Laporan Komite Etik Penelitian Kesehatan (KEPK)

Triwulan I/II/III/IV\*

Nama : ………………………………………………………………………………………………………………..

Alamat : ……………………………………………………………………………………………………………….

No ID : ………………………………………………………………………………………………………………..

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| --- | --- | --- |
| **I** | **Permohonan kaji etik yang masuk** | |
|  |  | **Jumlah** |
|  | 1. Internal |  |
|  | 1. Observasional |  |
|  | 1. Eksperimental |  |
|  | 1. eksternal |  |
|  | 1. Observasional |  |
|  | 1. Eksperimental |  |
|  | Total |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **II** | **Persetujuan etik yang dikeluarkan** | | |
|  |  | **Jumlah** | **Rerata waktu telaah**  **(hari)** |
|  | 1. Exempted |  |  |
|  | 1. Expedited |  |  |
|  | 1. Full board |  |  |
|  | Total |  |  |

|  |  |  |
| --- | --- | --- |
| **III** | **Judul dan nama Ketua Pelaksana Penelitian** | |
| **No** | **Judul Penelitian** | **Ketua Pelaksana** |
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