UK Template

VEAR:
COUNTRY:
DATE OF SUBMISSION TO CENTRAL PLATFORM: [insert date]
METHODOLOGICAL NOTE (H) (clause 24.10): [insert link here]

| DISCLOSURE OF PAYMENTS TO HEALTHCARE PROFESSIONALS (INC.), OTHER RELEVANT DECISION MAKERS (ORDANS) AND HEALTHCARE ORGANISATIONS (HCOs) Article 2 - Section 2-0.8 Schedule 2 - Section 2-0.8 Schedule 2- Section 2-0.8 Schedule 2- Section 2-0.8 Schedule 2-0.8 Clause 24 | | | | | | | | | | | | Date of publication: 30 March 2021 | | | | | | | | | | | | | | | | | | | | |
|--|---|--|-----------------|-------------------------|-------------------|-----------------------|-------------------|-----------------------|----------|--|----------------------------------|------------------------------------|----------|--------------------------|-----------------|------------------------|-----------------------|----------------------|--|---|--|--|-------------------------|--------------------------------|-------------------------|--|-----|----------------------------|-----------------|-------|--|------------|
| | | | Full Name | | | | | | Prin | ORDMs: City of cipal Practice Os: city where registered | Country of Principal Practice | Principal Practice Address | | | | | | | Unique country local identifier OPTIONAL | | | Donations and Grants to HCO: (Art. 3.01.1.a 8 | Contribution to | costs of Events (Art. 3.01.1.b | & 3.01.2.a & Clause 24) | Fee for service and consultancy (Art. 3.01.1.c & 3.01.2.c & Clause 24) | | Blank Column <i>(Clau</i> | | | | |
| | | | | (Art. 1.01 & Clouse 24) | | | | | (Art. | 3 & Clause 24) | (Schedule 1 & Clause 24, | (Art. 3 & Clouse 24) | | | | | | (Art. 3 & Clause 24) | | Joint Working (Clouse 20) | Clause 24) and Benefits in Kind to HCOs (Clause 24) | Sponsorship agreements with HCOs / third parties appointed by HCOs to manage an Event | Registration Fees | Travel & Accommodation | Fees | Related expenses agreed in the fee for service or consultancy contract | | Blank Column (Clause X) | in Blank Column | TOTAL | | |
| | Title | First Name | Initial | Last Nam | e | Speciality | | Role | Principa | c/ORDMs: City of nal Practice HCOs: where registered | Country of Principal Pract | ce Institution | n Name | Location | | Address Line 1 | Address Line 2 | Post Code | Email | Local Register ID Third Party Databa ID | or ese | | | | | | | | | | | |
| | | | | | | | | | | | | ' | INDIVIDU | JAL NAMED DISCLOSURE - 0 | one line per HC | CP/ORDM (i.e. all tran | sfers of value during | a year for an indi | ridual HCP will be s | ummed up: itemizat | ion should be av | vailable for the individual Recipien | t or public authorities | consultation only, as appropr | iate) | | | | | | | |
| 9 | Dr | ROBIN | | JONES | Oncologi | t | | | SUTTON | I-LONDON | United Kingdom | ROYAL MARSDEN HOSPITAL | | SUTTON-LONDON | Londo | on | | CF14 4XN | | | | | | | | | | 1500 | | | | £1.500,00 |
| 3 | | | | | | | | | | | | | | | | | OTHER, NOT INCLUD | ED ABOVE - where | information canno | ot be disclosed on ar | individual basis | is for legal reasons | | | | | 1 | | | | | |
| 1 1 2 3 3 | Aggregate a Number of I | egate amount attributable to transfers of value to such Recipients - Art. 3.2 EPPA Templote & Clouse 24 the of Berünents I approved in approved from the Control of the Co | | | | | | | | | | | | | | | | | | - H | | | £0 £0 | | | | | | | | | |
| ₽ | Number of Recipients in aggregate disclosure - Art. 3.2, EFPIA Templote & Clouse 24 Number of Recipients disclosed in aggregate as a % of all Recipients (individual & aggregate disclosures) - Art. 3.2 & | | | | | | | - Art. 3.2 & Clause | e 24 | | | | | | | | | | | | | | | | | | | | | £0 | | |
| 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ě | | | | | | | | | | | | | | | | | ED ABOVE - where i | nformation cannot | t be disclosed on ar | individual basis for | legal reasons | | | | | | | | | | | |
| 3 | Aggregate a | amount attributal | ble to transfe | ers of value to | such Recipient | s - Art. 3.2, EFPIA T | Template & Clau: | use 24.9 | | | | | | | | | | | | | | | N/A | N/A | N/A | N/A | N/A | N/A | | | | N/A |
| | Number of I | Recipients in aggr | regate disclos | sure - Art. 3.2, | EFPIA Templa | e & Clause 24.9 | nato disclosuros) |) - Art. 3.2 & Clause | o 24 0 | | | | | | | | | | | | | /A N/A | N/A | N/A N/A | N/A N/A | N/A N/A | N/A | N/A N/A | | | | N/A N/A |
| | reumber of i | necipients disclos | seu iii aggrega | gate as a % Of t | ııı necipients (i | iuiviuuui & aggrego | jute uisclosures) | y - Art. 3.2 & Clause | C 24.3 | | | | | | | | | | | | N/ | A N/A | n/A | N/A | N/A | N/A | N/A | N/A | | | | N/A |
| and and | _z | | | | | | | | | | | | | | | | | | AGGREGATE DISCLO | SURE (Clause X) | | | | | | | | | | | | |
| AGGREGATE Research an | Transfers of Value re: Research & Development as defined (Art 3.04 & Clause 23.2) | | | | | | | | | | | N/A | | | | | | | | | | | | | | | | | | | | |

NOTE 1: 'Art.' refers to the relevant Article of the 2014 EFPIA Code on Disclosure of Transfers of Value from Pharmaceutical Companies to Healthcare Professionals and Healthcare Organisations

Clause' refers to the relevant Clause of the 2019 ABPI Code of Practice for the Pharmaceutical Industry.

Unique ID would be a database identifier either Binleys or OneKey. This can be left blank. NOTE 2:

NOTE 3:

Data relates to the column heading ie travel and accommodation

NOTE A: NOTE B:

Data relates to column heading ie fees for service

Data relates to the column heading ie related expenses agreed in the fee for service or consultancy contract NOTE D:

NOTE E:

Total £ disclosed as aggregate

Total number of individuals disclosing in aggregate. WARNING: this is not necessarily a sum of columns V,W,X and Y as indivuduals might appear in more than one category i.e. receive fees and expenses. The link can be included here and/or in the methodological note

The methodological note must make clear the number of individuals who have agreed to some payments being disclosed individually and some in aggregate

NOTE G:

NOTE H:

NOTE J: NOTE K:

Total £ for that individual
Total £ for that HCO across all activities except R&D

| required |
|---|
| optional |
| to facilitate the process but not to be published on database |