

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

RUE DE L'INDUSTRIE 24, BE- 1040 BRUSSELS T + 32 2 649 51 64 eaccme.uems.eu - accreditation@uems.eu

Date: 15 Sept 2023

Conflict of Interest Disclosure Form

ADVAC Scientific Committee Member

NAME: Sandra ANGELE
AFFILIATION: Mérieux Foundation
In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement 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):



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Conflict of Interest Disclosure Form

ADVAC Scientific Committee Member

Edwin J. Asturias, MD NAME:	
AFFILIATION: University of Colorado School of Medicine	
In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement 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:	Pfizer
Receipt of honoraria or consultation fees:	Moderna, Merck, Invio
Participation in a company sponsored speaker's bureau:	
Stock shareholder:	

Signature:

Spouse/partner:



Other support (please specify):

Date: September 13, 2023



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Conflict of Interest Disclosure Form

ADVAC Scientific Committee Member

ANCANIDA / DANDUSDADHUAY

NAME: ANANDA S. BANDYOFADITA
AFFILIATION: Bill and Melinda Godes Foundation
In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement 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: 09/13/23

EUROPEAN UNION OF MEDICAL SPECIALISTS (UEMS)

EUROPEAN ACCREDITATION COUNCIL ON CME (EACCME®)

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Conflict of Interest Disclosure Form

(to be completed by Scientific/Organizing Committee Members)

NAME: jakob cramer

AFFILIATION: CEPI, Coalition for Epidemic Preparedness Innovations

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

☐ I have no potential conflict of interest to report	
have the following potential conflict(s) of interest to rep	ort
Type of affiliation / financial interest	Name of commercial company
Type of armidient, interior interior	
Receipt of grants/research supports:	>
Receipt of honoraria or consultation fees:	> -
	2
Participation in a company sponsored speaker's bureau:	-/-
Stock shareholder: Fresenins SE, BNT, Ma (very small amounts law Other support (please specify): other mon-phase	Merna, Siemens Healthiners
Other support (please specify): other non-plas	macentical titles)
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ure: Date:	
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Conflict of Interest Disclosure Form

ADVAC Scientific Committee Member

NAME: TARIK DERROLL

AFFILIATION: EUROPEAN CONTRE FOR DISEASE PREVENTION AND CONTROL.

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement 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: 3 oct. 2023



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Date: 02/10/2023

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Conflict of Interest Disclosure Form

(To be completed by scientific/organizing committee members)

NAME : Arnaud Didierlaurent	
AFFILIATION:University of Geneva	
In accordance with criterion 14 of document UEMS 2016/20 "EACC Educational Events (LEEs)", all declarations of potential or actual conflor other relationship, must be provided to the EACCME® upon submit must be made readily available, either in printed form, with the protection of the LEE. Declarations must include whether any imbursement of expenses in relation to the LEE has been provided.	licts of interest, whether due to a financial ssion of the application. Declarations also gramme of the LEE, or on the website of
DISCLOSURE	
☐ I have no potential conflict of interest to report	
X I have the following potential conflict(s) of interest to rep	ort
Type of affiliation / financial interest	Name of commercial company
Receipt of grants/research supports:	Moderna, Roche, GSK
Receipt of honoraria or consultation fees:	Sanofi, Roche, Speransa, ACM Biologicals Botanical Solutions
Participation in a company sponsored speaker's bureau:	Roche, Merck, GSK, Sanofi
Stock shareholder:	
Spouse/partner:	Work at GSK
Other support (please specify):	



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Conflict of Interest Disclosure Form

ADVAC Scientific Committee Member

NAME: PHILIPPE DUCLOS			
AFFILIATION: RETIRED FROM THE	UNIVERSITY	OF	GENEVA

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement 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:

13-09-2023

PRESIDENTE DA COMPANION DE LA COMPANION DE LA



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: Anna Durbin	
AFFILIATION:Johns Hopkins Bloomberg School of Public Health	
In accordance with criterion 13 of document UEMS 2023/07 "EAG Live Educational Events (LEEs)", all declarations of perceived or years, whether due to a financial or other relationship, mus submission of the application. COI declarations signed more than will not be accepted. Declarations must be made available on Declarations must include whether any fee, honorarium or arrang in relation to the LEE has been provided.	actual conflicts of interest for the last 3 t be provided to the EACCME® upon a 6 months before the date of the event line on the event website of the LEE.
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:	Merck & Co. I lectured at their vaccine course
Participation in a company sponsored speaker's bureau:	
Stock shareholder:	
Spouse/partner:	
Other support (please specify):	
Signature: Anna P Surber	Date: 14 SEP 2023



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Conflict of Interest Disclosure Form

ADVAC Scientific Committee Member

NAME EMILY ERSELDING AFFILIATION: NIAID/NIH

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DISCLOSURE

XI have no potential conflict of interest to report

 \square 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: Edulation

Date: 13 September 2023



NAME:Adam Finn....

