1254ABC

Email: test6@gmail.com

Summary: khflhfla hfksahfk fhkshfk

Selected Elements:

- No more than minimal risk to the trial participants
- Research involving clinical documentation materials that are nonidentifiable (data, documents, records);

Other Reason:

## 2. Investigators

### Researchers

Name: sagar

Designation: software developer

Qualification: B.Tech

Department: CSE

Investigator Type: Guide

Email: test6@gmail.com

Alternate Gmail: shanmukasagar2021@gmail.com

Contact: 9999999999

Approved: Yes

Approval Token: fa6f9df0-cb1d-43dc-a010-0ec7aab7d441

,

Name: Bharath

Designation: VFX

Qualification: B.Tech

Department: CSE

Investigator Type: Co-investigator

Email: test6@gmail.com

Alternate Gmail: shanmukasagar2023@gmail.com

Contact: 9999988888

Approved: Yes

Approval Token: bd131fae-9b6e-45a6-8de2-4cb42e95a98f

,

Name: Varshitha Reddy

Designation: software engineer

Qualification: B.Tech

Department: CSE

Investigator Type: hod

Email: test6@gmail.com

Alternate Gmail: nimstech25@gmail.com

Contact: 6666666666

Approved: Yes

Approval Token: a6b4e133-0474-4545-8306-0a1cb90e028e

,

Name: shanmuka sagar

Designation: software engineer

Qualification: B.Tech

Department: CSE

Investigator Type: Principal Investigator

Email: test6@gmail.com

Alternate Gmail: shanmukasagar2019@gmail.com

Contact: 8688345501

Approved: No

Approval Token: 1059889c-f283-4ba0-8871-3f5616bafdcc

## Funding Details

Funding Source: self-funding  
Total Estimated Budget: ₹25410

## Overview of the Research

Summary: hfkhskaflhfk jfhskfhksfhk  
Type of Study: retrospective  
Other Study Type: null  
External Laboratory Involved: Yes  
Specify (if External Lab): hsfkshfk kfhskf  
Justification: tetetg  
Sample Size: 2514  
Email: test6@gmail.com

## Participants

Type of Participants: vulnerable  
Specify (if applicable): N/A  
Justification: kdhkghdkg khgdkhgd  
Additional Safeguards: dhghdkgdg  
Reimbursement Details: gdgd dgdg  
Advertisement Details: dgdgdgd dgdgsgdg  
Payment Type: Yes  
Advertisement Type: Yes  
Email: test6@gmail.com  
{/\* Vulnerable Groups \*/}  
Vulnerable Groups:  
Economically and socially disadvantaged  
,  
Unduly influenced due to fear/benefits  
,  
Children (up to 18 years)

## Benefits Details

Reimbursement Details: nfhhf fg fhf  
Risk Management Strategy: fh fhfhfhfhf f

Anticipated Type of Benefits: Yes  
Participant Benefits: Direct  
Society Benefits: Direct  
Improvement Benefits: Direct  
Email: test6@gmail.com

## Consent Details

Seeking Waiver of Consent Type: Yes  
Specify: By Questionnaire  
Email: test6@gmail.com  
Version Number: fhfh fhfh  
Date: 25/6/2025  
Subject: Yes  
Certificates: Yes  
{/\* Language details \*/}  
Selected Languages: Telugu

### Telugu

Version: fhfhfh fhfh  
Date: 26/6/2025  
{/\* PIS selected items \*/}  
PIS Selected Items:  
Statement that study involves research & explain purpose of research  
,  
Statement that consent & participation are voluntary  
,  
Expected Risks and benefits to the study subject  
{/\* Summary \*/}  
Summary: hhfhfh fhfhfh fhfh  
{/\* Waiver Selected Elements \*/}  
Waiver Selected Elements:  
research cannot practically be carried out without the waiver and the waiver is scientifically justified  
,  
retrospective studies, where the participants are de-identified or cannot be contacted  
,  
research on anonymized biological samples/data

## Compensation & Payment Details

Waiver of Consent Type: No

Specify:

Compensation for Research-Related Injury: No

Specific Compensation Details:

Email: test6@gmail.com

## Storage and Access Details

Control Details:

Access Details:

Sample Access Type: No

Sample Details:

Document Access Type: No

Drugs Access Type: No

Email: test6@gmail.com

null

## Additional Support Information

Support Type: No

Additional Details:

Email: test6@gmail.com

## Declaration

### Selected Declarations:

- I/We certify that the information provided in this application is complete and correct.  
,
- I/We confirm that all investigators have approved the submitted version of proposal  
/related documents  
,
- I/We confirm that this study will be conducted in accordance with the latest ICMR  
National Ethical Guidelines for Biomedical and Health Research involving

HumanParticipants and other applicable regulations and guidelines including responsible

- I/We will comply with all policies and guidelines of the institute and affiliated / collaborating institutions wherever applicable

Principal Investigator: Shanmuka sagar

Date: 25/6/2025

Signature: shanmuka sagar

## 14. Checklist

**Good Clinical Practice (GCP) training of investigators in last 3 years**

 [View File](#)

**Brief CV of all Investigators (updated, signed and dated)**

 [View File](#)

**Cover letter enlisting all documents enclosed**

 [View File](#)

**Application for waiver of consent if applicable**

File: null

**MOU between collaborating partners**

File: null

**Assent form for minors (12-18 years)**

File: null

**Copy of the detailed protocol (clearly identified numbered and dated) and synopsis**

 [View File](#)

**CRF / Interview guides / FGDs (English and translated)**

 [View File](#)

**EC clearance of other centers**

File: null

**Participant Information Sheet (PIS) and Informed Consent Form (ICF)**

 [View File](#)

**Advertisement / material to recruit participants**

File: null

**Insurance policy / participant coverage details**

File: null