



# LUNG CENTER OF THE PHILIPPINES

## INSTITUTIONAL ETHICS REVIEW BOARD

Quezon Avenue Extension, Quezon City, Philippines 1100

4<sup>th</sup> Flr. Room 4013 Tel Nos. 9246101 local 568

E-mail : [lcpierb@gmail.com](mailto:lcpierb@gmail.com), Website : [erc@lcp.gov.ph](http://erc@lcp.gov.ph)

### INVITATION LETTER

<Date: dd/mm/yyyy>

<Title, Name, Surname of Nominee>

<Institution/Affiliation>

<Address>

Dear \_\_\_\_\_:

The **LCPIERB** would like to <invite you/renew your membership> as an **Independent Consultant**.

As an **Independent Consultant**, we recognize your expertise in the field of research that will be proposed and appreciate your insights/expert opinions as well as any recommendations.

As an **Independent Consultant**, you will be assigned as a Primary Reviewer and will accomplish the two LCP-IERB forms attached to the research protocol/s that will be sent to you two weeks (2) before the regular meeting of the LCP-IERB which is every 4<sup>th</sup> Wednesday of the month. You may attend the meeting and participate in the discussion.

As an **Independent Consultant**, you will not have the right to vote. You will not be counted in the quorum and your attendance will only be required only during the time the protocol assigned to you is to be discussed. Your report becomes part of the study file.

Please sign the conforme below if you accept our invitation. Likewise, examine and sign the Confidentiality Agreement and Conflict of Interest Disclosure Form (refer to attached form) and return these documents to the **LCPIERB** Secretariat. You are also required to submit your latest Curriculum Vitae.

An honorarium will be given for every meeting attended, subject to the approval of the Executive Director and the Management Committee.

For any questions, please feel free to contact the **LCPIERB** Secretariat at **924-6101 loc. 568**.

Thank you for your attention and hoping for your favorable response.

Sincerely,

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**Executive Director**  
**Lung Center of the Philippines**

**Conforme:**

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*Signature over Printed Name*

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*Date*