(Form No. 3)

**Conflict of Interest Report for Executives, Committee Chairpersons, and**

**Members of the Medical Ethics Committee (Proposal)**

(Calculation period: Apr. 1, 20XX~Mar. 31, 20XX)

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| (Office use only) | Reception No. |
| Reception date: Year Month Day | |

To the Chairman of the Board of Directors of the Japanese Society of Pathology:

Name of the person submitting the report:

Name of the facility concerned (organization, department or clinic):

Name of the executive position:

Committee name at the Society: Member of the Committee

A. Items concerning the reporter himself/herself

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| 1. Have you received any remuneration as an executive or advisor from an enterprise or profit-making organization? If yes, enter the sum received.  (Entry required if the yearly sum received from one enterprise or organization exceeds 1 million yen) | Yes or No (circle the applicable answer)  (If Yes, fill out the content below for each enterprise or organization) |
| Name of the enterprise or organization:  Position (Executive, advisor, etc.):  Amount of remuneration: |
| 2. Do you own any stocks or have you received any earnings from stocks?  (Entry required if the yearly earnings received from one enterprise exceed 1 million yen, or if the stock holdings exceed 5% of the total stock)? | Yes or No (circle the applicable answer)  (If Yes, fill out the content below for each enterprise or organization) |
| Name of the enterprise or organization:  Number of stocks owned:  Stock value at the time of the report (per stock):  Earnings from the stock for the previous year: |
| 3. Have you received any remuneration as royalty fees from an enterprise or profit-making organization? (Entry required if the yearly royalty fees received from one enterprise exceed 1 million yen) | Yes or No (circle the applicable answer)  (If Yes, fill out the content below for each patent) |
| Name of the enterprise or organization:  Patent name:  Royalty fee: |
| 4. Have you received any daily allowance (lecture fees, etc.) as remuneration for the time or effort involved in attending a meeting (presentation) from an enterprise or profit-making organization? If yes, enter the sum received.  (Entry required if the yearly sum of the lecture fees received from one enterprise or organization exceeds 500,000 yen) | Yes or No (circle the applicable answer)  (If Yes, fill out the content below for each enterprise or organization providing the funds) |
| Name of the enterprise or organization:  Lecture fee, etc.: |
| 5. Have you received any manuscript fees as remuneration for writing a pamphlet, etc. from an enterprise or profit-making organization? If yes, enter the sum received.  (Entry required if the yearly sum of the manuscript fees received from one enterprise or organization exceeds 500,000 yen) | Yes or No (circle the applicable answer)  (If Yes, fill out the content below for each enterprise or organization providing the funds) |
| Name of the enterprise or organization:  Manuscript fees: |
| 6. Have you received any research funds for medical research from an enterprise or profit-making organization?  (Entry required if the total yearly sum of the funds fees received for one medical research project exceeds 1 million yen) | Yes or No (circle the applicable answer)  (If Yes, fill out the content below for each medical research project) |
| Name of the enterprise or organization:  Name of the medical research theme:  Research funds received:  Compensation received by the reporter: |

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| 7. Have you received any other remuneration (remuneration not directly related to research, such as travel expenses or presents)?  (Entry required if the yearly sum of the remuneration received from one enterprise or organization exceeds 50,000 yen) | Yes or No (circle the applicable answer)  (If Yes, fill out the content below for each medical research project) |
| Name of the enterprise or organization:  Remuneration content:  Remuneration amount: |

B. Items concerning the reporter's spouse, immediate family members, or persons sharing income/property

Name of the person concerned (and relationship to the reporter)

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| 1. Have you received any remuneration as an executive or advisor from an enterprise or profit-making organization? If yes, enter the sum received.  (Entry required if the yearly sum received from one enterprise or organization exceeds 1 million yen) | Yes or No (circle the applicable answer)  (If Yes, fill out the content below for each enterprise or organization) |
| Name of the enterprise or organization:  Position (Executive, advisor, etc.):  Amount of remuneration: |
| 2. Do you own any stocks or have you received any earnings from stocks?  (Entry required if the yearly earnings received from one enterprise exceed 1 million yen, or if the stock holdings exceed 5% of the total stock)? | Yes or No (circle the applicable answer)  (If Yes, fill out the content below for each enterprise or organization) |
| Name of the enterprise or organization:  Number of stocks owned:  Stock value at the time of the report (per stock):  Earnings from the stock for the previous year: |
| 3. Have you received any remuneration as royalty fees from an enterprise or profit-making organization? (Entry required if the yearly royalty fees received from one enterprise exceed 1 million yen) | Yes or No (circle the applicable answer)  (If Yes, fill out the content below for each patent) |
| Name of the enterprise or organization:  Patent name:  Royalty fee: |

Oath: I hereby swear that my COI situation is exactly as stated above, with no mistakes. There are absolutely no COI situations other than those stated above that could impact or obstruct any duty or function associated with the Japanese Society of Pathology. Furthermore, I hereby agree that the information supplied above may be disclosed to the public in the case where it is required to resolve any social or legal issue.

Report date: Year Month Day

Signature