

SRI MUTHUKUMARAN MEDICAL COLLEGE HOSPITAL & RESEARCH  
INSTITUTE

CHIKKARAYARPURAM, KANCHIPURAM DISTRICT - 600069.

SCIENTIFIC ADVISORY COMMITTEE  
STANDARD OPERATING PROTOCOL

Prepared by:	Reviewed by:	Approved by:

SCIENTIFIC ADVISORY COMMITTEE ( SAC)  
STANDARD OPERATING PROTOCOL

Version 1.0  
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## 1. Purpose:

The purpose of this Standard operating procedure ( SOP) is to describe the process of review of research proposals by Scientific advisory committee (SAC), SMMCHRI.

## 2. Members of SAC:

## i ) Internal members:

S.No	Name	SAC Designation	Specialization	Address
1	Dr. B.Kasinathan	Chairperson	Cardiothoracic Surgery	SMMCHRI, Chikkarayapuram, Near Mangadu, Chennai – 600069. Email: Mob:
2	Dr. G. Sumathi, M.D., Ph.D.,	Member - Secretary	Microbiology	Professor and Head Department of Microbiology, SMMCHRI, Chikkarayapuram, Near Mangadu, Chennai – 600069. Email: drgsumathi@rediffmail.com Mob: 9444624292.
3	Dr. S. Balamurugan, M.D.,	Assistant Member – Secretary (1)	TB and Chest	Professor Department of TB and Chest, SMMCHRI, Chikkarayapuram, Near Mangadu, Chennai – 600069. Email: dr.s.bala@gmail.com Mob: 9600002646.
4	Dr. N.Sowmya, M.D.,	Assistant Member – Secretary (2)	Microbiology	Associate Professor Department of Microbiology, SMMCHRI, Chikkarayapuram, Near Mangadu, Chennai – 600069. Email: drsowmyasathish@gmail.com Mob: 8056046731.
5	Dr. V. Ranganathan, M.D.,	Member	Anaesthesia	Professor and Head Department of Anaesthesiology, SMMCHRI, Chikkarayapuram, Near Mangadu, Chennai – 600069. Email: drcvranga@gmail.com Mob: 9840556142.
6	Dr. Suzanne Maria D’cruz, M.D.,	Member	Physiology PG Director	Professor Department of Physiology, SMMCHRI, Chikkarayapuram, Near Mangadu, Chennai – 600069. Email: susandr@ymail.com Mob: 9840332040.

7	Dr. R. Sukumar, M.D.,	Member	General Medicine	Professor Department of General Medicine, SMMCHRI, Chikkarayapuram, Near Mangadu, Chennai – 600069. Email: drsukumar1954@gmail.com Mob: 9840966126.
8	Dr. M. Sunitha, M.S.,	Member	ENT	Professor and Head Department of ENT SMMCHRI, Chikkarayapuram, Near Mangadu, Chennai – 600069. Email: drsunithavas@gmail.com Mob: 9488037684.
9	Dr. Ashogan, M.D.,	Member	Psychiatry	Professor and Head Department of Psychiatry SMMCHRI, Chikkarayapuram, Near Mangadu, Chennai – 600069. Email: tvasokan@gmail.com Mob: 9444018060.
10	Dr. Mehandi.V. Mahajan, M.S., DNB.,	Member	Anatomy	Professor Department of Anatomy SMMCHRI, Chikkarayapuram, Near Mangadu, Chennai – 600069. Email: mm1710@gmail.com Mob: 9600164164.
11.	Dr. Radha Bai, T, M.S.,	Member	OBG	Professor Department of OBG SMMCHRI, Chikkarayapuram, Near Mangadu, Chennai – 600069. Email: radhprabhu54@ymail.com Mob: 9444051124.

## ii) External members:

S.No	Name	Specialization	Address
1	Dr. P. Balasubramaniyan, Ph.D.,	Endocrinologist	Director Professor and Head Department of Endocrinology, Dr. ALM PG IBMS, <b>University of Madras - Taramani,</b> Chennai - 600 113. Email: kbala82@hotmail.com Mob: 9444431991
2	Dr. L. N. Padmasani, M.D., MRCPCH.,	Pediatrics	Professor Department of Pediatrics, Sri Ramachandra Medical College Hospital and Research Institute ( <b>SRMC</b> ), Porur, Chennai- 600 116. Email: padmasani2001@yahoo.com Mob: 9445140200.
3	Dr. Luke Elizabeth Hanna, Ph.D.,	TB/HIV/Genetics	Scientist 'E' National Institute for Research in Tuberculosis <b>(NITR) - ICMR,</b> Chetpet, Chennai – 600 031. Email: hannatrc@yahoo.com Mob: 9840644376.
4	Dr. N. Sanjeeva Reddy, M.D.,	Reproductive Medicine	Professor and Head Department of Reproductive Medicine, Sri Ramachandra Medical College Hospital and Research Institute ( <b>SRMC</b> ), Porur, Chennai- 600116. Email: royalsnr@gmail.com Mob: 9841031131.
5	Dr. Vijayaraghavan, Ph.D.,	CRF / Pharmacology	Director for Research <b>Saveetha Medical College Hospital,</b> Kuthambakkam, Tamil Nadu 600124. Email: dir.res.su@gmail.com Mob: 9941220727.
6	Dr. Shanthi Edward, M.D.,	Community Medicine	Professor Department of Community Medicine, <b>Sree Balaji Medical College</b> Hospital and Research Institute, Chennai – 600044. Email: shanthiedward56@gmail.com Mob: 9840331573.
7	Dr. Thiagarajan Ravinder, M.D.,	Rheumatology	Professor of Rheumatology, Kilpauk Medical college Hospital ( <b>KMC</b> ), Email: drtravinder67@gmail.com Mob: 9382863819.
8	Dr. B. Anandan, Ph.D.,	Genetics	Associate Professor Department of Genetics, Dr. ALM PG IBMS, <b>University of Madras – Taramani,</b> Chennai - 600 113. Email: anand_gem@yahoo.com Mob: 9841383736.

