

Comments of EC Secretariat:

Signature of Member Secretary:

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Title of study: Principal Investigator (Name, Designation and Affiliation): 1. Choose reasons why exemption from ethics review is requested¹? i. Research on data in the public domain/ systematic reviews or meta-analyses ii. Observation of public behavior/ information recorded without linked identifiers and disclosure would not harm the interests of the observed person iii. Quality control and quality assurance audits in the institution iv. Comparison among instructional techniques, curricula, or classroom management methods v. Consumer acceptance studies related to taste and food quality vi. Public health programmes by government agencies² vii. Any other (please specify in 100 words):

Application Form for Exemption from Review

¹Select the category that applies best to your study and justify why you feel it should be exempted from review. For a detailed understanding of the typeof studies that are exempt from review, refer to National Ethical Guidelines for Biomedical & Health Research Involving Human Participants 2017, Page 51 Table 4.2.

²Such as programme evaluation where the sole purpose of the exercise is refinement and improvement of the programme or monitoring (where there areno individual identifiers)