



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

- I have no potential conflict of interest to report
- I 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:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Spouse/partner:

Other support (please specify):

Signature:

W. Vilgrain
Pr Valérie VILGRAIN
Chef de Service de Radiologie
Hôpital BEAUJON
92118 CLICHY CEDEX
France

Date:

April 4, 2024

Conflict of Interest Disclosure Form

(to be completed by Scientific/Organizing Committee Members)

NAME: Boris Brkljačić

AFFILIATION: University Hospital Dubrava

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbusement of expenses in relation to the LEE has been provided.

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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:

Other support (please specify):

Signature:



Date:

Jan 26, 2024

Conflict of Interest Disclosure Form

(to be completed by Scientific/Organizing Committee Members)

NAME: Christian Løewe

AFFILIATION: Medical University of Vienna

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursment of expenses in relation to the LEE has been provided.

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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; GE Healthcare,

Stock shareholder:

Other support (please specify):

Signature:



Date:

26/11/2024

Conflict of Interest Disclosure Form

(to be completed by Scientific/Organizing Committee Members)

NAME: Vicky Goh

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

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Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports:

SIGMAUS HEALTHINEERS

Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau:

Stock shareholder:

Other support (please specify):

Signature:



Date:

25/1/2024

Conflict of Interest Disclosure Form

(to be completed by Scientific/Organizing Committee Members)

NAME: Koenraad Verstraete

AFFILIATION: Ghent University Hospital; UZG / MR / -1K12

In accordance with criterion 13 of document UEMS 2023/07 "EACCME® Criteria for the Accreditation of Live Educational Events (LEEs)", all declarations of perceived or actual conflicts of interest for the last 3 years, whether due to a financial or other relationship, must be provided to the EACCME® upon submission of the application. COI declarations signed more than 6 months before the date of the event will not be accepted. Declarations must be made available online on the event website of the LEE. Declarations must include whether any fee, honorarium or arrangement for re-imbursment of expenses in relation to the LEE has been provided.

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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:

Other support (please specify):

Signature:



Date:

25/JAN/24

Conflict of Interest Disclosure Form

(to be completed by Scientific/Organizing Committee Members)

NAME: Marie-Pierre Revel

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

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Type of affiliation / financial interest

Name of commercial company

Receipt of grants/research supports: From Curie Institute, French Ministry of Health and Europe

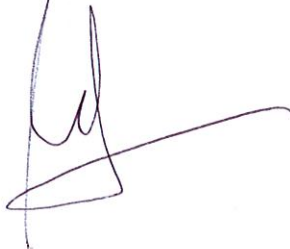
Receipt of honoraria or consultation fees:

Participation in a company sponsored speaker's bureau: —

Stock shareholder: —

Other support (please specify): lecture fee from Bracco

Signature:



Date:

February 1st, 2024