COMPANY NAME: YEAR: COUNTRY: DATE OF SUBMISSION TO CENTRAL PLATFORM: [insert date] METHODOLOGICAL NOTE (H) (Clause 28.6): [insert link here]

									DICCI OCUPE O	S DAVIAGNITO	TO U.S.A. TU.S.A.D.S. D.D.O.	TECHONIALS (MOD.)	OTHER RELEVANT			28.6): [insert link h									
DISCLOSURE OF PAYMENTS TO HEALTHCARE PROFESSIONALS (HCPs), OTHER RELEVANT DECISION MAKERS (ORDMs) AND HEALTHCARE ORGANISATIONS (HCOs) 2021 ABPI CODE OF PRACTICE (Clause 28)									Date of publication:																
	Full Name				HCPs/ORDMs: City of Principal Practice HCOs: city where registered	Country of Principal Practice	Principal Practice Address (Clause 28)			Unique country local identifier OPTICNAL (Note 3) (Clause 28)	Collaborative Working	Donations and	Contribution to costs of Events (Cla uses 10 & 28)			Contracted Services (Clauses 24 & 28)			Blank Column <i>(Clause X)</i>						
	(Clause 28)			(Clause 28)	(Clause 28)						(which includes Joint Working) (Clauses 20 & 28)	Grants to HCOs (Clauses 23 & 28)		h Registration Fees	Travel & Accommodation	Fees	Expenses		Blank Column (Clause X) 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 Cod	<u>e</u> Email	Local Register ID or Third Party Database ID											
nd As									IN	NDIVIDUAL NAME	ED DISCLOSURE - one line	oer HCP/ORDM (i.e. a		iring a year for an individ		ed up: itemization shou disclosed on an individ		e individual Recipient or public autl	norities' consultation only, as app	ropriate)					
JCPs a	Aggregate amoun	t attributable to t	transfers of value	to such Recipient	s - Template & Clau	use 28							OTTEN, NOT INC	EUDED ABOVE - WHERE II	N/A	N/A	N/A	N/A	Aggregate amount (A)			Aggregate amount (D)			0
	Number of Recipi	ents in aggregate ents disclosed in a	aggregate as a %	plate & Clause 28 of all Recipients (i	ndividual & aggrego	ate disclosures) -	Clause 28								N/A N/A	N/A N/A	N/A N/A	N/A N/A	Number of HCPs/ORDMs (A % (A)	Number of HCPs/ORDMs (B) % (B)	Number of HCPs/ORDMs (C) % (C)	Number of HCPs/ORDMs (D) % (D)			0
	(Clause 28)							British and Irish Porphyria Network (BIPNET)	undee U	Photobiology Jnit, Level 8, Jinewells Jospital	DD1 95Y	vicky.mcguire@po rphyria.org.uk	2			2,000								2,000	
HCOs	National Xeroderma Pigmentosum Service Service National S.t. John's Institute of Dermatology SE1 7EH St. Thomas' St. Thomas' Service								Robert_Sarkany@ stt.nhs.uk	100			1,000								1,000				
												OTHER, NOT II	ICLUDED ABOVE - wh	ere information cannot b											
	Number of Recipi	ents in aggregate	disclosure - Ter	nplate & Clause 28	s - Template & Cla .5										N/A N/A	N/A N/A	N/A N/A	N/A N/A	N/A N/A	N/A N/A	N/A N/A	N/A N/A			N/A N/A
	Number of Recipi	ents disclosed in a	aggregate as a %	of all Recipients (i	ndividual & aggrego	ate disclosures) -	Clause 28.5								N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A			N/A
ant															AGGREGATE DISCLO	DSURE									
Transfers of Value re: Research & Development as defined Clause 1.20 41,880.62							N/A																		

	2021 ABPI Code Disclosure Template (updated May 2021)
Drockets b	olou donist those which appear on the surroudshoot including format
NOTE 2:	elow depict those which appear on the spreadsheet including format 'Clause' refers to the relevant Clause of the 2021 ABPI Code of Practice for the Pharmaceutical Industry
NOTE 3:	Unique ID would be an identifier from either Wilmington Healthcare or OneKey otherwise this should be left
(NOTE 3)	blank
NOTE 4:	Payments to health professionals (HCPs) as defined in Clause 1.9, healthcare organisations (HCOs) as defined
NOTE 4:	in Clause 1.8 and other relevant decision makers (ORDMs) as defined in Clause 1.13, heat to be disclosed
	in clause 110 and other relevant accision makers (one ins) as defined in clause 1115, has to be disclosed
NOTE A: (A)	Data relates to the column heading ie registration fees
NOTE B: (B)	Data relates to the column heading ie travel and accommodation
NOTE C: (C)	Data relates to column heading ie contracted services
NOTE D: (D)	Data relates to the column heading ie related expenses agreed in the contracted services contract or agreement
NOTE E: (E)	Total £ disclosed as aggregate
NOTE F: (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.
	The methodological note must make clear the number of individuals who have agreed to some payments
	being disclosed individually and some in aggregate
NOTE G: (G)	The link can be included here and/or in the methodological note
NOTE H: (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 J: (J)	Total £ for that individual
NOTE K: (K)	Total £ for that HCO across all activities except R&D
NOTE L: (L)	Total percentage of individuals disclosing in aggregate
NOTE M:	Sponsorship to a healthcare organisation or a third party organisation appointed by a healthcare organisation
(M)	which is not related to events/meetings and which cannot be disclosed elsewhere on the template (i.e. is not
	considered to be a donation or grant or contracted service or related to collaborative working) should be
	included in this column and an explanation given in the methodological note

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