



INSTITUTIONAL ETHICS AND REVIEW BOARD
12th Floor, Our Mother of Perpetual Succour Medical Specialty Center
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Review of Serious Adverse Events (SAEs)

PSH-IERB
Form 4E

PSH-IERB CODE:
 CLINICAL PROTOCOL NUMBER:
 PROTOCOL TITLE:
 PRINCIPAL INVESTIGATOR:

We have received and reviewed the Serious Adverse Events (SAEs) for the above named protocol.

Date of SAE			
Date of Site Awareness			
SAE Term		<input type="checkbox"/> Related <input type="checkbox"/> Not Related	<input type="checkbox"/> Expected <input type="checkbox"/> Not Expected
Action Done by Principal Investigator			
Treatment			
Outcome			

After thorough review of the document (study continuation is granted/amendment is needed to the protocol or the consent form/ further information is needed/study is suspended for further investigation) state reason.

 PSH-IERB Chairperson
 Date:

 PSH-IERB Member assigned as
 SAE/SUSAR Reviewer for the protocol
 Date: