# Checklist and instructions for new full ethics applications to the

# SESLHD- Human Research Ethics Committee (HREC)

This information relates to new ethics applications only. Amendments and Low/Negligible Risk projects are reviewed by the HREC Executive Committee (see separate instructions).

* **HREC application registration:** Please email [SESLHD-RSO@health.nsw.gov.au](mailto:SESLHD-RSO@health.nsw.gov.au) prior to submitting a new application to register your intention to submit; include the full project title, principal investigator, contact person, and site. You will receive a confirmation email with the HREC reference number.
* The HREC reference number **must** be quoted in all new ethics applications.
* Please refer to the meeting schedule on the website for submission deadlines and meeting dates.

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| **CHECKLIST FOR HREC APPLICATIONS**   * **NO HARD COPIES REQUIRED** * **Send an electronic copy of the HREA and all supporting documents to**   [SESLHD-RSO@health.nsw.gov.au](mailto:SESLHD-RSO@HEALTH.NSW.GOV.AU) | | |
| **REQUIRED DOCUMENTS** | **Send by email only** | **COMPLETED** |
| 1. **Cover letter indicating:**  * HREC reference number * List of supporting documents specifying version number and date * Sponsor’s details for invoicing of HREC fees <http://www.health.nsw.gov.au/policies/pd/2008/pdf/PD2008_030.pdf> | **1** |  |
| 1. **Protocol**   Include in the footer on every page: version number, date and page number (e.g. Page 1 of 2). | **1** |  |
| 1. **National Ethics Application Form (NEAF)** Completed, locked and with signatures. The NEAF is accessible at [www.ethicsform.org/au](http://www.ethicsform.org/au) | **1** |  |
| 1. **Participant Information Sheet & Consent Form** Include in the footer on every page: version number, date and page number (e.g. Page 1 of 2). | **1** |  |
| 1. **Questionnaire(s)** Include all questionnaires developed specifically for your project.   Validated, published tools are not required but must be listed in the protocol.  Include in the footer on every page: version number, date and page number (e.g. Page 1 of 2). | **1** |  |
| 1. **Investigator Brochure (IB) / Product Information** | **1** |  |
| 1. **Radiation Safety Officer’s Report (if radiation is involved)** | **1** |  |
| 1. **Other documents requiring ethical approval** Such as letters of introduction, interview topics, telephone scripts, advertising materials, patient diaries, fliers.Include in the footer on every page: version number, date and page number (e.g. Page 1 of 2). | **1** |  |
| 1. **Names and contact details of two potential expert reviewers** | **1** |  |
| 1. **Completed checklist** | **1** |  |

**CONTACT THE RESEARCH SUPPORT OFFICE**

Phone: (02) 9382 3587

Email: [SESLHD-RSO@health.nsw.gov.au](mailto:SESLHD-RSO@HEALTH.NSW.GOV.AU)

Address: Research Support Office G71, East Wing Edmund Blacket Building

Prince of Wales Hospital, Randwick NSW 2031

**Please refer to the Site Specific Assessment checklist before submitting governance documentation.**