DLSMHSI-IEC Form 3E/V1/2012

Standard Operating Procedures Effective Date: October 2012

NON-COMPLIANCE (Deviation/Violation) REPORT

To the Principal Investigator:

in nature.

All <u>major</u> non-compliance with the conditions of IEC approval of the Protocol must be submitted not later than <u>7 days</u> of discovery. Reports of minor/administrative deviations can be submitted with the Continuing Review Application. Failure to report major protocol deviations/violations promptly is in itself an instance of non-compliance.

If changes are made to the IEC-approved Protocol, such changes must be submitted as Protocol Amendment, and not as Protocol Deviation/Violation.

Please obtain an electronic copy of this Form, fill-out the requested information, and make your submission both in electronic version and hard copy. Print in letter-sized paper with printer default set at A4.

I. PROTOCOL INFORMATION	IEC Protocol Tracking No.	
	12011000011110011110	
Study Protocol No.	Protocol Approval Date: <dd mm="" yy=""></dd>	
Study Initiation Date: <dd mm="" yy=""></dd>	Expected End Date: <dd mm="" yy=""></dd>	
Title:	Version Number, Date	
Name of Principal Investigator	Contact Nos.:	
Sponsor/CRO	<u>I</u>	
Study Site		
Type of Review (To be determined by IEC)		
Full Board		
☐ Expedited		
II. INFORMATION REQUIRED	NON-COMPLIANCE REPORT SUBMISSION DATE <dd mm="" yy=""></dd>	
Nature of the Report:		
Minor Protocol Deviation - A non-compliance with defined pro		

Major Protocol Deviation/ Violation: A non-compliance with defined procedures, as described in the IEC-approved

Date Resolved: <dd/mm/yy>

protocol that impacts participant safety or data integrity.

2. Date of Protocol Deviation/ Violation: <dd/mm/yy>



De La Salle Medical and Health Sciences Institute Dasmariñas, Cavite 4114

INDEPENDENT ETHICS COMMITTEE

Cavite (046) 481-8000/ Manila (02) 988-3100 Local 8042

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Details of Protocol Deviation/Violation			
Details of corrective/preventive action	taken by PI/ Sponsor		
5. Risk Assessment (include impact on s	safety of participants, and on scientific/ ethical acc	ceptability of the protocol)	
I declare that the above information/statements are true and correct to the best of my knowledge. I declare that the study is being conducted in keeping with the conditions of IEC approval of the Protocol.			
Signature Over Printed Name of Pr	incipal Investigator	Date:	
III. IEC RECOMMENDATION	Specifics	5	
□ UPHOLD ORIGINAL APPROVAL WITH NO FURTHER ACTION □ REQUEST INFORMATION □ RECOMMENDED FURTHER ACTION			
Reviewer Primary Secondary			
	Reviewer's Signature Over Printed Name	Date	