

[ECF4 HREC Checklist for Low & Standard Risk Applications \(National Statement Section 2\) Form](#)

Study Information

Study Title			
Online Forms Submission Code			Name of Principal Investigator
Submission For: (please circle)	Low Risk Review	Standard Risk Review	Hospital/Department
			Contact phone number and email
Please list all sites to be approved			
Invoice Details (if applicable. Please refer to fee section on website)	Sponsor Name:		
	Sponsor Protocol No.		
	Address:		
	Tel No:		
	Email:		

[All studies approved by Metro South HREC and conducted within a Metro South Facility must adhere to the Metro South Research Management Policy, Compliance Framework and associated Procedures \(http://docs.sth.health.qld.gov.au/documents/metro-south-health/pl2017-55\)](http://docs.sth.health.qld.gov.au/documents/metro-south-health/pl2017-55)

Documents for Metro South HREC Review

- Documents should be listed exactly as you wish them to appear on the HREC Approval Letter. All documents submitted for review must be included in the table below.
- Documents must include version numbers and dates in the footer of the document.
- All documentation submitted must be collated.
- All documents submitted must be uploaded onto the Online Forms Website (<https://ethicsform.org/au/SignIn.aspx>)

Name of Document	Number of Copies Including Original		Version Number	Version Date	Submitted to HREC	Uploaded to Online Forms
	LR	SR				
HREA - Standard Risk Application	1	5*				
Protocol	1	5				
Participant Information & Consent Form	1	5				
Questionnaires/Surveys (eg Survey Monkey)	1	5				
Participant Diary	1	5				
Advertising Material (eg Brochure, Leaflet)	1	5				
Data Collection Form	1	5				
CV of Principal Investigator(s)	1	1				
CLINICAL TRIAL REQUIREMENTS (only as applicable)						
HREC Review Only Indemnity	3 Original	3 Original				
Other _____	1	5				

*LR = Low Risk

*SR = Standard Risk

*5 = 1 original and 4 copies

For HREC related enquiries, please contact 07 3443 8049 or MSH-Ethics@health.qld.gov.au

For submission instructions and closing dates, please see overleaf



Submission deadline is 12pm on the closing dates listed below. Applications will not be accepted after this time.

Submission Instructions:

- For all applications, please complete the Queensland Health online HREA (and NOT the NHMRC version) for either full submission or low risk research <https://ethicsform.org/au/SignIn.aspx>

- Please upload all supporting documents to the online forms website under the "Documents Tab". Applications will be considered invalid if all documents are not uploaded.

- All documents should be copied double sided, collated and contain version numbers, version dates and page numbers. Do not bind documents. Please provide 1 original (with signatures) and 4 copies for the Standard Risk application.

- The closing time for applications is 12 midday.** Please note there are no exceptions.

- All multi-centre research studies should be booked through the QH Central Coordinating Service

Please note: Incomplete applications will not be accepted. For further details on submission requirements, please refer to our website: <https://metrosouth.health.qld.gov.au/research/undertaking-research-in-metro-south-health>

Metro South Hospital and Health Service Human Research Ethics Committee (EC00167)

HREC Application Closing Dates and HREC Meeting Dates 2018

Closing Date – 2018	Meeting Date – 2018
Applications to be submitted by 12 noon	1 st Tuesday of the month
18 January 2018	6 February 2018
15 February 2018	6 March 2018
22 March 2018	10 April 2018
19 April 2018	1 May 2018
17 May 2018	5 June 2018
14 June 2018	3 July 2018
12 July 2018	7 August 2018
16 August 2018	4 September 2018
13 September 2018	9 October 2018
18 October 2018	6 November 2018
15 November 2018	4 December 2018

POSTAL or COURIER ADDRESS	PERSONAL DELIVERY
HREC Office – Centres for Health Research Level 7 Translational Research Institute Building 37 Kent Street Woolloongabba QLD 4102	HREC Office - Centres for Health Research Level 7 Translational Research Institute Building Princess Alexandra Hospital Telephone: 07 3443 8049 Email: MSH-Ethics@health.qld.gov.au