

UITM RESEARCH ETHICS COMMITTEE (REC) GUIDE FOR APPLICANTS

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INTRODUCTION

Requirement for research ethics approval



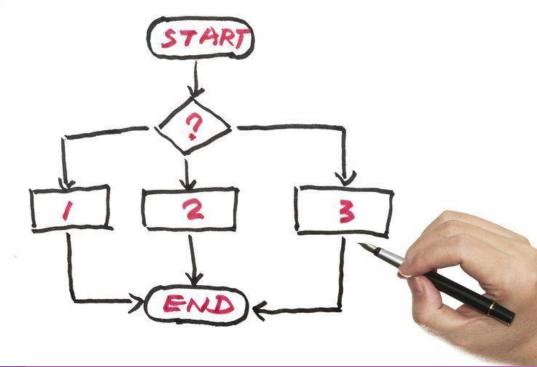
UiTM REC approval is mandatory for all research involving human subjects*, conducted by:

- i. UiTM staff
- ii. UiTM students
- iii. external parties conducting research on UiTM staff and students, and/orin UiTM premises

*UiTM Policy for Research Ethics Involving Human Subjects (2019)

REC 1 FORM

Flowchart of Research Ethics Approval Carta Alir Kelulusan Etika



Categories of reviews

1 1/21/2020





Flowchart I: Research Ethics Approval Application for Minimal Risk (MR) Research

Research Ethics Committee Universiti Teknologi MARA 40450 SHAH ALAM Tel: 03 – 5544-8069, Faks: 03 – 5544-2096/2767



ICATION 20205

Flowchart I: Research Ethics Approval Application for Minimal Risk (MR) Research

| Flow | Process/ Activity | Record/reference | Personnel | Timeline |
|------|---|--|------------------------|---|
| | Complete and submit the relevant ethics approval application forms to the JPF/JPN secretariat: 1. Application Form for Ethics Approval (REC 2). 2. Research Risk Classification Form (REC 3). 3. Subject Information Sheet (REC 4) and Assent form (REC12) (if applicable). 4. Checklist for Applicants (REC 5). OR Application of Exemption from Ethical Review (REC 11) (if applicable). | Forms: REC 2,3,5 and 4/and 12 Form: REC 11 (If applicable) | Applicants | |
| | Screening of REC 2,3,5 and 4/and 12 or REC 11 forms JPF/JPN secretariat to submit completed forms (softcopy) and related documents to REC secretariat by uploading at the following link: https://forms.gle/KdyINMNsLT2UR6fL7 or email recultmsubmit@gmail.com | Cover letter from JPF/JPN Forms REC 2,3,5 and 4/and 12 or REC 11 (softcopy). Other relevant documents. | JPF/JPN secretariat | Within 14 working days upon submission* |

| | Screening of REC 2,3,5 and 4 /and 12 or REC 11 forms | Forms REC 2,3,5 and 4 /and 12 or REC 11. Other relevant documents. | REC Secretariat | 7 working days* |
|----------|--|--|--------------------------------------|-----------------|
| | Reviewing process and decision by the reviewer: I. Approved II. Conditional Approvals: • Minor corrections: Amendments within one (1) month. • Major corrections: Amendments within three (3) months. | Forms REC 2,3,5 and 4 /and 12 or REC 11. Other relevant documents. | REC Members/ Associate Members | 7 working days* |
| | If decision by reviewer is MMR refer to Flowchart II. | | | |
| \smile | Notification to the applicants | Notification of decision via email | REC Secretariat | 7 working days |

*Considering no amendments required

Terms of Submission of Ethics Approval Application

- 1. All incomplete forms will be returned.
- 2. Only approved applications by JPF/JPN will be submitted to REC.
- Any data collection instruments requiring respondent/subject/participant input must be prepared in both Malay and English languages, and other language(s) understood by the respondent/subject/participant (if necessary)
- Submission of Research Completion Report Form (REC 8 form) within 2 months upon completion of research.



Flowchart II: Research Ethics Approval Application for More than Minimal Risk (MMR) Research

Research Ethics Committee Universiti Teknologi MARA 40450 SHAH ALAM Tel: 03 – 5544-8069, Faks: 03 – 5544-2096/2767



Flowchart II: Research Ethics Approval Application for More than Minimal Risk (MMR) Research

| Flow | Process/ Activity | Record/reference | Personnel | Timeline |
|------|---|--|------------------------|---|
| | Complete and submit the relevant ethics approval application forms to the JPF/JPN secretariat: 1. Application Form for Ethics Approval (REC 2). 2. Research Risk Classification Form (REC 3). 3. Subject Information Sheet (REC 4) and Assent form (REC12) (if applicable). 4. Checklist for Applicants (REC 5). OR Application of Exemption from Ethical Review (REC 11) (if applicable). | Forms: REC 2,3,5 and 4/and 12 Form: REC 11 (If applicable) | Applicants | |
| | Screening of REC 2,3,5 and 4/and 12 or REC 11 forms JPF/JPN secretariat to submit completed forms (softcopy) and related documents to REC secretariat by uploading at the following link: https://forms.gle/KdyINIMNsLT2UR6fL7 or email <u>recultmsubmit@omail.com</u> Submission to REC at least two (2) weeks before the subsequent meeting (3 rd Tuesday of each month). | Cover letter from JPF/JPN Forms REC 2,3,5 and 4/and 12 or REC 11 (softcopy). Other relevant documents. | JPF/JPN secretariat | Within 14 working days upon submission* |

