

In case of reply the number
And the date of this
Letter should be quoted

My Ref. No.....

Your Ref. No.....



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FORM C – Amendment Form

INSTRUCTIONS:

1. Please complete all sections and submit one hard copy of the amended protocol.
2. Submit 14 hardcopies of this form to the KBTH-IRB Office. The **amended documents with highlighted changes** should accompany the amendment form. Send a soft copy rdo@kbth.gov.gh to facilitate the review process.
3. Use very clear font size such as Times New Roman 12pt, Arial 11 pt, Calibri 12pt.

Section A: Background Information

Study title			
Principal Investigator		Study start date	
Certified Protocol Number (CPN)		Anticipated end date	

Section B: Proposed Amendments

Current condition (<i>indicate source document & location</i>)	Amendment	Proposed by	Reason for change	Will change increase risk to participants?

Section C: Signature

**Principal Investigator / Co-
Investigator**

Name	Signature	Date

