

# DISCLOSURE FORM

Date: 3/2/25

Name: ANAND SRAM

**Professional details:**

**Main occupation and employing organisation:**

Event: 7<sup>th</sup> Forum on Respiratory Tract Infections

Provider organisation: Lena Events and Communication

Date of event: 03/02/2025 – 05/02/2025

**Please declare any interests here relating to the 36 months prior to the event:**

**Commercial**

*The existence of any significant financial activity or other relationship the speaker or programme planner has with manufacturer(s) of any commercial product and/or providers of commercial services used on or produced for patients these include:*

**Research grants**

Astra-Zeneca, Gilead, Pfizer, Vertex (hemocultid)

**Speaker fees**

Astra-Zeneca, Pfizer, Insmed

**Other educational activities**

**Honoraria or consultation fees**

Mundipharma, Astra-Zeneca

**Ownership of stocks or shares, directorships**

**Any other financial relationship**

**Other conflicts of interest such as expert functions in health care and health guidance processes**

*E.g. Board member in a development project, member of health board in the municipality*

Signature:



Date:

3/2/25