**REVIEW ON PROTOCOL AMENDMENTS OR CHANGES**

Protocol Code\* Date of Submission\*

Date of Approval

Study Protocol Title

|  |  |  |  |
| --- | --- | --- | --- |
| **List of Changes/Amendments** | **Reason/s** | **Page and Paragraph where it can be found** | **Remarks of the Reviewers** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| Recommendation: | | | |
| Decision:  Approval  Minor Modification prior to approval  Major Modification prior to approval  Disapproval | | | |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Primary Reviewer