

Abstracts, Publications, Presentations (APP)

Review by Southwest Tribal IRB

PART I. REVIEW REQUEST: *To be completed by applicant*

Date: _____

Type of Request (check all that apply):

Abstract Publication Presentation

NOTE: Please attach to this form:

1. Abstracts, Publications, or Presentations (APP) to be reviewed
2. Call for Abstract (Information for authors and presenters)

Southwest Tribal IRB # _____ Principal Investigator: _____

Protocol Title: _____

Primary & Co-Authors: _____

Primary author's e-mail: _____ Phone #: _____

Institutional Name and Address: _____

APP Submission Title: _____

Conference/Journal Name: _____

Submission Application DEADLINE: _____

Date of presentation (Abstract/Presentation ONLY): _____

Has this abstract, publication or presentation received prior Southwest Tribal IRB approval?

No (Attach document(s) to be reviewed)

Yes, Southwest Tribal IRB approval date: _____ (IF YES, PLEASE FILL OUT BOX BELOW)

IF YES, Please fill out info (title and conference/journal) for approved submission (if different from above):

Title of APP submission: _____

Conference/Journal: _____

Was abstract, publication or presentation published?

No Yes, Date of presentation/publication: _____

Will the approved abstract, publication or presentation be re-submitted?

No (Note: Please attach document to be reviewed)

Yes (Note: *No changes can be made on previously approved abstract, publication or presentation; Please attach approved documenting materials*)

TRIBAL CONFIDENTIALITY AND PRIVACY STATEMENT (Please read and initial)

To protect Tribal confidentiality and privacy, the Southwest Tribal IRB prohibits the publication of names of the Tribal communities involved in the current research project; unless permission is granted by the Tribe.

I have read, and acknowledge the statement above: _____ (Applicant initial here)

Does this abstract, presentation, publication include the name(s) of Tribe or Tribal-based organization?

No

Yes, Tribe[s]: _____ *If yes, please indicate status below:*

Tribal approval attached Seeking Tribal approval other: _____

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PART II. PRINCIPAL INVESTIGATOR (PI) RESPONSIBILITIES:

(Please Read and Initial)

I will not publish the names of Tribal entities or Tribal community members without their prior consent

1.* _____; 2. _____

I understand if the results of the research are used to prepare additional papers for publication or presentation at professional conferences; powerpoint slides, posters, manuscripts, and/or abstracts must be submitted to the Southwest Tribal IRB for pre-publication approval.

1.* _____; 2. _____

1. *PI Signature: _____

2. Co-PI Signature: _____

PART III. REVIEW *To be completed by Southwest Tribal IRB*

FOR OFFICE USE ONLY:

Received APP _____ *sent APP reviews* _____ *received final reviews* _____
sent recommendations/contingencies to PI _____ *received revisions from PI* _____
sent final decision to PI (official approval letter sent) _____

1. **IRB Reviewer Name:** _____ **Date Submitted:** _____

I feel that this may contain a major inaccuracy about or statement potentially damaging to Tribe[s], Tribal-based organization[s], Indigenous people, or individual participant[s]. (Check one)

No Yes, explain: _____

Recommendations (Check one): Approve Disapprove Tabled until _____

Approve with Contingencies: _____

Approve with Recommendations: _____

Other concerns: _____

2. **IRB Reviewer Name:** _____ **Date Submitted:** _____

I feel that this may contain a major inaccuracy about or statement potentially damaging to Tribe[s], Tribal-based organization[s], Indigenous people, or individual participant[s]. (Check one)

No Yes, explain: _____

Recommendations (Check one): Approve Disapprove Tabled until _____

Approve with Contingencies: _____

Approve with Recommendations: _____

Other concerns: _____

Southwest Tribal IRB Coordinator _____ **Date:** _____

Additional Comments: _____