

The European Accreditation Council for Continuing Medical Education – EACCME®

Institution of the UEMSaisbl

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Conflict of Interest Disclosure Form

(to be completed by scientific/organising committee members)

NAME :	Priyanka Patel	
AFFILIATION:	Royal Marsden Hospital	
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☐ I have no p	otential conflict of interest to report	
□x I have the	following potential conflict(s) of intere	st to report
Type of affilia	ation / financial interest	Name of commercial company
was part fun	ants/research supports: My research pe ded by prostate cancer Uk charity ar esearch council	
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Signature: P Patel Date: 13/6/2022