



Conflict of Interest Disclosure Form

ESVM Conflict of Interest Disclosure Policy

The European Society for Vascular Medicine (ESVM) wishes to promote independence, objectivity, scientific rigor and a fair balance of representation, in all its activities.

The ESVM have adopted a Conflict of Interest (COI) Disclosure Policy for the purpose of providing guidance and avoiding conflicts of interest within the Society.

In order to ensure this, individuals participating in the organization of activities on behalf of the Society are expected to disclose their financial or in-kind relationships both with health industry that develop, manufacture, distribute or sell health care materials or services, or other organizations that could represent a potential COI. Such relationships exclude personal or family medical care. Full disclosure is expected even when it is not clear whether a relationship or affiliation constitutes a conflicting interest.

ESVM recognizes that these relationships do not necessarily imply bias or decrease the value of participation in professional activities.

Disclosure of these relationships is necessary for others to make an informed decision about the impact of the disclosed relationship. For instance, this may be relevant in the context of educational activities of the ESVM.

Those requested to complete the form below include: all ESVM Officers and members of the Society's Committees, members of ESVM Consensus Position Paper expert panels, and ESVM Congress/Course Organizers. The forms will be updated annually. The completed forms will be archived at the Society's Administrative Offices and made publically available on the Society's website. Course and Congress Faculty will be required to present a slide summarizing any COI disclosures before their presentation.

Please disclose all relationships over the previous three calendar years (2016-2018). If you do not have any conflicts of interest to disclose please check the appropriate box, page 3.

Nature of relationship or affiliation	Company Name	Company Name	Company Name
1. Equity interest Equity interest (or entitlement to same) of stocks, stock options, royalties, etc., including income from patents or copyrights	NONE		
2. Director or employee Service as director or employment by a commercial organisation whether or not remuneration is provided for such service	NONE		
3. Owner enterprise Sole ownership, partnership or principal of a commercial enterprise	NONE		
4. Ownership of patent(s)	NONE		



Nature of relationship or affiliation	Company Name	Company Name	Company Name
5. Royalties Receipt of royalties, including for intellectual property, such as a device or a diagnostic tool	NONE		
6. Company consultant Consultant to company including positions on medical or scientific advisory boards	Bayer advisory Board	Amgen advisory Board	Rexgenero, advisor and eligibility Consultant for trial
7. Company speaker honorarium Honoraria for speaking at company sponsored meeting or events	Bayer speaker and Chair	Amgen speaker and workshop lead	
8. Trial participation Participation in clinical trials	Bayer Xatoa	Rexgenero CLI and stem cells	
9. Fellowship, travel grants Support in the form of fellowships, travel grants, gifts, in-kind donations, etc.	NONE		
10. Research grants Research grants, partial or full salary support from a commercial organisation for self or employees for who you are managerially responsible (i.e. laboratory, technical/research fellow for whom you are managerially responsible)	Bayer Xatoa	Rexgenero CLI and Stem cells	
11. Publications Manuscripts have been published in collaboration with non-academic co-author of the following scientific articles	NONE		
12. Other – please indicate Any other type of financial or other relationship	Company	Conflict Type	
	NONE		



**European Society
for Vascular Medicine**

European Society for Vascular Medicine

Executive Officer:

Mrs Sonia Ruggeri – L.go Enrico Enriquez, 1 –
00167 Rome - Italy

Email: adm@vascular-medicine.org

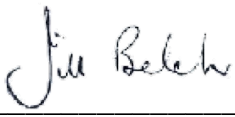
Website: www.vascular-medicine.org

I do not have any existing or known future financial relationships or commercial affiliations to disclose.

Declaration

I have answered fully and to the best of my ability and will update this form promptly if my circumstances change

Print and sign

Signature 

Name printed clearly JILL BELCH

Date 25/03/2019