



R14/49 Dr Nina Elisabeth Diana et al

## HUMAN RESEARCH ETHICS COMMITTEE (MEDICAL)

### CLEARANCE CERTIFICATE NO. M1511104

**NAME:** Dr Nina Elisabeth Diana et al  
**(Principal Investigator)**

**DEPARTMENT:** Internal Medicine  
Charlotte Maxeke Johannesburg Academic Hospital  
Chris Hani Baragwanath Academic Hospital

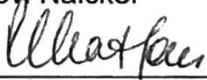
**PROJECT TITLE:** Clinicopathological Correlations of Renal Histology  
and Outcomes in HIV-Positive Patients in Johannesburg,  
a 12 Year Review

**DATE CONSIDERED:** Adhoc

**DECISION:** Approved unconditionally

**CONDITIONS:** Sub-Study

**SUPERVISOR:** Prof Saraladevi Naicker

**APPROVED BY:**   
Professor P Cleaton-Jones, Chairperson, HREC (Medical)

**DATE OF APPROVAL:** 09/12/2015

This clearance certificate is valid for 5 years from date of approval. Extension may be applied for.

#### DECLARATION OF INVESTIGATORS

To be completed in duplicate and **ONE COPY** returned to the Secretary in Room 10004, 10th floor, Senate House, University.

I/we fully understand the conditions under which I am/we are authorized to carry out the above-mentioned research and I/we undertake to ensure compliance with these conditions. Should any departure be contemplated, from the research protocol as approved, I/we undertake to resubmit the application to the Committee. **I agree to submit a yearly progress report.**

  
Principal Investigator Signature

Date 10 / 12 / 2015

PLEASE QUOTE THE PROTOCOL NUMBER IN ALL ENQUIRIES



**UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG**

Division of the Deputy Registrar (Research)

**HUMAN RESEARCH ETHICS COMMITTEE (MEDICAL)**

R14/49 Dr Nina E Diana

**CLEARANCE CERTIFICATE**

**M121184**

**PROJECT**

Renal Disease in HIV Positive Adults at  
Charlotte Maxeke Johannesburg Academic  
Hospital

**INVESTIGATORS**

Dr Nina E Diana.

**DEPARTMENT**

Internal Medicine/Nephrology

**DATE CONSIDERED**

31/11/2012

**DECISION OF THE COMMITTEE\***

Approved unconditionally

**Unless otherwise specified this ethical clearance is valid for 5 years and may be renewed upon application.**

**DATE** 30/11/2012

**CHAIRPERSON** .....  
(Professor PE Cleaton-Jones)

\*Guidelines for written 'informed consent' attached where applicable

cc: Supervisor : Prof S Naicker

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**PLEASE QUOTE THE PROTOCOL NUMBER IN ALL ENQUIRIES...**



**UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG**

Division of the Deputy Registrar (Research)

**HUMAN RESEARCH ETHICS COMMITTEE (MEDICAL)**

R14/49 Dr Alda Vermeulen

**CLEARANCE CERTIFICATE**

**M120874**

**PROJECT**

A Review of Patterns of Renal Disease at  
Chris Hani Baragwanath Academic Hospital  
from 1982-2011

**INVESTIGATORS**

Dr Alda Vermeulen.

**DEPARTMENT**

Department of Internal Medicine

**DATE CONSIDERED**

31/08/2012

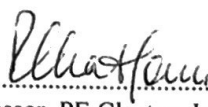
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**DATE** 31/08/2012

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(Professor PE Cleaton-Jones)

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