

## **Institutional Ethics Committee**



KLE Academy of Higher Education and Research (Nehru Nagar, J.N.Medical College campus, Belagavi 590010, India) KLES Dr.Prabhakar Kore Hospital, Belgaum-590010, Karnataka State India (: 0831-2470400 <a href="www.kledeemeduniversity.edu.inE">www.kledeemeduniversity.edu.inE</a> mail:kleclinicalresearch@gmail.com

## FORM NO: 17-CLINICAL TRIAL AGREEMENT ASSESSMENT FORM - LEGAL EXPERT

| IEC Protocol Code         | Principal Investigator |  |
|---------------------------|------------------------|--|
| Protocol Version and date | Meeting Date and Time  |  |

## Name and Designation of Reviewer:

| Sl. No | Description   | Yes  | No |
|--------|---|--|----|
| 1.     | Effective date  |  |    |
| 2.     | Parties Involved Tripartite Quadra parted   |  |    |
| 3.     | Agreed terms - Definition, Conduct of the study, Responsibility of the company, Principal investigator, Institution   |  |    |
| 4.     | Study drug and Materials  |  |    |
| 5.     | Payment Details- Budget and Payment scheduled, payment schedule, Payment terms, Reimbursement, Payment for screen failure, payment for study coordinator.   |  |    |
| 6.     | Confidentiality of the study participants   |  |    |
| 7.     | Publications  |  |    |
| 8.     | Representations, warranties and covenant Of the PI, Of the Sponsor, No other Representations or warranties, Of the Institutions   |  |    |
| 9.     | <b>Governing Law</b> -This agreement and any dispute or claim out of or in connections with it or its subject matter (including non- contractual disputes or claims) shall be governed by and constructed in accordance with the laws of India without regard to the conflict of law principles thereof. The parties irrevocably agree that the courts of India shall have exclusive jurisdiction to settle any dispute or claim that arises out of or in connection with this agreement or its subject |  |    |
| 10.    | Indemnification - Sponsor Indemnification, Institution Indemnification, Notification, Claims, Representation, subject injury.   |  |    |
| 11.    | Insurance - Sponsor insurance, Site Insurance   |  |    |
| 12.    | Compliance, Transparency, Anti - bribery, Anti- corruption and Conflict of Interest.  |  |    |
| 13.    | Term and Termination  |  |    |
| 14.    | Agreed by the parties - Sponsor/ CRO, PI, Institution, SMO( if involved)  |  |    |
| 15.    | Witness details   |  |    |
|        | Date and sign of the reviewer   | <u>                                       </u> |    |