



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

AVENUE DE LA COURONNE, 20
BE- 1050 BRUSSELS
www.eaccme.eu

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accreditation@uems.net

Conflict of Interest Disclosure Form

(to be completed by faculty and scientific/organising committee members)

NAME : DENEESTERE Isabelle

AFFILIATION: ULB

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 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:

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

Date:

23/02/2016



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NAME : **MONTAGUT Jacques**

AFFILIATION: **IFREARES (France)**

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IFREARES
20, Route de Revel
31400 TOULOUSE
Tél. : 05 62 71 85 70 - Fax : 05 61 34 80 31
Site : ifiv.fr

Signature:

Date:

25 February 2016



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NAME : Dr Marie McLaughlin

AFFILIATION: University of Edinburgh

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NAME : WLDM Nelen

AFFILIATION: Dept. Obstetrics and Gynaecology, Radboud university medical centre, Nijmegen, the Netherlands

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Signature

Date: February 22nd 2016



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NAME: **DANIELA NOBUGIRA**

AFFILIATION: **IFREARES (France)**

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NAME : ANNA JEIGA

AFFILIATION: CTRB

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