



### Declaration on compliance with the ENCePP Code of Conduct for ENCePP Studies<sup>1</sup>

The (primary) lead investigator and a person authorised to sign on behalf of the coordinating study entity hereby declare for the purpose of conducting the study <include here study name and identifier/reg.no.>

LEADS STUDY (RESPIRATORY DRUGS SURVEY)

- to follow the rules and principles for the independent and transparent conduct of pharmacoepidemiological and pharmacovigilance studies of the current version of the ENCePP Code of Conduct<sup>2</sup>;
- to inform the ENCePP Secretariat, without delay, of any change or decision to change that constitutes a deviation from the provisions of this Code.

It is of note that the (primary) lead investigator and the person authorised to sign on behalf of the coordinating study entity may be identical.

Name of (primary) lead investigator:	ETTORE NAPOLEONE
Date: <input type="text" value="5/2/16"/> (dd/mm/yyyy)	
Stamp (if applicable) and signature:	<i>Ettore Napoleone</i>
Name of the coordinating study entity:	FP-MCRN
Address:	VIA G. MAZZINI 34/A 86100 CAMPOBASSO - ITALY
Name of person authorised to sign on behalf of the coordinating study entity [if different from (primary) lead investigator]:	
Date: <input type="text" value="5/2/2016"/> (dd/mm/yyyy)	
Stamp (if applicable) and signature:	<i>Ettore Napoleone</i>

The (primary) lead investigator should also complete, sign and date the Checklist of the ENCePP Code of Conduct for ENCePP Studies.

Electronic signatures or photocopies of the completed declaration and checklist will not be accepted.

<sup>1</sup> Complete the declaration on screen, then print, stamp (if applicable) and sign.  
<sup>2</sup> Adopted Code and any revision thereof at the time of signature of the declaration.

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