



**CHINESE GENERAL HOSPITAL AND MEDICAL CENTER  
DEPARTMENT OF MEDICAL EDUCATION AND RESEARCH  
RESEARCH ETHICS REVIEW BOARD (RERB)**



**PROTOCOL AMENDMENT REVIEW (FORM 19)**

CGHMC RERB Protocol No.	Sponsor Protocol No	Date of Submission
PROTOCOL TITLE		
Principal Investigator	Sponsor	Contact Number
List of Amendments 1. 2. 3. 4. 5. 6. 7.	Reasons	
Comments of Primary Reviewers	Type of Review <input type="checkbox"/> Full Board <input type="checkbox"/> Expedite Date of Meeting: _____	