



جامعة محمد بن راشد
للطب و العلوم الصحية
MOHAMMED BIN RASHID UNIVERSITY
OF MEDICINE AND HEALTH SCIENCES

**MOHAMMED BIN RASHID UNIVERSITY OF
MEDICINE AND HEALTH SCIENCES**

INSTITUTIONAL REVIEW BOARD
(MBRU-IRB)

CONFLICT OF INTEREST (COI) FORM



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Dear Investigator,

The purpose of this document is to manage/direct potential bias or the appearance of bias related to commercial entities (such as pharmaceutical, biotechnology, and medical device manufacturers) whose products or services may be used, tested and/or affected by or whose products or services might be affected by the results of your research project.

Each researcher involved in the research project is required to sign a separate conflict-of-interest form.

1. GENERAL INFORMATION (To be completed by the PI)

PROJECT TITLE	Click or tap here to enter text.	
PERSONNEL INVOLVED IN THE PROJECT:		
Name of Personnel	Role in Project	Institution



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FUNDING:				
<i>Is the project funded internally or externally?</i>	Yes	No	Period of funding:	Click or tap to enter a date.
	<i>If yes, please provide details of sponsor and state amount</i>			

2. Each personnel is required to complete the below table individually

PROJECT TITLE		
<i>Name of personnel:</i> Click or tap here to enter text.	<i>Role in project:</i> Click or tap here to enter text.	
<i>Institution:</i> Click or tap here to enter text.	<i>E-mail:</i> Click or tap here to enter text.	<i>Phone no.:</i> Click or tap here to enter text.
<i>Kindly indicate if you, your spouse or any of your dependents:</i>	<i>If yes, please provide additional information in a separate document</i>	<i>No</i>
a. have any form of relationships with commercial entities whose products/services are being used/tested or in direct competition with those being tested/used (Examples are consultancy/advisory roles, intellectual property rights etc.)		



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b. receive any form of financial aid from commercial entities involved in this project		
c. hold any stock, stock options or financial stake in the commercial entities involved with this project		
d. is employed or sponsored by the sponsor or commercial entity involved in this project		

If your answer is yes in any of the above cases and if the research project runs over several years, the COI form must be updated on no less than an annual basis. New conflicts should be reported as soon as they are identified by submitting a new COI form.

Violations involving COI could lead to removal from study activities.

3. COMMENTS FOR THE IRB

Is there any other information that should be reported to the IRB?



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4. DECLARATION:

I confirm that the above information has been provided by me is complete and true to the best of my knowledge. I undertake to promptly inform the IRB of any changes in my financial interests and arrangements clarified above, or those of my spouse and dependent children, during the course of the study or within one year of approval of the study.

Name:

Signature:

Date:

Please compile this form along with any supporting evidences into a single PDF document.

For official use:

Comments of IRB:

Chairman, MBRU-IRB:

Date:



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