| | Screening of REC 2,3,5 and 4 /and 12 or REC 11 forms | Forms REC 2,3,5 and 4 /and 12 or REC 11. Other relevant documents. | REC Secretariat | 7 working days" |
|------------|--|--|------------------------------|--|
| | Full board presentation by applicants to REC committee 1. Approve II. Conditional Approval: • Minor corrections: Amendments within one (1) month. • Major corrections: Amendments within three (3) months. III. Reject | Forms REC 2,3,5 and 4/12 or REC 11. Other relevant documents. | Applicants, REC Committee | 3 rd Tuesday of each month |
| \bigcirc | Notification to the applicants | Notification of decision via email | REC Secretariat | 14 working days |

*Considering no amendments required

Terms of Submission of Ethics Approval Application

- 1. All incomplete forms will be returned.
- 2. Only approved applications by JPF/JPN will be submitted to REC.
- Any data collection instruments requiring respondent/subject/participant input must be prepared in both Malay and English languages, and other language(s) understood by the respondent/subject/participant (if necessary)
- Submission of Research Completion Report Form (REC 8 form) within 2 months upon completion of research.

Terms of condition for Clinical Trials

 Submission of Monitoring of Ongoing Studies Form (REC 6 Form) every 6 or 12 months upon approval.

REC 2 FORM

Application Form for Ethics Approval Borang Permohonan Kelulusan Etika



REC 2 FORM

REC 2 consists of the following 5 sections:

- I. Part A: Researcher Details
- II. Part B: Research Details
- III. Part C: Funding
- IV. Part D: Agreement to conduct the research project.
- V. Part E: Verification of Faculty/State Research Committee

Applicants are required to complete **ALL** sections.

BAHAGIAN A: Maklumat Penyelidik

Part A : Details of Researcher

Tajuk Penyelidikan : Title of Research Project :

Nama Penyelidik*: Name of Researcher :

Nama Penyelia: Name of Supervisor :

Alamat Jabatan/ Hospital/ Institut: Address of Department/ Hospital/ Institute :

No.Telefon/ Emel : Contact No/ Email :

Nama Koordinator Kajian**: Name of Study coordinator:

No.Telefon/ Emel**: Contact No/ Email:

Sarjana Muda / Undergraduate

🔲 *Pasca Siswazah / Postgraduate

Staf/Pensyarah / Staff/Lecturers

🔲 *Pihak Luar / External

Title should contain the independent variable, dependent variable and population. Do not exceed 15 words

Researcher can be undergraduate student/postgraduate student/ staff or external applicant

Supervisor (for undergraduate or postgraduate students)

Department, Faculty, Campus or External Institution

Contact details of the researcher (not the supervisor)

This section is for **Clinical Trials** only. If the study is not a Clinical Trial, please write "not applicable". **Do not** leave blank.

Please select (tick) the appropriate option

| | idikan ini memerlukan kelulusan Jawatankuasa Etika Penyelidikan Luaran? |
|---|---|
| (contoh MREC Does the resea MREC) |) arch require an external Research Ethics Committee approval? (e.g. |
| - | |

ð - 81

Ya / Yes External Committee Name:

Tidak / No

Dana Penyelidikan: Ada/ Tiada Research funding: Yes/ No

Jika ada, sila lengkapkan bahagian C. If obtained, please complete section C.

Select (tick) "Yes" if the study involves premises governed by external bodies (eg. Studies conducted at the Ministry of Health hospitals require approval of the Medical Research Ethics Committee (MREC). Provide the name of the external Research Ethics Committee.

Select (tick) "Yes" if the study is funded Select (tick) "No" if the study is not funded

BAHAGIAN B: Maklumat Penyelidikan Part B : Research Details

7 1/2020

| Bahagian B1 Part B1 | | |
|--|--|---|
| Temubual Interviews Kumpulan focus Focus groups Soal selidik | Kajian kes Case study Kajian klinikal Clinical trial study Kajian intervensi | Select (tick) the appropriate research details (you may select more than one) |
| Questionnaires Kajian tindakan Action research Pemerhatian Observation | Intervention study Rekod peribadi Personal records Analisis data sekunder Secondary data analysis Lain-lain, (nyatakan) Others (provide details): | |

| 1. | t B2 Latar belakang: Background: |
|----|--|
| | (Keterangan ringkas tentang masalah yang dikaji dan penyemakan literatur untu menyokong keterangan tentang masalah yang dikaji. Sila lampirkan sekiranya ruan tidak mencukupi) |
| | (A brief explanation of the problem to be studied and literature review to support. Pleas append if more space is required) |
| | Penyataan masalah: Problem statement: |
| | Rujukan: References: |
| | |

Briefly describe the study. The description should include the independent variable, dependent variable and the population

•

Include only **references cited** in the Background Section

| Objektif penyelidikan: Research objectives: | |
|--|------------------------------|
| | Should Use measu |
| Faedah yang dijangka: Expected benefits: | Briefly study s and ex |

2.

3.

