# Yale University Open Data Access (YODA) Project Conflict of Interest Disclosure Form for Data Requestors

1. Identifying Information						
Date: 18.4.16						
Name (include degree(s)): <b>Dr. Maximilian Huhn</b> Primary Employer: <b>Department of Psychiatry and Psychotherapy, Klinikum rechts der Isar, Technical University of Munich</b>						
Title of Project: Incidence of death and other SAEs related to second generation antipsychotic or placebo treatment in RCTs - a systematic review and meta-analysis						
Are you the Principal Investigator (PI)? ☐Yes ☒No If not, who is the PI? <b>Prof. Dr. h.c. Stefan Leucht</b>						
2. Financial Support for the Proposed Research						
Place a check in the appropriate box(es) to indicate third party sources from which you or your institution will receive payment or services <i>at any time</i> for any aspect of the proposed research (including but not limited to study design, manuscript preparation, statistical analysis, etc.).						
⊠Government entity	Detail: Grant from german ministry of education and research					
☐Commercial entity	Detail:					
☐Private foundation	Detail:					
☐Academic institution	Detail:					
Other	Detail:					
3. Intellectual Property						
Do you have any patents, whether planned, pending or issued, broadly relevant to the proposed research?    Yes (explain):     No						

## Yale University Open Data Access (YODA) Project Conflict of Interest Disclosure Form for Data Requestors

4. Relevant Financial Activities Outside the Proposed Research

honoraria for lectures					гпидреск
Comments, Detail	Ofher?	Support?	Fees?	Grant? 	Name of Entity
, , ,	age C radio	-noN Isionsni∃	Personal		
h a separate sheet. <b>Definitions</b>	led, attac				Use one line for ead of the terms used
or other relationships evenue paid (or promised to be 36 months prior to this evance to the proposed work. If to do so.	arces of re uring the with rele	teport all sou our behalf du from sources	ensation). F stitution on y e all monies	ant of comp or your in	regardless of amor paid) directly to you
the biomedical arena that could cing, your proposed research.					
stationships to disclose. ationship or affiliation with the .w.	ancial rel	nit a eved (n	nestic partne	nse ot don	
			:səildde	ement that	Check only the stat
£ 8 d <sup>a</sup> c. £ 350, ac			والمراض		TANKEEV F TO SANGE AND EARLY " A"

## Yale University Open Data Access (YODA) Project Conflict of Interest Disclosure Form for Data Requestors

### 5. Relationships Not Covered Above

Are there other relationships or activities that others could perceive to have influenced, or that give the appearance of potentially influencing, the research for which you are submitting this form?
Yes, the following relationships/conditions/circumstances are present ( <i>explain</i> ): No other relationships/conditions/circumstances exist that present a potential conflict of interest
On occasion, the YODA Project may ask for additional information about reported relationships.
6. Signature Attesting to the Above
By signing below, you attest that the information provided above is correct.
Signature:
Print Name: Maximillan Huhn
Please keep a copy of this document for your records.
ang gen, gen og v

#### 7. Definitions

Entity: Government agency, foundation, commercial sponsor, academic institution, etc.

Grant: Monies from an entity, generally, but not always, paid to your organization.

**Personal Fees:** Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speaker bureaus, expert testimony, employment or other affiliations.

**Non-financial support:** Examples include reagents or equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.

**Other:** Anything not covered under the categories of Grant, Personal Fees and Non-financial Support.