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Conflict of Interest Disclosure Form

ADVAC Scientific Committee Member

AFFILIATION:University of Bristol, UK		
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DISCLOSURE		
☐ I have no potential conflict of interest to report		
X I have the following potential conflict(s) of interest t	to report	
Type of affiliation / financial interest	Name of commercial company	
Receipt of grants/research supports:	Pfizer, GSK, Sanofi,	
Receipt of honoraria or consultation fees:	RQ Bio, Hillevax, Imophoron,	
	VB Vaccines, Bionet-Asia, GSK	
Participation in a company sponsored speaker's bureau	:	
Stock shareholder:		
Spouse/partner:		
Other support (please specify):		

Date: 14 SEP 213



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Conflict of Interest Disclosure Form

ADVAC Scientific Committee Member

NAME: Martin Friede
AFFILIATION: W.H.C.
In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement 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: 10/10/2023



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Conflict of Interest Disclosure Form

ADVAC Scientific Committee Member

AFFILIATION: UNIGE
In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of
Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3
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years, whether due to a financial or other relationship, must be provided to the EACCME® submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses

in relation to the LEE has been provided.

NAME: Paul. Hewin LAMBERT

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:

Signature:

Other support (please specify):

Date: 12.10.2023



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

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Conflict of Interest Disclosure Form

ADVAC Scientific Committee Member

NAME: Dr Michael Makanga
AFFILIATION: E.O.C.T.P.
In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.
DISCLOSURE
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: \3 \(\(\) \(\



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Conflict of Interest Disclosure Form

ADVAC Scientific Committee Member

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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:

6d. ber 02/2023



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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME: Dr. Kathleen Neuzil
AFFILIATION: University of Maryland School of Medicine Center for Vaccine Development and Global Health
In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement 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: Phase 1 trial of a ferritin nanoparticle COVID vaccine. Company: VaxCo
Receipt of honoraria or consultation fees: N/A
Participation in a company sponsored speaker's bureau: N/A
Stock shareholder: N/A
Spouse/partner: ρ/A

Signature:

Other support (please specify): N/A

Date: September 14, 2023



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Conflict of Interest Disclosure Form

ADVAC Scientific Committee Member

NAME:	WAX MIX	MANCK			
AFFILIATION:	FINNISH	MMPTEFOR	HEATH	AND	WELFRE

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement 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: 14. September 2023



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

RUE DE L'INDUSTRIE 24, BE- 1040 BRUSSELS T + 32 2 649 51 64

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Conflict of Interest Disclosure Form ADVAC Scientific Committee Member

NAME:Dr Kamel Senouci	
AFFILIATION:University of Geneva (UNIGE)	
In accordance with criterion 13 of document UEMS 2023/07 "Live Educational Events (LEEs)", all declarations of perceive years, whether due to a financial or other relationship, n submission of the application. COI declarations signed more will not be accepted. Declarations must be made available Declarations must include whether any fee, honorarium or an in relation to the LEE has been provided.	d or actual conflicts of interest for the last 3 nust be provided to the EACCME® upon than 6 months before the date of the event e online on the event website of the LEE.
DISCLOSURE	
☑ I have no potential conflict of interest to report	
☐ I have the following potential conflict(s) of interes	et 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):	

Date: 02/10/2023



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Conflict of Interest Disclosure Form

ADVAC Scientific Committee Member

NAME: SIE	61481	Cloure	Anne
AFFILIATION:	Iniversit	j cf G	euova

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement of expenses in relation to the LEE has been provided.

DISCLOSURE

AI have no potential conflict of interest to repo	rt
☐ I have the following potential conflict(s) of in	terest 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: 14/9/200



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Conflict of Interest Disclosure Form

ADVAC Scientific Committee Member

NAME: DR NAVEEN THACKER
AFFILIATION: PRESIDENT, IPA

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursement 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

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IVDE	ога	1111	апоп	m	ancı	F: 1 B	ш	eresi	

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):

Name of commercial company

NIL

DEPARTMENT OF PEDIATRICS, UNIVERSITY OF OXFORD FUNDED

BY MSD

NIL

NIL

NIL

NIL

Date: 14-09-2023

Signature: CULS



NAME. Melinda Wharton

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

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Conflict of Interest Disclosure Form

ADVAC Scientific Committee Member

NAME.	
AFFILIATION: U.S. Centers for Disease Control and Prevention	
In accordance with criterion 13 of document UEMS 2023/07 "EAC Live Educational Events (LEEs)", all declarations of perceived or a years, whether due to a financial or other relationship, must submission of the application. COI declarations signed more than will not be accepted. Declarations must be made available onli Declarations must include whether any fee, honorarium or arrangin relation to the LEE has been provided.	be provided to the EACCME® upon 6 months before the date of the event the on the event website of the LEE.
DISCLOSURE	
☑ I have no potential conflict of interest to report ☐ I have the following potential conflict(s) of interest to re	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):	

Date: 15 September 2023

Signature: Melinda What