Use this form to amend an existing IRB approved research protocol. An amendment may be necessary when unexpected discoveries or circumstances require revision of the original research protocol.

Principle Investigator: _____________________________ Date: ________________
Protocol Number: ___________________ Original Protocol Approval Date: ________________

Describe the proposed changes to the protocol with an explanation of why the changes are necessary.

Attach updated versions of relevant protocol materials, with highlighted changes from the previously approved protocol.

**Principal Investigator:** The information I have provided represents a fair estimate of risks to human subjects.

________________________________________________________________________
P.I. Signature _____________________________ Date

**IRB Chair Decision:** ____ Approved ____ Disapproved

________________________________________________________________________
IRB Chair Signature _____________________________ Date