



**EUROPEAN UNION OF MEDICAL SPECIALISTS (UEMS)
EUROPEAN ACCREDITATION COUNCIL ON CME (EACCME®)**

RUE DE L'INDUSTRIE 24, BE- 1040 BRUSSELS

<https://eaccme.uems.eu> - accreditation@uems.eu

Conflict of Interest Disclosure Form

(to be completed by scientific/organising committee members)

NAME : *Prof. Dr. Bernadette Eberlein*

AFFILIATION: *Department of Dermatology and Allergy Biederstein
TU München, Germany*

In accordance with criterion 14 of document UEMS 2016/20 "EACCME® criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of potential or actual conflicts of interest, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. Declarations also must be made readily available, either in printed form, with the programme of the LEE, or on the website of the organiser of the LEE. Declarations must include whether any fee, honorarium or arrangement for reimbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

I have no potential conflict of interest to report

I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Bühlmann

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

B. Eberlein

Date:

20-Nov-2017



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(to be completed by scientific/organising committee members)

NAME : IOANA OCTAVIA AGACHE

AFFILIATION: FACULTY OF MEDICINE, TRAIKYLALIA UNIVERSITY, BRAHOV, ROMANIA

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DISCLOSURE

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- I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports: NATIONAL RESEARCH GRANT PH II - PUNTE -

Receipt of honoraria or consultation fees: CHEER, ASTRA ZELIECA 2014-4-23e

Participation in a company sponsored speaker's bureau: CHEER, ASTRA ZELIECA, NOVARTIS

Stock shareholder: —

Spouse/partner: —

Other support (please specify): —

Signature:

Date:

18 NOV 2017



Conflict of Interest Disclosure Form

(to be completed by scientific/organising committee members)

NAME : Hans Jürgen Hoffmann

AFFILIATION: Aarhus University, Denmark

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Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date:

7 December 2017



EUROPEAN UNION OF
MEDICAL SPECIALISTS
The European Accreditation Council
for
Continuing Medical Education –
EACCME®
Institution of the UEMS_{aisbl}

AVENUE DE LA COURONNE, 20

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Conflict of Interest Disclosure Form

(to be completed by scientific/organising committee members)

NAME: Schmidt-Weber

AFFILIATION: ZAUM, TUM

In accordance with criterion 24 of document UEMS 2012/30 "Accreditation of Live Educational Events by the EACCME", all declarations of potential or actual conflicts of interest, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. Declarations also must be made readily available, either in printed form, with the programme of the LEE, or on the website of the organiser of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursment of expenses in relation to the LEE has been provided.

DISCLOSURE

I have no potential conflict of interest to report

I have the following potential conflict(s) of interest to report

Type of affiliation / financial interest	Name of commercial company
Receipt of grants/research supports:	Bencard, LETi, ALLERGOPHARMA
Receipt of honoraria or consultation fees:	Bencard, Leti, Allergopharma
Participation in a company sponsored speaker's bureau:	/
Stock shareholder:	/
Spouse/partner:	/
Other support (please specify):	/

Signature:

Date:

14. May 2018



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Conflict of Interest Disclosure Form

(to be completed by scientific/organising committee members)

NAME : Vito Sabato

AFFILIATION: University of Antwper and Antwerp University Hospital

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Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date: 21.06.2018



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(to be completed by scientific/organising committee members)

NAME: Cristobalina Mayorga.

AFFILIATION: Research Laboratory and Allergy Unit, IBIMA, Hospital Regional Universitario de Malaga, UMA, Malaga, Spain

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Receipt of grants/research supports:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date: June 25, 2018



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(to be completed by scientific/organising committee members)

Docteur Paul ROUZAIRE

NAME : MCU-PH (N°10100191138)
UF HLA

AFFILIATION: Centre de Biologie / CHU Gabriel Montpied
63003 CLERMONT-FERRAND CEDEX 01
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Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date:

22/10/2018



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NAME : ...Anna Nopp.....

AFFILIATION: ...Karolinska Institutet.....

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Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date: 2018-06-21

UEMS_{aisbl} – Union Européenne des Médecins Spécialistes

IBAN BE28 0001 3283 3820 | BIC (SWIFT) BPOTBEB1 | VAT n° BE 0469.067.848