**REVIEW OF RESUBMITTED PROTOCOL FORM**

|  |  |  |  |
| --- | --- | --- | --- |
| **DATE SUBMITTED** | Click or tap to enter a date. | **FIERC PROTOCOL CODE** | Click or tap here to enter text. |

|  |  |
| --- | --- |
| **PROTOCOL TITLE** | Click or tap here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| **PRINCIPAL INVESTIGATOR** | Click or tap here to enter text. | **INSTITUTION / DIVISION** | Click or tap here to enter text. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TOTAL PARTICIPANTS:** | Click or tap here to enter text. | [ ]  **2ND REVIEW** | [ ]  **3RD REVIEW** | [ ] Click or tap here to enter text.**\_\_\_REVIEW** |

|  |  |  |  |
| --- | --- | --- | --- |
| **INITIAL REVIEW DATE:** | Click or tap to enter a date. | **LAST DATE REVIEWED** | Click or tap to enter a date. |

|  |
| --- |
| **REVIEW OF RESUBMITTED PROTOCO FORM** |

|  |  |  |
| --- | --- | --- |
| **RECOMMENDATIONS FROM THE LAST REVIEW:** | **PRINCIPAL INVESTIGATOR’S RESPONSE***(Indicate Page and Paragraph where it is found)* | **Were the recommendations met (Yes / No)? Please Explain** *(To be filled out by the* ***Primary Reviewer****)* |
| 1. **PROTOCOL RELATED ISSUES:**
 | Click or tap here to enter text. | Click or tap here to enter text. |
| 1. **ETHICAL RELATED ISSUES:**
 | Click or tap here to enter text. | Click or tap here to enter text. |
| 1. **INFORMED CONSENT RELATED ISSUES:**
 | Click or tap here to enter text. | Click or tap here to enter text. |
| ***To be filled-out by FIERC***

|  |  |
| --- | --- |
| **RECOMMENDED ACTION**[ ]  **APPROVE**[ ]  **MINOR REVISIONS REQUIRED**[ ]  **MAJOR REVISIONS REQUIRED**[ ]  **DISAPPROVE** | **JUSTIFICATION FOR RECOMMENDED ACTION:** |

|  |
| --- |
| **SUMMARY OF RECOMMENDATIONS:****1.****2.****3.****4.****5.** |

|  |  |
| --- | --- |
| **PRIMARY REVIEWER:**Click or tap here to enter text.**Signature over Printed Name** | Click or tap to enter a date.**Date:**  |

 |