**Biomedical Research and Ethics Unit (BREU)**

**Ministry of Health**

Email: bre.unit@moh.gov.bn

Checklist for Submission of Research Protocols

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No.** | **Item** | **Yes** | **No** | **Not Applicable** |
| 1. | 1 soft copy in **PDF format** of the required documents for research proposal submitted to BREU, including this checklist. |  |  |  |
| 2. | **Signed** covering letter addressed to:Chairperson of Medical and Health Research and Ethics Committee (MHREC)Executive Screening Suite, Baseline Level One, RIPAS Hospital, Bandar Seri Begawan BA 1710, Brunei DarussalamEmail: mhrec@moh.gov.bn |  |  |  |
| 3. | Full research proposal **AND** completed MHREC Proposal Template which include the following: * Introduction
* Methodology including data analysis
* Questionnaires (if applicable):
* If not self-designed, letter of permission to use questionnaire
* If self-designed, to declare in the proposal
* Content of data collection / Data collection form (if applicable)
* Declaration of funding / grant
* Data ownership and storage
* Conflict of interest (if any)
* Plans for dissemination of data
 |  |  |  |
| 4. | Written Consent Forms - in English and Malay (if applicable) |  |  |  |
| 5. | Participant Information Sheet (PIS) - in English and Malay (if applicable). For clinical studies involving human subjects, the email address of MHREC must be included for participants to submit complaints (if any) pertaining to the study. |  |  |  |
| 6. | Roles and responsibilities of each researcher. |  |  |  |
| 7. | **Signed and dated** curriculum vitae (CV) from all investigators/ team members (**USE** CV template provided by MHREC). *It is mandatory for all undergraduate/postgraduate students doing research to have a senior MOH* ***clinical*** *supervisor. If applicable, please submit the CV of* ***educational*** *supervisor(s).*  |  |  |  |
| 8. | Agreements e.g., material transfer agreement, data sharing agreement, declaration of honorarium must be included (if applicable). |  |  |  |
| 9. | Approval letter(s) from all other ethics committees (if applicable). |  |  |  |
| 10. | Approval letter from relevant head of department(s). |  |  |  |

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| **Title of Research:** |  | **Date of Submission:** |
|  |
| **PI Name:** |  | **Signature:** |  |
| **PI Email** |  | **Mobile No:** |  |

\*Principal Investigator (PI)