

## **EFPIA report**

**Reporting Year : 2019**

**Reporting Currency : EUR**

EFPIA REPORT							Date of Publication : 26/03/2020 V1.0					
H C P	Full Name	HCPs: City of Principal Practice	Country of Principal Practice	Principal Practice Address	Unique Country Identifier	Donations and Grants to HCOs	Contribution to costs of Events			Fee for service and consultancy		Total
							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, including travel & accommodation relevant to the contract	
<b>INDIVIDUAL NAMED DISCLOSURE - one line per HCP (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)</b>												
	Dr Kamal Abou Hamdan	LUXEMBOURG	LU	Centre Hospitalier de Luxembourg	900111-48	N/A	N/A	0.00	0.00	500.00	0.00	500.00
	Dr Marc Schlessler	LUXEMBOURG	LU	Centre Hospitalier de Luxembourg	907151-07	N/A	N/A	0.00	0.00	600.00	0.00	600.00
<b>OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons</b>												
<b>Aggregate amount attributable to transfers of value to such Recipients</b>						N/A	N/A	0.00	0.00	0.00	0.00	0.00
<b>Number of Recipients in aggregate disclosure</b>						N/A	N/A	0	0	0	0	N/A
<b>% number of Recipients in the aggregate disclosure in the total number of Recipients Disclosed</b>						N/A	N/A	0.00	0.00	0.00	0.00	N/A

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HCO	Full Name	HCOs: City where registered	Country of Principal Practice	Principal Practice Address	Unique Country Identifier	Donations and Grants to HCOs	Contribution to costs of Events			Fee for service and consultancy		Total
							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, including travel & accommodation relevant to the contract	
<b>INDIVIDUAL NAMED DISCLOSURE - one line per HCO (i.e. all transfers of value during a year for an individual HCO will be summed up; Itemization should be available for the individual Recipient or public authorities' consultation only, as appropriate)</b>												
	Association Luxembourgeoise pour la Formation Médicale Continue	LUXEMBOURG	LU	Rue de Vianden 29	N/A	0.00	5,000.00	0.00	0.00	0.00	0.00	5,000.00
	Luxembourg Institute of Health	LUXEMBOURG	LU	Rue Val Fleuri 84	N/A	24,000.00	0.00	0.00	0.00	0.00	0.00	24,000.00
	Société Luxembourgeoise de Pédiatrie	LUXEMBOURG	LU	rue barblé L, 4	N/A	0.00	1,700.00	0.00	0.00	0.00	0.00	1,700.00
<b>OTHER, NOT INCLUDED ABOVE - where information cannot be disclosed on an individual basis for legal reasons</b>												
	Aggregate amount attributable to transfers of value to such Recipients					0.00	0.00	0.00	0.00	0.00	0.00	0.00
<b>Number of Recipients in aggregate disclosure</b>												
						0	0	0	0	0	0	N/A
<b>% number of Recipients in the aggregate disclosure in the total number of Recipients Disclosed</b>												
						0.00	0.00	0.00	0.00	0.00	0.00	N/A
R & D	<b>AGGREGATE DISCLOSURE</b>											<b>Total(R&amp;D)</b>
	Transfers of Value for Research and Development as defined											0.00
<b>GRAND TOTAL</b>												<b>31,800.00</b>