

European Board for Accreditation in Pneumology Annual Declaration of Interest

Please complete all three sections of the form. This form must be returned duly signed even if no declaration of interest is made. The amounts of funds received are to be recorded according to the following table:

(a)	(b)	(c)	(d)
less than 1000 Euro	1-5000 Euro	5-20'000 Euro	more than 20'000 Euro

Please indicated below your personal details:

First name:	Athénaïs
Last name:	Boucly
Institution:	APHP-Hôpital Bicêtre

1. Service to Scientific Societies

I wish to declare to the European Board for Accreditation in Pneumology that my only interests in other Scientific Societies which could potentially conflict with my work for EBAP, are as follows:

Please make sure you list all the committees on which you serve. Thank you.

Member of the following ERS Committees:	
Executive Committee (including Elect posts)	
ERS Standing Committees (please see Bylaws article VII)	
ERS Education Council	
HERMES Task Force, Committee or Working Group(s)	
Long Range Planning Committees	
Council Auditors	
National Delegates	
Editors of ERS publications	
Associate Editors of ERS publications	
Assembly Delegates to Council	
Candidate Vice President	
Candidate ERS Scientific Committee Chair Elect	
Candidate Chair of the Tobacco Control Committee	
Chair of the Lung Science Conference	
Group Chair	
Group Secretary	
Scientific Task Force	
Other (specify): EBAP Management Council	∇

Member of the following Committees from other Scientific Societies:

(Please list all Committees from other Scientific Societies in which you serve)

SPLF: Groupe Interactions cœur poumon

2. Potential conflict of interest with pharmaceutical and medical equipment industries

I wish to declare to the European Board for Accreditation in Pneumology that my only interests in the pharmaceutical and medical equipment industries, and any other interests, which could potentially conflict with my work for EBAP, are as follows:

Personal Interest (over the last 12 months)

Regular Paid Consultancy Work

Company	Area	Amount of funds received (please indicate a-b-c or d according to table on page 2)

Personal Benefits

This section may include fees for lectures or occasional advisory committees from which you benefit personally. Benefits in kind should also be registered.

Company	Purpose of Payment	Amount of funds received (please indicate a-b-c or d according to table on page 2)
Astra Zeneca	lecture	a
United Therapeutics	advisory committee	b
Ferrer	lectures	b
MSD	lectures	b
Janssen	lecture	a
AOP	lectures	b

Personal Travel Grants or expenses for conferences etc.

Travel grants for yourself whether paid directly or indirectly but not travel grants for other members of your Department.

Company	Purpose and Nature of Benefit	Amount of funds received (please indicate a-b-c or d according to table on page 2)

Shares in any Relevant Companies (excluding mutual funds)

Company	Approximate value (please indicate a-b-c or d according to	
Company	Approximate value (please indicate a-p-c or d according to l	
Company	ripproximate value (picase maleate a b e of a according to	

		1	•
		table on page	2)
Non-Personal In	nterests		
	lucation, equipment, salari		a are personally involved and which are nefit in kind and fees for your own work
Company	Nature of Support	t	Amount of funds received (please indicate a- b-c or d according to table on page 2)
For example comm	that may be seen as mercial interest of spous ling pressure groups.	-	offlicts being trustee or member of outside
Company or organisation	n	Nature/Purpose of Support	
3. Tobacco-Indi	ustry related Conflict	s of Interest	s
employees of, paid indirect links to the at any time after 1 industry) for any pr kind, and to include	consultants or advisors to tobacco industry, at any ti .1.2000 from the tobacco roject or programme. By §	o, or those with me after 1.1.200 industry (or in grant is meant a s, consumables,	or have been full or part time an any real or perceived, direct or 00. This includes receiving a grant astitutions funded by the tobacco any support whether in cash or in travel, personnel. EBAP reserves
to/received a gr programme. ⊠ No . I dec	cant from the tobacco inc	dustry at any ti full or part time	employee of, paid consultant or advisor ime after 1.1.2000, for any project or employee of, paid consultant or advisor ime after 1.1.2000, for any project or

I hereby confirm that the above is true and correct.

Signature:

Print name: BOUCLY Athénaïs Date: 17/10/2024

Please return to EBAP

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