UK Template

COMPANY NAME:
YEAR:
COUNTRY:
DATE OF SUBMISSION TO CENTRAL PLATFORM: [insert date]

DISCLOSURE OF PAYMENTS TO HEALTHCARE PROFESSIONALS (HCPs), OTHER RELEVANT DECISION MAKERS (ORDMs) AND HEALTHCARE ORGANISATIONS (HCOs)
Article 2 - Section 2.03 & Schedule 2 & Clause 24

Date of publication: ……

		Full Name *(Art. 1.01 & Clause 24)*						HCPs/ORDMs: City of Principal Practice HCOs: city where registered *(Art. 3 & Clause 24)*	Country of Principal Practice *(Schedule 1 & Clause 24)*	Principal Practice Address *(Art. 3 & Clause 24)*						Unique country local identifier OPTIONAL *(Art. 3 & Clause 24)*	Joint Working *(Clause 20)*	Donations and Grants to HCOs (Art. 3.01.1.a & Clause 24) and Benefits in Kind to HCOs (Clause 24)	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 *(Clause X)*	Blank Column *(Clause X)*	TOTAL
		Title	First Name	Initial	Last Name	Speciality	Role	HCPs/ORDMs: City of Principal Practice HCOs: city where registered	Country of Principal Practice	Institution Name	Location	Address Line 1	Address Line 2	Post Code	Email	Local Register ID or Third Party Database ID			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				
INDIVIDUAL	HCPs and ORDMs	***INDIVIDUAL NAMED DISCLOSURE - one line per HCP/ORDM*** *(i.e. all transfers of value during a year for an individual HCP will be summed up: itemization should be available for the individual Recipient or public authorities' consultation only, as appropriate)*																										
		OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons																										
		Aggregate amount attributable to transfers of value to such Recipients - *Art. 3.2, EFPIA Template & Clause 24*															N/A	N/A	N/A	N/A	*0*	*0*	*0*	*0*				0
		Number of Recipients in aggregate disclosure - *Art. 3.2, EFPIA Template & Clause 24*															N/A	N/A	N/A	N/A	*0*	*0*	*0*	*0*				0
		Number of Recipients disclosed in aggregate as a *% of all Recipients (individual & aggregate disclosures)* - *Art. 3.2 & Clause 24*															N/A	N/A	N/A	N/A	0%	0%	0%	0%				0
	HCOs	*(Clause 24)*								Faculty of Medicine, Dentistry and Health (EUHASS)	Sheffield	The University of Sheffield, Firth Court, Western	Sheffield	S10 2TN			*0*	*Link to executive summary (G)*	*0*	*5500*	*0*	*0*	*0*	*0*				5500
		OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons *Clause 1.9 supplementary information*																										
		Aggregate amount attributable to transfers of value to such Recipients - *Art. 3.2, EFPIA Template & Clause 24.9*															N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				0
		Number of Recipients in aggregate disclosure - *Art. 3.2, EFPIA Template & Clause 24.9*															N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				0
		Number of Recipients disclosed in aggregate as a *% of all Recipients (individual & aggregate disclosures)* - *Art. 3.2 & Clause 24.9*															N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A				0
AGGREGATE	Research and Development	***AGGREGATE DISCLOSURE (Clause X)***																										
		Transfers of Value re: Research & Development as defined (Art 3.04 & Clause 23.2)																							*0*			0