1 11/21/2020

Should be numbered. Jse measurable verbs (eg. to compare, to measure etc.)

Briefly describe social benefits to the study subjects/researchers/stakeholders, and expansion of the existing knowledge

| 4. | Tarikh penyelidikan bermula-berakhir: Date of research commencement-end: | For undergraduates studies, at least two semesters or until the study is completed. (eg: March 2020 – February 2021) |
|----|--|--|
| 5. | Jangkaan tarikh pengumpulan data bermula: Expected date of initial data collection: | Date should be after REC approval. Allow at least two months interval from the date of complete document submission (eg. if completed documents are submitted in March 2020, expected date of initial data collection should be in May 2020) |
| | APPROVED | |

| 6. | Lokasi penyelidikan dijalankan: Location of research: | | Location should be specific (eg: Faculty of Sports Science, UiTM ShahAlam, Dataran Kemerdekaan etc.) | | |
|----|---|-----------------------------|--|--|--|
| | | | | | |
| 7. | Rekabentuk penyelidikan dan metodologi: Research design dan methodology: | Describe th (eg. in a qu | e study design (eg. cross sectional/ experimental) ne methodology i.e. data collection procedure, tools etc. lestionnaire-based study describe the number of domains, items and scoring of the questionnaire) | | |
| 8. | Kriteria kemasukan dan pengecualian: Inclusion and exclusion criteria: | | | | |
| | Kriteria kemasukan: Inclusion criteria: | | stics of the samples/ respondents to be included and rom the study | | |
| | Kriteria pengecualian: Exclusion criteria: | | | | |
| 9. | rates. | | e sample size (taking into consideration dropout/attrition | | |
| | Calculation: Pengiraan: | | e calculation for sample size. Ilation is based on a previous study, please cite and reference. | | |

| 10. | Carta alir penyelidikan: Research flowchart: | A summary of Part B2 (Item7) |
|-----|---|---|
| 11. | Analisa statistik: Statistical analysis: | Should appropriately address the Objectives in Part B2 (2). Explain whether descriptive or inferential statistics will be used. If inferential, explain the type of statistical test to be used (eg T-test, ANOVAetc.) |



Bahagian C: Maklumat Dana Part C: Funding details

| 1. | Geran / Sumber: Grant / Source: | If the study is funded, please provide details. If the study is not funded, please state "Not Applicable" |
|----|---|---|
| 2. | Jumlah peruntukan: Total allocation: | |
| 3. | Jangkamasa peruntukan: Duration of grant: | |
| 4. | Yuran perkhidmatan penyelidik / professional : Investigator services / professional fees: | |
| 5. | Yuran kepada UiTM : UiTM fees : | |
| 6. | Lain-lain kemudahan / sumber disediakan organisasi penaja / syarikat kepada penyelidik: Other facilities/resource provided by sponsoring organisation / company to investigator: | |
| 7. | Nama dan alamat penyelidik tempatan / Organisasi Penyelidikan Klinikal (OPK) yang ditaja: Name and address of local sponsor / Clinical Research Organisation (CRO): | Please complete this section if the study is a sponsored clinical trial. If the study is not a clinical trial, please state "Not Applicable" |

GUIDELINES TO ETHICS APPLICATION 2020

Bahagian C: Maklumat Dana Part C: Funding details

| 1. | Geran / Sumber: Grant / Source: | N/A | If the study is funded, please provide details. If the study is not funded, please state "Not Applicable" |
|----|---|-----|---|
| 2. | Jumlah peruntukan: Total allocation: | N/A | |
| 3. | Jangkamasa peruntukan: Duration of grant: | N/A | |
| 4. | Yuran perkhidmatan penyelidik / professional : Investigator services / professional fees: | N/A | |
| 5. | Yuran kepada UiTM : UiTM fees : | N/A | |
| 6. | Lain-lain kemudahan / sumber disediakan organisasi penaja / syarikat kepada penyelidik: Other facilities/resource provided by sponsoring organisation / company to investigator: | N/A | |
| 7. | Nama dan alamat penyelidik tempatan / Organisasi Penyelidikan Klinikal (OPK) yang ditaja: Name and address of local sponsor / Clinical Research Organisation (CRO): | N/A | Please complete this section if the study is a sponsored clinical trial. If the study is not a clinical trial, please state "Not Applicable" |

GUIDELINES TO ETHICS APPLICATION 2020

Bahagian D: Pengesahan persetujuan menjalankan penyelidikan.

Part D: Agreement to conduct the research project.

7 May 2020

Mesti dilengkapkan dan ditandatangani oleh semua ahli kumpulan penyelidikan. Must be completed and signed by all members of the research group.

