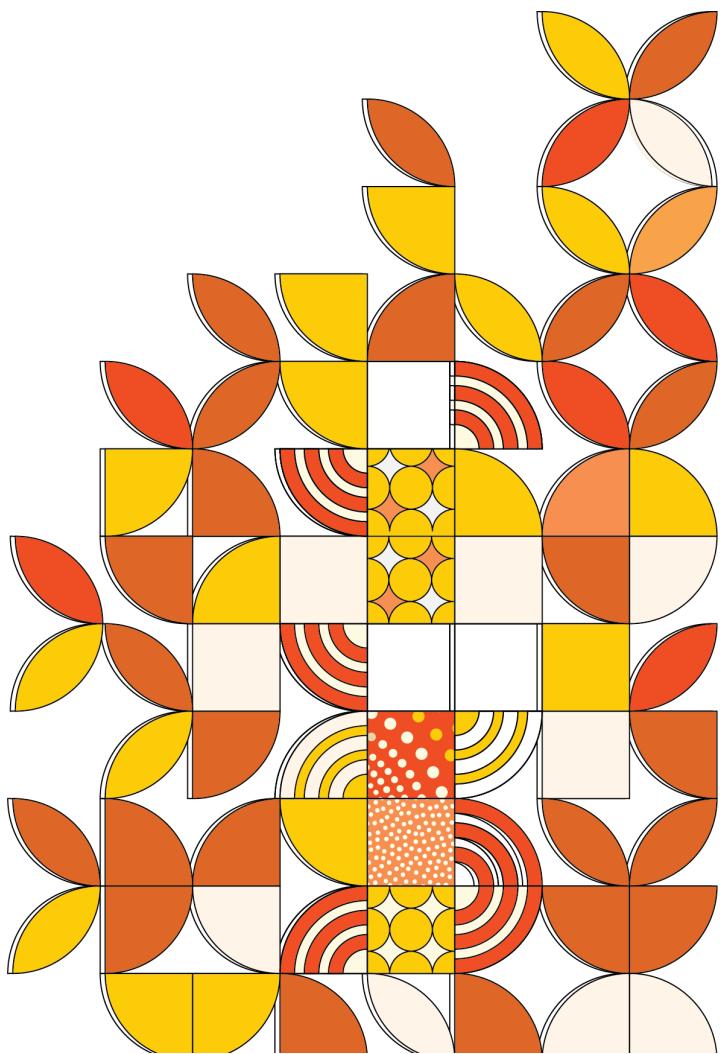


Participant Information Sheet (PIS) and Participant Consent Form (PCF) Checklist



IHM Participant Information Sheet (PIS) and Participant Consent Form (PCF) Checklist

This checklist ensures that all necessary elements are included in the Participant Information Sheet and Consent Form before submission to the IHM Low-Risk Human Research Ethics Panel. A completed checklist must accompany each ethics application.

Project Details

Project Title:

Principal Investigator:

Co-Investigators (if applicable):

Version Number / Date:

Section A: Participant Information Sheet (PIS)

Sl. No.	Criteria	Yes	No	If No, Provide Explanation
1	Version and date for each participant group (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
2	On IHM letterhead (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
3	Full title of the project	<input type="checkbox"/>	<input type="checkbox"/>	
4	Lay title of the project (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
5	Names, titles, roles, and affiliations of all investigators	<input type="checkbox"/>	<input type="checkbox"/>	
6	Plain language summary of the study purpose	<input type="checkbox"/>	<input type="checkbox"/>	
7	Clear description of what participation involves (procedures, expectations)	<input type="checkbox"/>	<input type="checkbox"/>	
8	Duration and location of participation	<input type="checkbox"/>	<input type="checkbox"/>	
9	Risks clearly described (including psychological, physical, or cultural)	<input type="checkbox"/>	<input type="checkbox"/>	
10	Potential benefits to participants or society	<input type="checkbox"/>	<input type="checkbox"/>	
11	Support available in case of adverse events or distress	<input type="checkbox"/>	<input type="checkbox"/>	
12	Voluntary participation and right to withdraw without penalty	<input type="checkbox"/>	<input type="checkbox"/>	
13	Confidentiality and data protection assurances	<input type="checkbox"/>	<input type="checkbox"/>	
14	Whether participants will have access to study results	<input type="checkbox"/>	<input type="checkbox"/>	
15	Whether debriefing will be provided (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
16	Reimbursement or compensation (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
17	Contact details for questions or concerns (research team and Ethics and Integrity Officer)	<input type="checkbox"/>	<input type="checkbox"/>	
18	IHM Research Ethics Statement included	<input type="checkbox"/>	<input type="checkbox"/>	

IHM Ethics Statement (to be included in all PIS documents)

"This research has been reviewed and approved by the Institute of Health and Management's Low-Risk Human Research Ethics Panel. It complies with the National Statement on Ethical Conduct in Human Research (2025). If you have concerns about this research or your rights as a participant, please contact the IHM Research Ethics and Integrity Officer at research@ihm.edu.au.

Section B – Participant Consent Form (PCF)

Sl. No.	Criteria	Yes	No	If No, Provide Explanation
1	Version and date for each participant group (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
2	Full title of the project	<input type="checkbox"/>	<input type="checkbox"/>	
3	Lay title of the project (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
4	Names, titles, and affiliations of investigators	<input type="checkbox"/>	<input type="checkbox"/>	
5	Declaration of informed consent (e.g., "I have read and understood...")	<input type="checkbox"/>	<input type="checkbox"/>	
6	Statement of voluntary participation and right to withdraw without penalty	<input type="checkbox"/>	<input type="checkbox"/>	
7	Assurance of confidentiality	<input type="checkbox"/>	<input type="checkbox"/>	
8	Space for participant's full name, signature, and date	<input type="checkbox"/>	<input type="checkbox"/>	
9	Space for the signature of the parent/guardian (if applicable), relationship, and date	<input type="checkbox"/>	<input type="checkbox"/>	
10	Contact information for follow-up queries or concerns	<input type="checkbox"/>	<input type="checkbox"/>	