

PUBBLICAZIONE 2023 TRASPARENZA BIO-RAD

I soci devono documentare e rendere pubblici ogni anno attraverso un apposito Modello di Trasparenza che costituisce parte integrante del presente Codice , i trasferimenti di valore effettuati direttamente o indirettamente ai Professionisti del Settore Sanitario, alle Organizzazioni Sanitarie e alle Terze Parti.

	Full Name	HCPs: City of Principal Practice HCOs: City where registered	Country of Principal Practice	Principal Practice Address	Donations	Scholarship	Contribution to costs of Events			Contribution to costs of Training			Costs for the participation in training, educational and promotional events on company's products organised by the Members	Fee for service and consultancy		Transfers of Value Research & Development	Total	
							Sponsorship agreements with HCOs/Third Parties appointed by HCOs to manage an event	Registration Fees	Travel & Accomodation	Sponsorship agreements with HCOs/Third Parties appointed by HCOs to manage an event	Registration Fees	Travel & Accomodation		Fees	Related expenses agreed in the fee for service or consultancy contract, including travel e accommodation relevant to the contract			
HCPs (Healthcare Professionals)	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)																	
					NA	NA	NA*	NA*	NA*								NA	0
					NA	NA	NA*	NA*	NA*								NA	0
					NA	NA	NA*	NA*	NA*								NA	0
					NA	NA	NA*	NA*	NA*								NA	0
					NA	NA	NA*	NA*	NA*								NA	0
					NA	NA	NA*	NA*	NA*								NA	0
					NA	NA	NA*	NA*	NA*								NA	0
					NA	NA	NA*	NA*	NA*								NA	0
					NA	NA	NA*	NA*	NA*								NA	0
	AGGREGATE DISCLOSURE - per HCPs																	
	Aggregate amount attributable to transfers of value to such Recipients					NA	NA	NA*	NA*	NA*				2 350	450	9 538	NA	12 338
	Number of Recipients in aggregate disclosure					NA	NA	NA*	NA*	NA*							NA	22
	% of the number of Recipients included in the aggregate disclosure in the total number of Recipients disclosed					NA	NA	NA*	NA*	NA*							NA	100%
	Healthcare Third Parties	INDIVIDUAL NAMED DISCLOSURE - one line per HCOs (i.e. all transfers of value during a year for an individual HCOs will be summed up: itemization should be available for the individual Recipient or public authorities' consultation only, as appropriate)																
Koeln Parma Exhibitions S.R.L.		Parma	Italy	via Libero Temolo, 4	Only HCO	NA	5 040	850		NA	NA	NA	NA				NA	5 040
Meeting S.r.l.		Udine	Italy	via Villalta, 32	Only HCO	NA	6 000			NA	NA	NA	NA				NA	6 000
MZ Events S.r.l.		Milano	Italy	via Carlo Farini, 81	Only HCO	NA	36 614			NA	NA	NA	NA				NA	36 614
Scuola Medica Ospedaliera		Roma	Italy	Borgo Santo Spirito, 3	Only HCO	NA	7 930			NA	NA	NA	NA				NA	7 930
Selene S.r.l.		Torino	Italy	via Medici, 23	Only HCO	NA	10 396		466	NA	NA	NA	NA				NA	10 396
Sintipro S.r.l. Unipersonale		Milano	Italy	via Desiderio, 21	Only HCO	NA	20 740			23 058	NA	NA	NA				NA	43 798
					Only HCO	NA				NA	NA	NA	NA				NA	0
Healthcare Organizations	AGGREGATE DISCLOSURE																	
	Aggregate amount attributable to transfers of value to such Recipients					Only Third Parties		NA	NA	NA	NA	NA	NA	NA	NA	NA		
	Number of Recipients in aggregate disclosure					Only Third Parties		NA	NA	NA	NA	NA	NA	NA	NA	NA		
	% of the number of Recipients included in the aggregate disclosure in the total number of Recipients disclosed					Only Third Parties		NA	NA	NA	NA	NA	NA	NA	NA	NA		

* In the case of direct support for the formation of HCPs that they exercise in a private context, it will be necessary to publish the data in individual or aggregate form, depending on whether the HCP has given consent