1. Penyelidik utama (untuk dilengkapkan oleh Staf Akademik/Pelajar Pascasiswazah sahaja)

Principal Researcher (to be filled by Academic Staf/Post-graduate Student only)

| Nama: Name: | |
|--|------------------|
| No.Staf/No. Pelajar: Staff ID/Student ID: | |
| Jawatan/ Kepakaran: Position/ Specialisation: | |
| Jabatan: Affiliation: | |
| Telefon pejabat: Office: | |
| Telefon bimbit: Mobile phone: | |
| Emel: Email: | |
| Tandatangan: Signature: | Tarikh: Date: |

This section is to be completed and signed by staff/ postgraduate students only

2. Penyelia (sekiranya ada) Supervisor (If any)

+

1 May 2020

| F. | | |
|------------------|-----------------------------------|-------------------|
| | Nama: Name: | |
| $\left \right $ | No.Staf: | |
| | Staff ID: | |
| | Jawatan/ | |
| | Kepakaran: | |
| | Position/ | |
| ┝ | Specialisation: Jabatan: | |
| | Affiliation: | |
| | Telefon pejabat: Office: | |
| | Telefon bimbit: Mobile phone : | |
| | Emel: Email: | |
| | Tandatangan: Signature: | Tarikh : Date: |
| | | |

This section is to be completed and signed by **supervisors** only (if any) If there are no supervisors involved, please state "Not Applicable"

3. Penyelidik Bersama *Co-Researcher*

| Nama: Name: | |
|--|------------------|
| No.Staf/No. Pelajar: Staff ID/Student ID: | |
| Jawatan/ Kepakaran: Position/ Specialisation: | |
| Jabatan: Affiliation: | |
| Telefon pejabat: Office: | |
| Telefon bimbit: Mobile phone : | |
| Emel: Email: | |
| Tandatangan: Signature: | Tarikh: Date: |

(Tambah sekiranya perlu. Add if necessary)

1 May 2020

This section is to be completed and signed by undergraduate students/ coresearchers (may be more than one) Please duplicate the tables for addition of more than one undergraduate student/ coresearcher.

Bahagian E: Pengesahan Jawatankuasa Penyelidikan Fakulti/Negeri

Part E: Verification from Faculty/State Research Committee

Penyelidikan melibatkan risiko minima. Dicadangkan untuk mendapat kelulusan tanpa pembentangan.

Minimal risk research. Recommend for approval without presentation.

Penyelidikan melibatkan risiko melebihi minima. Dicadangkan untuk mendapat kelulusan dengan pembentangan.

More than minimal risk research. Recommend for approval with presentation./

Ulasan jika ada:

Comment if any:

Minimal risk means that the probability and magnitude of harm or discomfort anticipated in the research are not greater in and of themselves than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests.

| Signed | | |
|---|-------------------------------|------------------|
| Tandatangan Signature: Pengerusi/Pengerusi Ganti JK Penyelidikan Fakulti/Negeri Chairman/Co-chairman of Faculty/Stat Research Committee | Cop rasmi: Official stamp: | Tarikh: Date: |
| 1 May 2020 | | |

To be **signed**, **stamped** and **dated** by the **Chair or Co-Chair of Faculty/State Research** Committee after forms have been checked for completion, and amendments made according to suggestions by the Research Committee

REC 3 FORM

1 1/2020

Research Risk Classification Form Borang Klasifikasi Risiko Kajian

REC 3 FORM

7 1/18/2020

Contains 4 sections:

- i. Subject profile
- ii. Privacy and confidentiality
- iii. Risk of harm
- iv. Other ethical issues

Please answer each item in the REC 3 form by selecting (ticking) the option that applies. If "Yes" is selected, please describe details of risk and how the risk is minimized

Do not leave any items blank. If any of the items in the REC 3 form does not apply to your research, please state "Not Applicable"

SILA JAWAB KESEMUA SOALAN DI BAWAH.

Sekiranya jawapan anda 'Ya' kepada mana-mana soalan di bawah, sertakan maklumat ringkas di ruang yang disediakan.

PLEASE ANSWER ALL QUESTIONS BELOW.

7 May 2020

If your answer is 'Yes' to any of the following questions, please include a brief information in the space provided.

| | SUBJECTS' PROFILE | No | Yes | Brief description |
|----|---|----|-----|-------------------|
| 1. | Adakah subjek kanak-kanak (Umur di bawah 18 tahun)? Are the subjects children (under 18 years old)? | | | |
| 2. | Adakah subjek daripada golongan rentan? (cth: kecelaruan mental, kelainan keupayaan intelektual, berkeperluan khas, minoriti dan sebagainya.) Are the subjects from a particular vulnerable group? (e.g. mental disorder, mentally challenged, disabled, minority, disadvantaged group etc.) | | | |
| 3. | Adakah subjek/pesakit ini memerlukan rawatan terminal? Are any of these subjects/patients in terminal care? | | | |

REC 3 / 2019 Rev 2 (2020)

| 4. | Adakah subjek tidak boleh atau tidak berupaya memberi izin? (spt: izin akan diambil secara tidak langsung daripada penjaga sah dan sebagainya.) Are any of these subjects unable or are incapable of giving consent? (i.e. consent will be obtained indirectly from a legal guardian etc.) | |
|----|--|--|
| 5. | Adakah subjek diberi sebarang emolumen untuk menyertai kajian? Are the subjects given any form of emolument to participate? | |

