

INTRODUCTION

This document includes your personal details and your declaration of interests to be made public in line with the provisions of the ENCePP Code of Conduct. All parts must be duly completed. Your declaration will not be accepted if any fields are left empty. You are responsible for the accuracy and completeness of the submitted information.

The form is designed to be filled in electronically and to be transmitted to the ENCePP Secretariat by email; in parallel, a copy of the form should be uploaded to the <u>EU PAS Register</u>.

First Name:	Antje	
Last Name:	Timmer	
Organisation / Research Centre :	University of Oldenburg, Division of Epic	demiology and Biometry
Country:	Germany	
Contact e-mail Address:	antje.timmer@uni-oldenburg.de	
	IV IRON PASS	
Study Reference Number:	EUPAS 2 0 7 2 0	
Are you the (Primary) Lead	Investigator of the above study?	No 🖌 Yes 🗌
Are you an investigator/res	earcher contributing to the above study	No 🗌 Yes 🖌

In this section you must declare any interests in the pharmaceutical industry that you currently have or had within the past 3 years. If you have interests to declare please tick 'Yes' to the relevant questions. All questions in this part must be answered.

2.1 Employment

No 🕑 Yes 🔘

Employment in a pharmaceutical company during past 3 years of study application?

Pharmaceutical company includes supply or service companies which contribute to research, development, production and maintenance of a medicinal product. Employment relates to salaries currently being directly paid to you by a pharmaceutical company.

2.2 Financial Interest

Financial interests in the capital of a pharmaceutical company?

Financial interests relate to current holding of shares of a pharmaceutical company with the exclusion of independently managed investment funds/pensions schemes that are not exclusively based on the pharmaceutical sector.

No

No 🕢

No 🕢

No

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Yes 🔘

Yes 🔘

Yes ()

Yes 🔘

2.3 Patent

Patent for a medicinal product?

Relates to a patent for a medicinal product currently owned by either you as individual or your organisation/ research centre, and you as individual are the beneficiary.

2.4 Consultancy

Consultancy for a pharmaceutical company during the past 3 years of study application?

Consultancy refers to provision of advice or services to a pharmaceutical company excluding the concerned study and including but not limited to reviewing activities, data monitoring, statistical analysis, end point committees, regardless of contractual arrangements or any form of remuneration such as consulting fees or honoraria. Note that conference/seminar attendance is not considered a consultancy but should be indicated if subject to fee or honorarium.

2.5 Strategic Advisory Role

Strategic Advisory role on activities of a pharmaceutical company during the past 3 years of study application?

Participation with the right to vote on/influence the output in a (scientific) advisory board/steering committee with the role of providing advice/expressing opinions on the future strategy, direction or development activities of a pharmaceutical company either in terms of general or product-related strategy, regardless of contractual arrangements or any form of remuneration.

2.6 Grant / Funding

No 🔵 Yes 🕑

Grant/funding from a pharmaceutical company other than funds contemplated in the concerned study contract?

Refers to a grant or funding from a pharmaceutical company which is currently being received by your research group, irrespective of whether you are employed or a volunteer, and you receive no personal gain.

Please specify the pharmaceutical company:

Name of Pharmaceutical Company	Comments	
Servier	via RTI - Agomelatine Study	

No 🕢

Yes ()

SECTION 3: ANY OTHER INTERESTS

In this section you should declare any other interests to be made known to the public.

Any other relationships/conditions/circumstances that present a potential conflict of interest, including matters relating to members of your family?

Further to the interests declared above, I do hereby declare on my honour that I do not have any further interests or facts that should be made public in relation to the conduct of the study.

Should there be any change of the above due to the fact that I acquire additional interests, I shall promptly notify the ENCePP Secretariat and complete a new Declaration of Interests detailing the changes.

✓ I confirm the information declared on this form is accurate to the best of my knowledge and I consent to my information being stored electronically and published on the <u>EU PAS Register</u>.

FULL NAME:	Antje Timmer	Date:	16/04/2018
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First Name:	Rainer
Last Name:	Röhrig
Organisation / Research Centre :	Carl von Ossietzky Universität Oldenburg Department of Health Services Research Medical Informatics
Country:	Germany
Contact e-mail Address:	rainer.roehrig@uol.de
	IV IRON PASS
Study Reference Number: E	UPAS 2 0 7 2 0
Are you the (Primary) Lead	Investigator of the above study? No 🖌 Yes
Are you an investigator/res	earcher contributing to the above study No \square Yes \checkmark

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2.1 Employment

No 🕐 Yes ()

Yes 🕢

Employment in a pharmaceutical company during past 3 years of study application?

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No

2.2 Financial Interest

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Financial interests relate to current holding of shares of a pharmaceutical company with the exclusion of independently managed investment funds/pensions schemes that are not exclusively based on the pharmaceutical sector. Please specify type of shares and financial interest (excluding investment funds) of:

Share Value (please select)	Type of shares or financial interest	
Less than 10,000 EUR or equivalent	Mixed equity fund without influence on the composition of the fund	
2.3 Patent	No 🕢 Yes 🔿	

2.3 Patent

Patent for a medicinal product?

Relates to a patent for a medicinal product currently owned by either you as individual or your organisation/ research centre, and you as individual are the beneficiary.

2.4 Consultancy

Yes 🔘 No 🕐

Yes ()

Consultancy for a pharmaceutical company during the past 3 years of study application?

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> No

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No Yes O

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FULL NAME:	Rainer Röhrig	Date:	16/04/2018



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First Name:	Dominik	
Last Name:	de Sordi	
Organisation / Research Centre :	University of Oldenburg, Division of Epic	demiology and Biometry
Country:	Germany	
Contact e-mail Address:	domninik.de.sordi@uni-oldenburg.de	
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Study Reference Number:		
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Are you an investigator/res	earcher contributing to the above study	No 🗌 Yes 🖌

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No 🕢 Yes 🔵

No 🕢

No 🕢

No 🕢

Yes 🔘

Yes 🔘

Yes ()

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No 🕢

Yes 〇

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FULL NAME: Dominik de Sordi Date: 05/09/2017



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First Name:	Christoph
Last Name:	Normann
Organisation / Research Centre :	University of Oldenburg, Division Medical Informatics
Country:	Germany
Contact e-mail Address:	christoph.normann@uni-oldenburg.de
	IV Iron PASS
Study Reference Number: E	EUPAS 2 0 7 2 0
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Are you an investigator/res	earcher contributing to the above study No \square Yes \checkmark

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FULL NAME: Ch

ristoph Normann

Date: 06/09/2017

No 🕢 Yes 🔘



No 🕢 Yes 🔿

 (\checkmark)

Yes 🔘

No 🕢 Yes 🔿

No 🕢 Yes 🔿

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First Name:	Sanny	
Last Name:	Kappen	
Organisation / Research Centre :	Carl von Ossietzky University Oldenburg Services Research, Division of Epidemio	
Country:	Germany	
Contact e-mail Address:	sanny.kappen@uni-oldenburg.de	
	Intravenous Iron Postauthorisation Safe Severe Hypersensitivity Reactions	ety Study (PASS): Evaluation of the Risk of
Study Reference Number:	EUPAS 2 0 7 2 0	
Are you the (Primary) Lead	Investigator of the above study?	No 🖌 Yes 🗌
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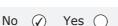
Date:

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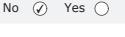
FULL NAME:	Sanny Kappen
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No 🕢 Yes 🔿

01/08/2017



Yes



No 🕢 Yes 🔿

Yes 🔘