### 3. Scope:

All research projects, study proposals and dissertation topics to be undertaken by undergraduates, postgraduates and faculty members in Sri Muthukumaran medical college hospital & research institute will be submitted for review and approval by SAC.

### 4. Responsibilities:

- i) Proposals will be received by the Dean Office.
- ii) Member – Secretary will review the proposals for completeness and assign the proposals to two internal members for pre-review process.
- iii) The internal members will pre-review the proposals assigned to them within the time frame and the changed proposals should be submitted for discussion in the following SAC meeting.
- iv) The feedback of the members in SAC meeting will be compiled by the Secretary and Assistant secretary and be given to the Investigator.

### 5. Review process:

- i) The SAC committee meeting will meet twice a year or whenever necessary.
- ii) The committee meeting will happen prior to Institutional ethical committee (IEC) meetings.
- iii) All research projects, study proposals and dissertation topics to be undertaken by undergraduates, postgraduates and faculty members in Sri Muthukumaran medical college hospital & research institute will be submitted for review and approval by SAC.
- iv) The approval form from the SAC committee should be submitted to the Institutional ethical committee (IEC)
- v) The proposals will be accepted only in the assigned format (Annexure I)
- vi) The completed proposals will be accepted by the Dean office within the specified time.
- vii) The completeness of the proposals will be reviewed by the Member – Secretary and each proposal will be pre- reviewed by two internal members of the SAC committee.
- viii) The corrected proposals will be submitted to the Member – secretary for final discussion in the meeting (Soft copy & Hard copy)
- ix) A member of SAC can excuse himself / herself as reviewer, if he/she is an submitting a study proposal for the SAC.
- x) The pre-reviewed proposals will be sent to all members of the SAC committee through mail along with the intimation of SAC meeting schedule.
- xi) The SAC meeting will be presided by the Chairperson, Dean of the institution.
- xii) About 50% of the total members is considered to be enough to proceed with the meeting.
- xiii) Meetings will be conducted by following all standard safety precautions.

### 6. Decision on proposals:

The aim is not to say accept/reject, but to provide feedback in order to improve the quality of research.

The decision can fall into following categories:

- i) Approved
- ii) Approved with changes – Modified proposal should be submitted to member – secretary for final approval.
- iii) Rejected.

7. Registers and forms:

The following registers and forms should be maintained by the Assistant member – secretary, SAC:

- i) Meeting Circular register
- ii) Study proposal (Soft & Hard copy)
- iii) Attendance of the meeting
- iv) Minutes of the meeting
- v) Assessment & feedback form from the reviewer
- vi) Decision on proposals

ANNEXURE I

**Scientific Advisory Committee (SAC) – Proposal Format**  
**Sri Muthukumaran Medical College Hospital and Research Institute**  
**Chikkarayapuram, Near Mangadu, Chennai-600069**

1. **Name of the Investigator** :
2. **Designation** :
3. **Department** :
4. **Guide** :
5. **Course** :

6. **Co- Guide (If any)** :

7. **Title of the proposed research topic:**

(To be enclosed):

8. **Abstract** :
9. **Background** :
10. **Literature review** :
11. **Study Aim & objectives** :
12. **Novelty / Innovations** :
13. **Methodology** :
14. **Expected outcome & benefits** :
15. **Limitations of the study** :
16. **References** :
17. **Patient Information sheet (Tamil/English):**
18. **Informed Consent form (Tamil/English):**

SIGNATURE OF THE INVESTIGATOR

SIGNATURE OF GUIDE

SIGNATURE OF HOD



**TITLE:**

**8. Abstract:**

**Background:**

**Aim of the study:**

**Materials & Methods:**

**Expected outcome & Benefits:**

**9. Background:**

**10.Literature Review:**

**11. Study Aim & Objectives:**

**AIM:**

**OBJECTIVES:**

**12. Novelty/ Innovation:**

**13. Methodology:.**

- Study design:
- Study Population:
- Study group:
- Sampling method:
- Study period:
- Inclusion criteria:
- Exclusion criteria:
- Sample size
- Data collection method:
- Analysis plan:

**14. Expected Outcome and Benefits:**

**15. Limitations:**

**16. References:**

**17. Patient Information sheet (Tamil/ English)**

**18.Informed consent form (Tamil/English)**