T May 2020

| | PRIVACY AND CONFIDENTIALITY | No | Yes | Brief description | |
|-----|---|----|-----|-------------------|---------------------------------------|
| 6. | Adakah data yang dikumpul berpotensi untuk menyebabkan ketidak selesaan, keaiban atau gangguan psikologi kepada subjek? (cth: orientasi seksual dan sebagainya.) Does any of the data collected have the potential to cause discomfort, embarrassment, or psychological harm to the subjects? (e.g. sexual orientation etc.) | | | | PRIVACY |
| 7. | Adakah penyelidikan anda melibatkan langkah-langkah yang tidak dimaklumkan kepada subjek? (cth: pemerhatian rahsia dan sebagainya.) Does your research involve measures undeclared to the subjects? (e.g. covert observations etc.) | | | | |
| 8. | Adakah data yang dikumpulkan akan didedahkan kepada pihak lain yang tidak terlibat dalam penyelidikan? (cth. agensi kerajaan) Will the collected data be made available to other parties not involved in the research? (e.a. government agencies) | | | | |
| Mar | 2020 | | | | GUIDELINES TO ETHICS APPLICATION 2020 |

| | RISK OF HARM | No | Yes | Brief description | |
|-----|--|----|-----|-------------------|---|
| 9. | Adakah anda akan mengumpul sampel biologi contohnya. cecair badan? Will you be collecting biological samples e.g. body fluids? | | | | |
| 10. | Adakah anda mempunyai akses kepada apa-apa maklumat yang akan membolehkan pengenalpastian subjek secara individu? Do you have access to any information that will allow the identification of individual human subjects? | | | | Assess |
| 11. | | | | Ma | Assess asure RISK Evaluate Manage |
| 12. | | | | | |
| 13. | Adakah subjek bukan atlet atau pesakit dengan penyakit kronik? Are the subjects non-athletes or patients with chronic illness? | | | | |
| 14. | Adakah mereka akan melalui senaman berintensiti maksimum? Will they be subjected to maximal exercise intensity? | | | | ES TO ETHICS APPLICATION 2020 |

| 15. | Adakah terdapat sebarang prosedur/ ubat yang terlibat? Is there any form of procedure/ medication involved? | |
|-----|--|--|
| 16. | Adakah terdapat ubat atau peranti yang digunakan dengan tanpa indikasi yang diluluskan? Is there any drug or device used with an unapproved indication? | |
| 17. | Adakah keizinan kajian telah didapati daripada sesiapa selain pesakit/subjek? Can the informed consent be obtained from anyone other than the patient/subject? | |
| 18. | Adakah terdapat sebarang kemudaratan kepada subjek jika dia memilih untuk menarik diri? Is there any kind of risk to the subject if he/she chose to withdraw? | |

| 19. | Adakah sampel yang dikumpul akan disimpan untuk penyelidikan di masa hadapan? Will the samples obtained be stored for future research? | | | |
|-----|---|--|--|--|
| 20. | Adakah anda bercadang untuk menganalisa sampel selain tujuan asal ia dikumpulkan? Do you propose to analyse the sample outside of the original purpose for which it was collected? | | | |
| 21. | Jika 'Ya' pada No. 20, adakah anda mendapat persetujuan daripada peserta untuk tujuan ini? If 'Yes' to No. 20, have you obtained consent from participants for this purpose? | | | |
| 22. | Apakah jenis sampel biologi yang dikumpul? (Sila nyatakan jumlah dan kekerapan.) What type of biological samples collected? (Please indicate amount and frequency.) | | | |

| | | OTHER ETHICAL ISSUES | No | Yes | Brief description |
|--------------|-----|--|----|-----|-------------------|
| ×2020 | 23. | Adakah terdapat sebarang isu etika lain yang tidak dinyatakan dalam senarai semak ini? Are there any other ethical issues not stated in this checklist? | | | |
| 1 11/37 2020 | | (이 비행) 이 가지 않는 것이 가지 않는 것이 이 것이 있는 것이 없는 것이 없이 없는 것이 않이 않 | | | |

REC 4 FORM

1 May 2020

Subject Information Sheet Borang Maklumat Subjek

REC 4 FORM

Contains 2 sections:

i. Borang Maklumat Subjek

Subject Information Sheet

ii. Borang Izin

Consent Form



REC 4 – SUBJECT INFORMATION SHEET



1 May 2020

- i. Include both Malay and English versions. If the study population does not understand either Malay or English, include a version in the spoken language of the population.
- ii. Ensure that versions in all languages carry the same meaning.
- iii. Please use non-expert language (Do not include technical jargon).

REC 4 – SUBJECT INFORMATION SHEET

iv. Do not include citations

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- v. The **Introduction** Section should be brief. Cover information that is important and relevant to the subject.
- iv. Remove all the **instructions** (in the brackets) when the form has been completed.
- V. Should be worded as an explanation to the subject/ legal guardian (LAR) (eg. You/your child will be requested to answer questions)

Subject Information Sheet

Research Title (State)

Introduction of Research (Maximum of 300 words using non-expert language/terms)

Purpose of Research (Maximum of 150 words using non-expert language/terms)

Research Procedure (Using non-expert language/terms)

Participation in Research

Your participation in this research is entirely voluntary. You may refuse to take part in the study or you may withdraw yourself from participation in the research at any time without penalty.

Benefit of Research

(State the benefit to subjects)

Information obtained from this research will benefit the individuals, researchers, institution and community for the advancement of knowledge and future practice.

Research Risk

(State the risks involved)

Confidentiality

(Include the confidentiality clause provided below)

Your information will be kept confidential by the investigators and will not be made public unless disclosure is required by law.

By signing this consent form, you will authorize the review of records, analysis and use of the data arising from this research.

