## **AUCKLAND HEALTH RESEARCH ETHICS COMMITTEE (AHREC)**

13/09/2023

Professor Jennifer Craig

Ophthalmology

Waipapa Taumata Rau | University of Auckland

## Re: Application for Ethics Approval (Our Ref. AH26619): Approved with Comment

The Committee considered the application for ethics approval for your study entitled "**Tackling tear film instability in contact lens wear**". We are pleased to inform you that ethics approval has been granted with the following comment(s) or required minor changes:

- 1. G.3.a Consent form: consider adding to the Consent Form that the participant understands that they will receive \$20 voucher as reimbursement per clinic visit.
- 2. G.3.a Participant Information Sheet: consider adding the maximum of \$60 vouchers that a participant could receive for completing the three visits.

The expiry date for this approval is .

**Locality approval:** Before starting your research, ensure that all the required locality approvals have been obtained. If one or more DHBs will be a locality, please contact their Research Office(s) to determine the locality approval requirements of the DHB(s).

**Final report:** In order that up-to-date records are maintained, you must notify the Committee once your project is completed and submit a final report.

**Amendments to the approved project:** Should you need to make any changes to the approved project, please follow the steps below:

- Send a request to the AHREC Administrators to unlock the application form (using the Correspondence tab in Ethics RM).
- Make all changes to the relevant sections of the application form and attach revised documents (as appropriate).
- Change the Application Type to "Amendment request" in Section L.
- Add a summary of the changes requested in the text box.
- Submit the amendment request (PI/Supervisors only to submit the form).

If the project changes significantly, you are required to submit a new application.

**Funded projects:** If you received funding for this project, please provide this approval letter to your local Faculty Research Project Coordinator (RPC) or Research Project Manager (RPM) so that the approval can be notified via a Service Request to the Research Operations Centre (ROC) for activation of the grant.

The Chair and the members of AHREC would be happy to discuss general matters relating to ethics approvals. If you wish to do so, please contact the AHREC Ethics Administrators at <a href="mailto:ahrec@auckland.ac.nz">ahrec@auckland.ac.nz</a> in the first instance.

## Additional information:

• Do not forget to fill in the 'approval wording' on the PISs, CFs and/or advertisements, using the date of this approval and the reference number, before you use the documents or send them out to your participants.

All communications with the AHREC regarding this application should indicate this reference number: AH26619.

AHREC Administrators

Auckland Health Research Ethics Committee