



DOW UNIVERSITY OF HEALTH SCIENCES

DEPARTMENT OF POSTGRADUATE STUDIES

Name of student : _____ Student ID: _____
Specialty & Program : _____
Study No. : _____

To be filled by DPGS

SYNOPSIS SUBMISSION CHECK LIST FOR MS/MD **SCIENTIFIC COMMITTEE**

- Twelve copies of Research Protocol with signed checklist.
Name of the principal investigator must be the same as on the enrollment card.
Title page should mention the name of the supervisor along with his/her signature.
Informed consent both in English and Urdu or any other local language of the population study should be attached in synopsis appendix.
Questionnaire attached in appendix being administered during the study (if applicable)
- Fifty blank A-4 Pages for Statistical and Evaluation proforma for distribution.
- A copy of Drug Brochure or any supplementary information enclosed (if applicable).
- Soft copy of Synopsis and complete Plagiarism Report*
- GAT Result (Optional)
- Soft copy for presentation. (5-7 minutes presentation in Power Point).

*Students must email final copy of synopsis at plagiarism@duhs.edu.pk for plagiarism check. The plagiarism report will be sent back which needs to be submitted. Maximum percentage of similarity index is allowed as per HEC criteria of 19% and not more than 5% from one source.

Signature: Principal Investigator

Date

Signature of supervisor
(Designation & Qualification)

Date

Signature of Program Director

Date