If you have any question about this research or your rights, please contact (state the name of the investigator) at (state the direct telephone number of the said investigator)

State the title of the study

Briefly introduce the study

Briefly explain in simple terms the purpose of the study

Briefly explain procedures/protocol involving the subject

The statement provided as example in the form may be retained if relevant

Briefly explain how the study will benefit the subject

Briefly explain risks (if any) to the subjects (eg minimal discomfort during procedure, time consuming protocols, fatigue due to the protocol) Explain how the risks will be minimized and what safety precautions will be taken

The statement provided on confidentiality as example in the form may be retained if relevant

Subject Information Sheet

Research Title (State)

Introduction of Research (Maximum of 300 words using non-expert language/terms)

Purpose of Research (Maximum of 150 words using non-expert language/terms)

Research Procedure (Using non-expert language/terms)

Participation in Research

Your participation in this research is entirely voluntary. You may refuse to take part in the study or you may withdraw yourself from participation in the research at any time without penalty.

Benefit of Research

(State the benefit to subjects)

Information obtained from this research will benefit the individuals, researchers, institution and community for the advancement of knowledge and future practice.

Research Risk

(State the risks involved)

Confidentiality

(Include the confidentiality clause provided below)

Your information will be kept confidential by the investigators and will not be made public unless disclosure is required by law.

By signing this consent form, you will authorize the review of records, analysis and use of the data arising from this research.

If you have any question about this research or your rights, please contact (state the name of the investigator) at (state the direct telephone number of the said investigator)

If the Subject Information Sheet is used to explain to the legal guardian (LAR) of a minor, phrase sentences using "your child" instead of "you".

Provide the name and direct telephone numbers of contact person for the study.

Consent Form¹

To become a subject in the research, you or your legal guardian are required to sign this Consent Form.

I herewith confirm that I have met the requirement of age and am capable of acting on behalf of myself / as² a legal guardian as follows:

- 1. I understand the nature and scope of the research being undertaken.
- I have read and understood all the terms and conditions of my participation in the research.
- All my questions relating to this research and my participation therein have been answered to my satisfaction.
- I voluntarily agree to take part in this research, to follow the study procedures and to provide all necessary information to the investigators as requested.
- I may at any time choose to withdraw from this research without giving any reason.
- 6. I have received a copy of the Subjects Information Sheet and Consent Form.
- 7. Except for damages resulting from negligent or malicious conduct of the researcher(s), I hereby release and discharge UiTM and all participating researchers from all liability associated with, arising out of, or related to my participation. I agree to hold them harmless from any harm or loss that may be incurred by me due to my participation in the research.

Ensure that the consent form is completed. The original consent form is to be retained by the researcher. A duplicate copy is provided to the subject/ legal guardian (LAR)

| Name of Subject/Legally authorized representative (LAR) | Signature |
|---|-----------|
| I.C No | Date |
| Name of Witness ³ | Signature |
| I.C No | Date |
| Name of Consent Taker | Signature |
| I.C No | Date |
| | |

REC 4: CONSENT FORM

ION 2020

REC 5 FORM

1 May 2020

Checklist for Applicants Senarai Semak Pemohon

REC 5 FORM

1. 1/2/2020

Contains 3 sections:

- i. Part A: For all applicants
- ii. Part B: For clinical trial applicants only
- iii. Part C: For all applicants

Signature of the researcher on Page 4 is required

| 5 | ITEM | YES | NO | |
|-----|--|-----|-------|---|
| | PERKARA | YA | TIDAK | |
| Par | t A – For All Applicants | | | - |
| Bał | agian A – Untuk Semua Pemohon | | | |
| 1 | Have you completed the REC 2 form? | | | - |
| | Adakah anda telah melengkapkan Borang REC 2? | | | |
| 2 | Have you completed the REC 3 form? | | | |
| | Adakah anda telah melengkapkan Borang REC 3? | | 100 | |
| 3 | Have you completed the REC 4 form? | | - | |
| | Adakah anda telah melengkapkan Borang REC 4? | | | |
| 4 | Has the form been signed by all researchers? | | | |
| | Adakah borang ditandatangani oleh semua penyelidik? | | | |
| 5 | Has your application been approved and endorsement by your | 53 | | |
| | Faculty/State Research Committee? Sudahkah permohonan anda mendapat kelulusan dan pengesahan | | | |
| | Jawatankuasa Penyelidikan Fakulti/Negeri? | | | |
| 6 | Has your supervisor checked for grammatical errors in REC 2 and | 25 | - 32 | - |
| | REC 4 forms? | | | |
| | Adakah penyelia anda telah menyemak untuk kesalahan tatabahasa dalam Borang REC 2 dan Borang REC 4? | | | |
| | | | | UIDELINES TO ETHICS APPLICATION 2020 44 |
| 1 M | | | | |

* For **Clinical Trials**, please complete Part B. For **Non-Clinical Trial** application please proceed to Part C, and sign on page 5.

