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 26)*	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)*		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		Blank Column *(Clause X)*	Blank Column *(Clause X)*	
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)*																											
		Doc.RNDr.MUDr. PhD.	Pavel		Jelina	Division for Genetics and Metabolic Diseases Department		Prague	Czech Republic	Vseobecni Fakultni Nemocnice (KDOL VFN)		Ke Karlovu 455/2		128 08	pavel.jesina@vfn.cz		N/A	N/A	N/A	N/A		0	*300 EUR*	0				0
		[HCP2]															N/A	N/A	N/A	N/A	*Yearly amount*	*Yearly amount*	*Yearly amount*	*Yearly amount*				(J)
		[HCP3]															N/A	N/A	N/A	N/A	*Yearly amount*	*Yearly amount*	*Yearly amount*	*Yearly amount*				(J)
		[ORDM1]															N/A	N/A	N/A	N/A	*Yearly amount*	*Yearly amount*	*Yearly amount*	*Yearly amount*				(J)
		[ORDM2]															N/A	N/A	N/A	N/A	*Yearly amount*	*Yearly amount*	*Yearly amount*	*Yearly amount*				(J)
		[ORDM3]															N/A	N/A	N/A	N/A	*Yearly amount*	*Yearly amount*	*Yearly amount*	*Yearly amount*				(J)
		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	*Aggregate amount (A)*	*Aggregate amount (B)*	*Aggregate amount (C)*	*Aggregate amount (D)*				(E)
		Number of Recipients in aggregate disclosure *- Art. 3.2, EFPIA Template & Clause 24*															N/A	N/A	N/A	N/A	*Number of HCPs/ORDMs (A)*	*Number of HCPs/ORDMs (B)*	*Number of HCPs/ORDMs (C)*	*Number of HCPs/ORDMs (D)*				(F)
		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	% (A)	% (B)	% (C)	% (D)				
	HCOs	*(Clause 24)*																						*Payment Amount*	*Payment Amount*				(K)
																													(K)
																													(K)
		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				N/A
		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				N/A
		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				N/A
AGGREGATE	Research and Development	*AGGREGATE DISCLOSURE (Clause X)*																											
		Transfers of Value re: Research & Development as defined (Art 3.04 & Clause 23.2)																							*TOTAL AMOUNT*				N/A

NOTE 1: 'Art.' refers to the relevant Article of the 2014 EFPIA Code on Disclosure of Transfers of Value from Pharmaceutical Companies to Healthcare Professionals and Healthcare Organisations

NOTE 2: 'Clause' refers to the relevant Clause of the 2019 AIPI Code of Practice for the Pharmaceutical Industry.

NOTE 3: Unique ID would be a database identifier either Binleys or OneKey. This can be left blank.

NOTE 4: Payments to health professionals (HCPs) as defined in Clause 1.4, healthcare organisations (HCOs) as defined in Clause 1.9 and the relevant decision makers (ORDMs) as defined in Clause 1.5, has to be disclosed.

NOTE A: Data relates to the column heading ie registration fees

NOTE B: Data relates to the column heading ie travel and accommodation

NOTE C: Data relates to column heading ie fees for service

NOTE D: Data relates to the column heading ie related expenses agreed in the fee for service or consultancy contract

NOTE E: Total amount disclosed as aggregate

NOTE F: Total number of individuals disclosing in aggregate. WARNING: this is not necessarily a sum of columns V,W,X and Y as individuals might appear in more than one category i.e. receive fees and expenses.

NOTE G: The link can be included here and/or in the methodological note

NOTE H: The methodological note must make clear the number of individuals who have agreed to some payments being disclosed individually and some in aggregate

NOTE I: Total amount for that individual

NOTE K: Total amount for that HCO across all activities except R&D

	required
	optional
	to facilitate the process but not to be published on database