

#### Melbourne IVF HREC Submission Checklist (New submission to full HREC)

- Meeting dates and submission deadlines are listed on the Melbourne IVF website.
- Applications must be received by close of business on the deadline day.
- If this study is a clinical trial, you must register the study on the ANZCTR site (or equivalent, if a multi-site study).

Documents Required	Notes and Guidance	Submitted
MIVF HREC Submission Form	All HREC submission forms (new submission form, amendments, annual/final reports) should be accessed from the internet only as these will be the most current forms.      DO NOT use previous submissions forms when submitting any new submission as these may be outdated <a href="https://www.mivf.com.au/ethics-committee">https://www.mivf.com.au/ethics-committee</a>	□Yes
Cover letter signed by the Principal Investigator	<ul> <li>Nominate a short title for the project</li> <li>Indicate the risk category for the project (i.e.: 'low risk' or 'high risk').</li> <li>List all sites for which HREC approval is being sought</li> <li>List all documents submitted, including version control and dates</li> <li>Only business/institutional emails and mailing addresses should be listed</li> <li>Indicate if this is a student project</li> <li>CTN reference where applicable</li> <li>Clinical Trial Registration Number ANZCTR or clinicaltrials.gov</li> </ul>	□Yes
'High' Risk projects – Human Research Ethics Application (HREA) form	<ul> <li>HREA form can be found at: Welcome - NHMRC Portal (hrea.gov.au)</li> <li>Ensure only business/institutional emails and mailing addresses are listed on the HREA.</li> </ul>	□Yes
'Low' Risk projects	Please use the Low risk application form which can be accessed on the internet at: <a href="https://www.mivf.com.au/ethics-committee">https://www.mivf.com.au/ethics-committee</a>	□Yes



Approval Letters	<ul> <li>Letter of approval from a Research         Committee or other entity Attesting to the scientific merit of the project     </li> </ul>	□Yes
Study Protocol	<ul> <li>Submission of a study protocol is mandatory</li> <li>HREA should reference relevant sections of the Protocol.</li> <li>Ensure the description of the experimental design is clear.</li> <li>Ensure sponsorship and financial support is clear</li> <li>Ensure each section of the study protocol is answered. If any section is not applicable, provide a reason.</li> <li>Clearly describe how patient confidentiality will be assured, explaining more specifically the security methods employed for the study records.</li> </ul>	□Yes
Participant Information Sheet and Consent Form (PICF)	<ul> <li>Ensure the PICF is written in terms able to be understood by a layperson</li> <li>Ensure an accurate reflection of what is involved of participants is clearly stated.</li> <li>Provide a lay explanation of any technical terms.</li> <li>Fully describe any abbreviation or acronym the first time it is mentioned.</li> <li>Do not bias or overstate the benefits of the study.</li> <li>Ensure adequate description of risks and possible consequences of participation</li> <li>Include a clear statement as to whom adverse events, questions, concerns, or complaints should be directed.</li> <li>A "Withdrawal of Consent Form" must accompany the PICF.</li> <li>For multisite/interstate studies, use the NHMRC templates</li> <li>For single-site studies, insert the relevant site logo in the document header.</li> <li>All study documents must have the correct institutional logo.</li> </ul>	□Yes □N/A



Any other relevant study Documents	<ul> <li>For example: Investigator Brochures, questionnaires, patient cards/diaries, intended advertisement material, Social Media content, letter of invitation, interview questions, telephone scripts</li> <li>All study documents must include the version number/date in the footer</li> <li>All study documents must have the correct institutional logo</li> </ul>	□Yes □N/A
Therapeutic Goods	CTNs must be submitted through the TGA's	
Administration Clinical Trial	online portal. You must not submit a CTN to	□Yes □N/A
Notification (CTN) or Clinical	the TGA until HREC approval is granted.	
Trial Exemption (CTX) form, if	Include CTN reference in the cover letter	
applicable		0.1 1
Additional Documei	nts for commercially sponsored studies	Submitted
Certificate of Insurance	<ul> <li>The insurance certificate must specifically name the Australian Corporate entity acting as a commercial sponsor as a named insured under the relevant insurance policy</li> <li>If the certificate is provided in the name of an overseas parent company, it must name the Australian entity as a subsidiary</li> <li>The insurance certificate must include a valid coverage period for the policy</li> <li>The insurer providing the cover must be approved by the Australian Prudential Regulation Authority and must have a minimum financial strength rating of A- or above</li> <li>The insurance certificate must provide coverage of AUD\$20 million for every occurrence and AUD\$20 million in the annual aggregate against a class of insurance appropriate for the risk associated with the research.</li> </ul>	□Yes □N/A
Financial Summary	<ul> <li>Please provide a full budget, and source of funding.</li> </ul>	□Yes
Conflict of Interest	Declare any conflicts of interest. Refer to policy <u>Virtus Conflicts of Interest Policy</u> 20220920 v1.1.pdf	□Yes □N/A



Research Agreement/Contract (usually	<ul> <li>For Australian studies, the Medicines         Australia contract is preferred (<u>Clinical-Trial-</u> </li> </ul>	□Yes □N/A
where a third party is involved)	<u>Research-Agreement-Medicines-Australia-Standard-Form-8-March-2017-b-2.doc</u>	
	<ul><li>(live.com)</li><li>This form will require legal sign-off</li></ul>	