Bagi permohonan **Penyelidikan Klinikal**, sila lengkapkan Bahagian B. Bagi permohonan penyelidikan **Bukan Klinikal** sila isi Bahagian C dan tandatangan di Halaman 5.

| 6 | Have you submitted a cover letter for application? Adakah anda telah menghantar surat iringan bagi untuk permohonan? | |
|---|--|--|
| 7 | Have you submitted: - Study Protocol - Study amendments (if applicable) - Case Report Forms (CRF) | |
| | Adakah anda telah menghantar: - Protokol Penyelidikan - Pindaan Protokol (jika berkaitan) - Borang Laporan Kes | |
| 8 | Have you submitted documents given to trial subjects such as: Information of study Advertisement of subject recruitment Adakah anda telah menghantar dokumen-dokumen yang diberikan kepada subjek penyelidikan seperti: Maklumat Penyelidikan Iklan bagi pengambilan subjek | |
| 9 | Have you submitted signed agreement between involved parties: - Investigator and sponsor - Investigator and Contract Research Organization(CRO) | |
| | Adakah anda telah menghantar dokumen perjanjian yang telah ditandatangani antara pihak-pihak yang terlibat: - Penyelidik dan penaja - Penyelidik dan Contract Research Organization(CRO) | |

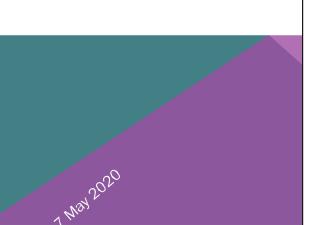


| | 10 | Have you submitted the Investigator's Brochure? Adakah anda telah menghantar risalah penyelidikan? | 5 | Ē. |
|-----|----|---|---|----|
| | 11 | Have you submitted the Financial Agreement with sponsor? Adakah anda telah menghantar dokumen perjanjian kewangan bersama penaja? | | |
| | 12 | Have you submitted the Insurance Statement and related documents? Adakah anda telah menghantar penyata insurance dan dokumen- dokumen berkaitan? | | |
| | 13 | Have you submitted the clinical trial agreement (CTA)? The completed CTA with signature must be submitted within three (3) months of REC approval. | | |
| | | Adakah anda telah menghantar dokumen perjanjian penyelidikan klinikal? Dokumen perjanjian penyelidikan klinikal yang lengkap dengan tandatangan perlu dihantar tiga (3) bulan selepas kelulusan Jawatankuasa Etika Penyelidikan (REC). | | |
| | 14 | Have you submitted Curriculum Vitae of all investigators involve in study? The CVs submitted must be dated, signed and stamped. Adakah anda telah menghantar Curriculum Vitae (CV) bagi semua penyelidik terlibat? Curriculum Vitae penyelidik perlu ditandatangan berserta cop dan tarikh. | | |
| | 15 | Have you submitted Good Clinical Practice certificates of all Investigators? Adakah anda telah menghantar sijil Good Clinical Practice bagi semua penyelidik? | | |
| T M | 16 | Have you submitted the Annual Practicing Certificate (APC)? The APCs submitted must be signed, stamped and dated. Adakah anda telah menghantar Annual Practicing Certificate (APC)? Annual Practicing Certificate penyelidik perlu ditandatangan berserta cop dan tarikh. | | |

| | Please upload the scanned forms to the following link: Sila muat naik salinan borang asal permohonan (REC 2, REC 3, REC 4 / REC12, REC 5) yang lengkap ditandatangan beserta co dan tarikh ke pautan berikut: | | |
|------------|---|---------------------|------------------|
| | https://forms.gle/KdyiNMNsLT2UR6fL7 | | |
| | You are advised to submit your application at least TWO (2) working weeks before the meeting (please check the meeting schedule at the website: <u>http://uitmethics.uitm.edu.my</u>) | | |
| | Anda dinasihatkan untuk menyerahkan borang permohonan sekurang-kurangnya DUA (2) minggu hari bekerja sebelum tarikh mesyuarat (Sila semak tarikh mesyuarat di laman sesawang: http://uitmethics.uitm.edu.my) | | |
| | You may be invited to present your applications. Anda mungkin dijemput untuk membentangkan permohonan anda. | I | 1 |
| 1 May 2020 | | GUIDELINES TO ETHIC | CS APPLICATION 2 |

| Decisio meeting | ons for the applications will be informed within TWO (2) working weeks after the g. |
|--------------------|--|
| Decisio | ins: |
| | san permohonan akan dimaklumkan DUA (2) minggu hari bekeria selepas arat, Keputusan: |
| (a) | Approved Lulus |
| (b) | Conditional approval (subject to corrections) Lulus bersvarat (tertakluk kepada pembetulan) |

Applicant is required to: Pemohon dikehendaki: include cover letter indicating the correction/s. menyertakan surat iringan memaklumkan pembetulan. include supporting documents if necessary. menvertakan dokumen sokongan sekiranya perlu. highlight the correction/s in the relevant forms. tandakan pembetulan dalam borang berkaitan. Please upload the scanned amended forms to the following link: Sila muat naik salinan imbasan borang pembetulan tersebut ke pautan berikut: https://forms.gle/LJ4i6NDepi2Kf93g8 (c) Re-present Pembentangan semula Applicant is required to: Pemohon dikehendaki: include cover letter indicatio the correction/s. menyertakan surat iringan memaklumkan pembetulan. include supporting documents if necessary menyertakan dokumen sokongan sekiranya perlu. highlight the correction/s in the relevant forms. tandakan pembetulan dalam borang berkitan. Please upload the scanned amended forms to the following link: Sila muat naik salinan imbasan borang pembetulan tersebut ke pautan berikut: https://forms.gle/LJ4i6NDepi2Kf93g8



 to present again in subsequent REC meeting membentang semula pada mesyuarat REC berikutnya (d) Not approved due to ethical issues that cannot be satisfactorily resolved. Recommend to resubmit. Tidak lulus disebabkan penyelesaian isu etika yang tidak memuaskan. Dicadangkan untuk memohon semula.

