

Study Title

PAKISTAN KIDNEY AND LIVER INSTITUTE AND RESEARCH CENTER

CONFLICT OF INTEREST DECLARATION FORM

Research at PKLI&RC believes in cutting-edge scholarly activities aligned with internationally recommended ethical practices. To uphold ethical standards, researchers and reviewers, both have to declare 'Conflict of Interest' (COI) before conducting any research at PKLI&RC. The COI declaration will facilitate the IRB/Research Center and Researcher in addressing this issue.

The COI declaration is required at the time of submission of the proposal or when in doubt the researcher may ask the IRB/Research Center to clarify a particular stance in it. The primary Researcher declaration of COI, highlights the pertinence of keeping patient's (participant's) good and welfare above any other secondary motive. The secondary interest may vary from direct to indirect, and financial to non-financial conflicts in the interest.

The COI declaration form is available in the IRB submission portal and at the Research Centre office.

Investigator/Reviewer Disclosure of Financial and Non-Financial Interests

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If YES, please describe: 3. Financial Interests Do you, your spouse, or your dependent children have any proprietary or financial interest in the tested product, such as patents, trademarks, copyrights, licensing agreements, or equity interests? \square NO □ YES If YES, please describe: 4. Sponsorship and Reimbursement Have you, your spouse, your trainee, or your dependent children received any sponsorship for your research or that of your trainees from the research sponsor or any related entity? \square NO YES If YES, please describe: Have you, your spouse, your trainee, or your dependent children received any reimbursement for attending symposia, conferences, or meetings from the research sponsor or any related entity? \square NO YES If YES, please describe: 5. Fees for Speaking Have you, your spouse, your trainee, or your dependent children received any fees for speaking from the research sponsor or any related entity? \sqcap NO □ YES If YES, please describe: 6. Consulting Fees Have you, your spouse, your trainee, or your dependent children received any consulting fees from the research sponsor or any related entity? \sqcap NO YES



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If YES, please describe:
7. Advisory Board Participation
Have you, your spouse, your trainee, or your dependent children participated in any advisory boards for the research sponsor or any related entity?
\square NO \square YES
If YES, please describe:
8. Proprietary or Financial Interest in Tested Product
Have you, your spouse, your trainee, or your dependent children have any proprietary or financial interest in the tested product such as a patent, trademark, copyright, or licensing agreement, equity (ownership interest, including stock options, shares, or other shareholder interest in the research sponsor (or any affiliate or predecessor company where applicable) or in products by any organization/person that may gain or lose financially from the results of your study.
□ NO □ YES
If YES, please describe:
Researcher Signature:
Date of Submission:/