

EUROPEAN UNION OF MEDICAL SPECIALISTS (UEMS)

EUROPEAN ACCREDITATION COUNCIL ON CME (EACCME®)

Rue de l'Industrie 24, BE- 1040 BRUSSELS T + 32 2 649 51 64 - F + 32 2 640 37 30

https://eaccme.uems.eu - accreditation@uems.eu

Conflict of Interest Disclosure Form

(to be completed by scientific/organising committee members)

NAME: Valérie Vilgrain

AFFILIATION: Hospital Beaujon

In accordance with criterion 14 of document UEMS 2016/20 "EACCME® criteria for the Accreditation of Live Educational Events (LEEs)", 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 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:

Professeur Valérie VILGRAIN
Chef de Service d'Imagerie Médicale
Hôpital BEAUJON

100 bd G^a Leclerc - 92118 CLICHY Cedex

docine Spácialistos

Date: 18/2024

UEMS_{aisbl} – Union Européenne des Médecins Spécialistes IBAN BE28 0001 3283 3820 | BIC (SWIFT) BPOTBEB1 | VATn° BE 0469.067.848

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(to be completed by scientific/organising committee members)

NAME: Marie-Pierre Revel

AFFILIATION: Université Paris Descartes, Service de Radiologie A - Hôpital Cochin

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DISCLOSURE

☐ I have no potential conflict of interest to report 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: $C \zeta$ (behrng - Bracco
Participation in a company sponsored speaker's bu	V
Stock shareholder:	
Spouse/partner:	
Other support (please specify): AI Solu Peep Health, GHANEK	
Signature:	Date: Nev 28, 2024

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(to be completed by scientific/organising committee members)

NAME: Christian Loewe

Signature:

AFFILIATION: Medical University of Vienna

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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:	speaker for Siemens Healthineers, Bracco
Stock shareholder:	
Spouse/partner:	
Other support (please specify):	

Date:

28/11/2024

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(to be completed by scientific/organising committee members)

NAME: Boris Brkljačić

AFFILIATION: University Hospital Dubrava

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Spouse/partner:

Other support (please specify):

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Date:

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(to be completed by scientific/organising committee members)

NAME: Koenraad Verstraete

AFFILIATION: Ghent University Hospital

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Stock shareholder:

Spouse/partner:

Signature:

Other support (please specify):

Prof. dr. K. Verstraete

Radiologie UGent- UZ-Gent

ate: /

Ghent, Belgium 28/11/2024



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(to be completed by scientific/organising committee members)

NAME: Vicky Goh

AFFILIATION: St Thomas' Hospital, King's College London

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SIEMENS HEALTHINEER S

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