| Additional comments (if any): Komen Tambahan (Jika Ada): | |
|---|------|
| | |
| Applicant's Signature | Date |
| | |
| Supervisor's Signature | Date |

7 11/2020

REC 12 FORM

1 May 2020

Assent Form Borang Persetujuan

REC 12 FORM

1 1/2020



- i. If research subjects are below 18 (7 17) years of age (minors), an Assent Form is required.
- ii. Assent is defined as a minor's "affirmative agreement" to participate in research.
- iii. It is similar to a subject information sheet, but uses simpler, age-appropriate language which can be understood before an decision for participation is made by the minor.
- iv. Consent from parents or legally acceptable representative (LAR) overrides dissent of the minor when it involves the safety and wellbeing of the minor

ASSENT FORM

Your parent/legally authorized representative (LAR) has given permission for you to be in a project called (*state name of project here*). We would like to explain it to you, so that you can decide if you want to be in it. If you don't understand, please ask questions. You can choose to be in the study, or not to be in the study, or to take more time to decide.

What is the project about? (Briefly describe the project)

Why do I need to be in this project? (Briefly describe the purpose of the project)

What should I do in this project? (Briefly explain the minor's role in the project)

What will happen to me in the project? (Briefly explain the risk)

Do I have to be in the project?

You don't have to be in the project if you don't want to. If you are in the project, you can stop at any time without making anyone upset. If you want to be in the project, please write your name below. Please make sure that you understand what has been explained to you.

CATION 2020

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Who can I talk to about this project?

If you want to ask anything, you can call me anytime.

Name of Researcher:

Contact number:

1 May 2020

Will anyone know about what I say or do in the project? (Briefly explain the anonymity and confidentiality of research participation)



Assent Questions: Instructions to minor: Please circle your answer below.

| 1. | Has somebody explained this project to you? | Yes/No |
|----|---|--------|
| 2. | Do you understand what this project is about? | Yes/No |
| 3. | Do you have any questions about the project? | Yes/No |
| 4. | If you have asked a question, do you understand the answer? | Yes/No |
| 5. | Do you understand it's ok to stop taking part at any time? | Yes/No |
| 6. | Are you ok to take part? | Yes/No |
| 7. | Are you ok for your voice to be recorded? | Yes/No |
| 8. | Are you ok to be on video? | Yes/No |
| 9. | Are you ok to have photographs taken? | Yes/No |



If you want to take part, please write your name and sign, or place your thumb print in the box.

| Name of participant | | |
|-----------------------|--|--|
| Signature | | |
| Date | | |
| | | |
| | | |
| Name of consent taker | | |
| Signature | | |
| Date | | |
| | | |

(In instances where the minor is unable to read, or where the research covers sensitive issues, a witness should attest in the section below)

| Name of witness | |
|-----------------|--|
| Signature | |
| Date | |

7 1/2020



- A. To apply for research ethics approval: fill up
 - i. REC 2 (APPLICATION FORM)
 - ii. REC 3 (RISK CLASSIFICATION)
 - iii. REC 4 or REC 12 (if subjects are minors) (CONSENT FORM)
 - iv. REC 5 (CHECKLIST)

1. May 2020



Research ethics application guidelines

i. Ethics application forms can be accessed online at the following URL:

https://uitmethics.uitm.edu.my/v1/index.php

- ii. Use the latest version of application forms (revision 2019/2020)
- iii. Ensure that the application forms are **complete** and **signed** by members of the research team before submission
- iv. Submission of all forms prescribed by the REC must be in English, with the exception of research conducted in other languages (with Senate approval)

Research ethics approval application

- viii. Before submission to the REC, applications for ethics approval or exemption from ethical review must be approved and endorsed by the Faculty/State Research Committee
- viii. Only **completed forms** will be forwarded for REC review. **Incomplete applications** and applications with **major grammatical errors** will be returned to applicants for amendments
- ix. All required documents must be submitted to the REC within two (2) working weeks before the REC meeting for the month (schedule of REC meeting is available on the REC website)



ENQUIRIES

Contact : Secretariat

UiTM Research Ethics Committee

- Email: <u>recsecretariat@uitm.edu.my</u>
- Contact number:

7 May 2020

- 03 5544 8069 (Pn. Nur Adilah Ruslee)
- 03 5544 2794 (Pn. Raiminazihah Osman)





ENQUIRIES

• Contact :

7 May 2020

Dr. Amirah Abdul Rahman Coordinator of Research Ethics Ethics and Publication Unit Research Management Centre (RMC) Universiti Teknologi MARA Shah Alam, Selangor





- Email: <u>amirahar@uitm.edu.my</u>
- Tel : 03-5544 7879
- Fax: 03-5544 8280

Thank you



1.May 2020