WRAIR Protocol # \_\_\_\_\_\_\_\_\_\_\_\_\_ HRPO Log Number: \_\_\_\_\_\_\_\_\_\_\_\_\_ PI: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Checklist Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sub-Committee Chair or WRAIR IRB Administrative Director’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Checklist Updated (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Initial Questions** | **Is Element Addressed?** | | | **COMMENTS** |
| **Yes** | **No** | **N/A** |
| Has investigator submitted a "Disclosure of Significant Conflicts of Interests of Investigator" form? |  |  |  |  |
| Did investigator list any "significant conflicts of interests," with research sponsors, or that may otherwise reasonably appear to affect or be affected by the research? |  |  |  |  |
| **THERE IS A CONFLICT OF INTEREST (COI) IF:** |  |  |  |  |
| Any of the listed conflicts of interest affect or would be affected by the design or conduct of the research |  |  |  |  |
| Any of the listed conflicts of interest affect or would be affected by the data analysis |  |  |  |  |
| Any of the listed conflicts of interest affect or would be affected by the study outcome |  |  |  |  |
| Any of the listed conflicts of interest interests affect or would be affected by the number of subjects enrolled |  |  |  |  |
| **TO ELIMINATE, MANAGE, OR REDUCE COIs** |  |  |  |  |
| Steps being taken to minimize potential for the COIs to harm subjects or research objectivity |  |  |  |  |

Additional Comments