



Agencija za
kvalitetu i
akreditaciju
u zdravstvu

Agency for Quality and Accreditation in Health Care

Department for Development, Research and Health Technology Assessment

Form for disclosure of potential conflict of interest in Health Technology Assessment (HTA) process

HTA project name and number:

CONFLICT OF INTEREST STATEMENT

All individuals working in the whole or in part of HTA process; on HTA assessment and HTA reports, as well as other HTA documents, Advisory or Appraisal Committee (all Agency staff, consultants, contractors, collaborators, committee members, ad hoc groups, authors and reviewers of Agency for Quality and Accreditation in Health Care, Department for Development, Research and Health Technology Assessment) are required to declare an interest that might be a conflict, or be perceived as conflict of interest.

Please indicate whether you have current or have had, within the past three years, any of the following affiliations with companies that manufacture health technology (products) which are *Specific* (for product under current evaluation) and *Non-specific* (for other product, unrelated to the matter under consideration):

Type of interest*	Yes	No
1 Personal financial <i>specific</i>		
2 Personal financial <i>non-specific</i>		
3 Personal family <i>specific</i>		
4 Personal family <i>non-specific</i>		
5 Non-personal financial <i>specific</i>		
6 Non-personal financial <i>non-specific</i>		
7 Personal non-financial <i>specific</i>		

***Description of Conflict of Interest type:** Conflicts of interest (current or within the past three years, mentioned below), *Specific* - for product under current evaluation and/or *Non-specific* – for other products, unrelated to the matter under consideration, are considered to be:

Personal financial interest (1 and 2): a current or within the past three years, personal payment from manufacturer or owner or industry or sector of products; any consultancy, directorship, position in or work for healthcare industry that attracts regular or occasional payments in cash or in kind; any free-paid work commissioned by a healthcare industry for which the individual is paid in cash or in kind; any shareholdings, or other beneficial interest, in shares of a healthcare industry that are either held by the individual or for which the individual has legal responsibility; expenses and hospitality provided by a healthcare industry company including that required for accommodation, meals and travel to attend meetings and conference; funds which include investments in the healthcare industry that are held in a portfolio over which individuals have the ability to instruct the fund manager as to the composition of the fund.

No interests exist in the case of accrued pension rights from earlier employment in the healthcare industry.

Personal family interest (3 and 4): Same as personal financial interest but apply on family members.

Non-personal financial interest (5 and 6): current or within the past three years, payments or other benefit that benefits a department or organization for which an individual has managerial responsibility, but which is not received personally; the holding of a fellowship endowed by the healthcare industry; any payment or other support by the health industry that does not convey any financial or material benefit to an individual personally but might benefit him or her like a grant from a company for the running of a unit or department for which a member is responsible, a grant or fellowship or other payment to sponsor a post or member of staff in the unit for which a member is responsible; the commissioning of research or other work by or advice from, staff who work in a unit for which the member is responsible.

Personal non-financial (7) interest in a topic under consideration might include, but is not limited to; a clear opinion, reached as the conclusion of a research project, about the clinical and/or cost effectiveness of an intervention under review; a public statement in which an individual covered by this Code has expressed a clear opinion about the matter under consideration, which could reasonably be interpreted as prejudicial to an objective interpretation of the evidence; holding office in a professional organization or advocacy group with direct interest in the matter under consideration, other reputation risk in relation to an intervention under review.

If yes to any of the above, please describe below, including approximate amount of compensation (the amount of compensation will be confidential):

Date

Name and Signature