Optional DSM Memo to IRB: Template

RECOMMENDATION FORMAT

MEMORANDUM (or letter)

Date:

From: NAME, Principal Investigator

To: IRB Chair

Re: DSMB Review of NAME OF TRIAL

Name (role)

The DSMB is an independent monitoring board that has been appointed by the National Institute of Neurological Disorders and Stroke (NINDS) to oversee the conduct of the NAME OF TRIAL(S). Meetings are held approximately [insert time, e.g., once a year] to review the performance, safety and efficacy of the trial. All of the members of the DSMB are experts in one or more aspects of the subject matter of this trial.

On DATE there was a meeting held (LOCATION OR by teleconference/webconference). Those attending:

DSMB Members: Investigators:

Name, (DSMB Chair)

Name

Name

Name

Name

NINDS Staff: Other attendees:

Name (role) Name, reason for attendance

The following items were discussed: (indicate protocol version number if modifications discussed, include date through date to clarify what data were reviewed)

List general topics

The DSMB found, with NINDS concurrence, that the study was safe and ethical to continue (or not continue, or will be amended, etc. - with explanation)

cc: Avindra Nath, MD Clinical Director, NINDS