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Hiv and lymphadenopathy

Naidoo, Sagren

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UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG

Division of the Deputy Registrar (Research)

COMMITTEE FOR RESEARCH ON HUMAN SUBJECTS (MEDICAL)
Ref: R14/49 Naidoo

CLEARANCE CERTIFICATE PROTOCOL NUMBER M01-10-13

PROJECT Human Immunodeficiency Virus and Lymphadenopathy

INVESTIGATORS Dr S Naidoo

DEPARTMENT School of Clinical Medicine, CH Baragwanath Hospital

DATE CONSIDERED 01-10-19

DECISION OF THE COMMITTEE *

Approved unconditionally

DATE 02-08-13 CHAIRMAN.....(Professor P E Cleaton-Jones)

* Guidelines for written "informed consent" attached where applicable.

c c Supervisor: M Patel
Dept of School of Clinical Medicine, CH Baragwanath Hospital

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DECLARATION OF INVESTIGATOR(S)

To be completed in duplicate and ONE COPY returned to the Secretary at Room 10001, 10th Floor, Senate House, University.

I/we fully understand the conditions under which I am/we are authorized to carry out the abovementioned research and I/we guarantee to ensure compliance with these conditions. Should any departure to be contemplated from the research procedure as approved I/we undertake to resubmit the protocol to the Committee.

PLEASE QUOTE THE PROTOCOL NUMBER IN ALL ENQUIRIES