



# LUNG CENTER OF THE PHILIPPINES

## INSTITUTIONAL ETHICS REVIEW BOARD

Quezon Avenue Extension, Quezon City, Philippines 1100  
 Room 4013, 4<sup>th</sup> floor, LCP Main Building Tel Nos. 89246101 local 4047 / 4048  
 E-mail : [lcpierb@gmail.com](mailto:lcpierb@gmail.com), Website : [www.lcp.gov.ph](http://www.lcp.gov.ph)

### FOR SUBMISSION OF INITIAL REVIEW APPLICATION'S PROTOCOL PACKAGE:

To ensure the systematic and organized facilitation of submitted documents, please follow the procedure of submission.

1. Submit Initial Review application through email, [lcpierb@gmail.com](mailto:lcpierb@gmail.com)
2. SUBJECT of the email should be: INITIAL SUBMISSION / Name of Principal Investigator (PI)
3. Email content: Follow the LCP-IERB Form 2.1-2022 Checklist
4. All documents shall be signed and dated as indicated.
5. Incomplete submission will not be accepted.
6. Hard copy package to be submitted within 1 week after online submission.

### **COMMUNICATION:**

Please address all future communication to **GLADYS L. GILLERA, MD**, LCPIERB Chairman.

### **BOARD MEETING:**

Board meeting convened every 4th Wednesday of the month. Cut-off date for submission (Initial Submission, Resubmission, Amendment, Continuing Review Application, Deviation, SAE, and Notification) is 2 weeks before the Board Meeting.

Special Meeting may be conducted for Rapid Reviews of COVID-related protocols and protocols for SJREB joint review.

### **Note for Hard copy Submission:**

1. Hard copy submission in **3 duplicate copies**, within one week after the online submission on appointment basis. (Contact the secretariat at (02) 89246101 local 4047)
2. Cover page of the file folder must contain the following information:
  - ✓ Protocol Title
  - ✓ Protocol Number
  - ✓ Sponsor
  - ✓ Principal Investigator
  - ✓ Site Name
3. Follow the below sequence starting from the second page to succeeding pages:
  - ✓ Clinical Research Department Registration or Proof of Application / TRB Approval
  - ✓ LCPIERB Forms
  - ✓ Cover page
  - ✓ Table of Contents
  - ✓ Study Protocol (*Footer: Version number, date and page number*)
  - ✓ Other attachments
4. All documents submitted should be labeled, tabbed and signed by the PI as indicated
5. Submit study protocol and related documents in data file folder or in PVC binders for Clinical Trials.
6. Our office is located at RM 4013, IERB Office, 4th Floor, Lung Center of the Philippines, Quezon City.

**REVIEW FEE**

TYPE OF PROTOCOL		TYPE OF REVIEW	REVIEW FEE
Sponsor Initiated Protocol	Pharmaceutical Sponsored / Investigational New Drug	Full Board	50,000.00
		Expedited	30,000.00
		Renewal	30,000.00
		Amendment	10,000.00
	Government Funded Research (e.g., DOST, WHO etc.)	Full Board / Expedited	30,000.00
		Renewal	15,000.00
Principal Investigator Initiated Protocol	Protocols from Professional Researcher: ➤ Researcher from the academe ➤ Consultants affiliated to recognized local and international Organization	Full Board	10,000.00
		Expedited	5,000.00
		Renewal	5,000.00
	Protocols from trainees such as: <i>Trainees of the <u>home institution</u>:</i> <i>Trainees of the <u>other institution</u>:</i> ➤ Hospital Fellow / Resident ➤ Graduate School  ➤ Undergraduate Students	No fees shall be charged	
		Full Board / Expedited 5,000.00	
		Undergraduate Students Full Board / Expedited 1,000.00	
		No review fee for renewal	

**STATEMENT OF ACCOUNT**

Submit the following information:

- Sponsor Code <If applicable>
- Principal Investigator:
- Sponsor:
- Bill to:
- Billing Address:

*LCPIERB will review the protocol once payment of the review fee has been settled with the LCP cashier.  
(Submit photocopy of OR to the LCP-IERB Secretariat)*