

**BATANGAS MEDICAL CENTER
 RESEARCH ETHICS REVIEW COMMITTEE**

PROTOCOL SUMMARY SHEET (FORM 2.6.4)

Date: _____

RERC Protocol NO:	Title
Principal Investigator	Sponsor
Rationale	
Objectives	
Study Design/ Methodology	
Inclusion Criteria	
Exclusion Criteria	
Data Analysis Plan	

**BATANGAS MEDICAL CENTER
RESEARCH ETHICS REVIEW COMMITTEE**

Study Outcomes