ARMMANS ETHICS REVIEW BOARD (AERB)

Adverse Events Reporting Form

Study Title:

Principal Investigator:

ERB Cycle and Submission no.:

Date of reporting of event to ERB:

1. When did the Adverse Event Occur?
2. What was the nature of the adverse event and what was the outcome?
3. Did the event occur as a result of the direct action / inaction of anyone in the research team or as a consequence of activities associated with the research (Share details).
4. If it was not linked to the study, share how the team became aware of it?
5. What were the immediate actions taken in response to the adverse event?
6. Is there any long term response planned / needed? Describe.
7. If directly as a consequence of the research by ARMMAN, what were put in place to deal with the same to begin with? (this should be directly taken from the project proposal originally submitted by ARMMAN).
8. If directly as a consequence of the research by ARMMAN, what steps / systems are further needed to be put in place for prevention and / or mitigation of such events in the future? (describe learnings)

Please share any relevant documentation related to the event or action taken thereof?

Signature and Date: