POLICY

It is ICNIRP’s aim to provide guidance and recommendations on protection from non-ionizing radiation exposure based on thorough professional evaluation of the published scientific literature. To achieve this goal, ICNIRP relies on the scientific knowledge and judgment of independent experts. For ICNIRP it is imperative to avoid that personal interests of its members affect the independence of ICNIRP’s guidance. In this view, the ICNIRP Commission and Scientific Expert Group (SEG) members are asked to declare any personal interests in relation to the activities of ICNIRP.

The declaration of interests is to be completed at the time of acceptance of nomination for an election, updated after election, annually, and each time a change of personal interest occurs. The declarations of personal interests are requested from all:

- candidates to an ICNIRP position;
- ICNIRP Commission members;
- ICNIRP SEG members.

Upon completion and signature, the declaration is to be sent electronically to Dr Gunde Ziegelberger, ICNIRP Scientific Secretary at g.ziegelberger@icnirp.org.

Declarations of all elected members of ICNIRP and its SEG will be posted on the ICNIRP website. All publications of ICNIRP shall contain an acknowledgement with regard to the online availability of the declaration of personal interests.

The declarations are evaluated by the Commission. If there is any conflict of interest, the Commission decides in accordance with the ICNIRP provisions entailed in the Charter and Statutes (see below), about the action required. The general principle of ICNIRP’s approach is that neither the personal, nor the professional life, of its members should depend on NIR-relevant commercial entities or any other NIR interest groups. It is recognized that scientific expertise implies a wide range of professional and academic experiences and activities, called personal interests, which however do not per se automatically lead to a conflict. The evaluation of personal integrity is very complex and might be difficult to achieve to the satisfaction of all parties. It is the responsibility of the ICNIRP Board and Commission to carefully consider and decide if the declared interests potentially constitute a conflict of interest.

As per the ICNIRP Statutes, “no member of the Commission shall hold a position of employment that in the opinion of the Commission will compromise its scientific independence. (…) When a change occurs in a member’s employment which, in the opinion of the Commission members, may compromise the Commission’s scientific independence, the Commission shall decide whether this member can continue to serve”. The Commission decision shall be taken by a simple majority vote, either by a formal letter ballot, at a special Commission meeting called for that purpose, or at its Annual General Meeting (ICNIRP Statutes, §6(2)).

Where an elected member’s declaration of interest has been evaluated and ICNIRP has concluded that it does not represent a conflict of interest, the reasons for ICNIRP’s determination are provided below.
<table>
<thead>
<tr>
<th>LAST NAME, First name: Cestari, Tania</th>
<th>POSITION WITHIN ICNIRP (SEG or Commission Member, incl. nominee): CM</th>
</tr>
</thead>
</table>

**ACTIVITIES AND ASSETS relating to the years 2017-2021**

Please report activities, relationships and assets below, including any current application or negotiation for future activities, relationships and assets, as well as anything else that could be perceived as potentially representing a conflict of interest in relation to the activities of ICNIRP.

Always mention the title of the activity, function, asset listed, and the name of company, organization, or institution involved.

**EMPLOYMENT**

Employer(s), function, title: University of Rio Grande do Sul, Full Professor  
Period: 1995-Present

**UNPAID CONSULTANCY, ADVISORY POSITIONS AND SERVICES**

These include unpaid consultancy and service as a scientific or other advisor for any commercial or non-commercial organization with an interest in NIR (including membership in scientific councils, associations, etc.) or as part of a regulatory, legislative or judicial process concerning NIR.

Not applicable ☒

If applicable:

- Name and description of the activity:  
- Personal advantages (specify):  
- Period:

**PAID CONSULTANCY, ADVISORY POSITIONS AND SERVICES**

These include paid consultancy and service as a scientific or other advisor for any commercial or non-commercial organization with an interest in NIR (including membership in scientific councils, associations, etc.) or as part of a regulatory, legislative or judicial process concerning NIR.

Not applicable ☒

If applicable:

- Name and description of the activity:  
- Period:

- Name and status of the contractor:
# Declaration of Personal Interests 2020

**Income (percentage of yearly laboratory/working group/personal income):**

## RESEARCH SUPPORT RECEIVED FROM COMMERCIAL ENTITIES

These are research support, grants, collaborations, sponsorships, other funding and in-kind support valued at more than EUR 1000 overall (including equipment, facilities, staff, paid travel to meetings, etc.).

Not applicable ☐

If applicable:

- **Name and description of the activity:** Research grants
- **Period:** 2018-
- **Name and status of the contractor:** Abbvie Pharmaceutical, Pfizer
- **Unit receiving and managing the research funding from the above activity (University/Unit/Laboratory/Personal Research Fund/Other):** Medical Foundation Hospital de Clínicas de Porto Alegre
- **Income (percentage of yearly laboratory/unit/personal income): last 2 years, 15%**
- Are you free to publish whatever results your research shows without the influence from the entity funding your research?
  - Yes ☒
  - Please specify the wording used in the contract: The results will be published independent of positive or negative outcomes.
  - No ☐
  - Please describe how your independence is safeguarded: All results, procedures and reports are reviewed by the Institutional Review Board every 3 months. Finances are managed by our Hospital. The contract is co-signed by the Hospital president, Medical Foundation Director and Principal Investigator.
**INVESTMENTS AND COMMERCIAL INTERESTS**

*Investment and commercial interests mean investments in a commercial entity, in a trust or holding company. This includes any commercial business interests (e.g., proprietorships, partnerships, joint ventures) and indirect investments such as a trust or holding company, stocks, bonds, stock options, or other securities. Broadly diversified mutual funds, pension funds or similar investments that are broadly diversified and on which the member does not exercise control are excluded. Members shall declare any current, past or planned investments and commercial interests they hold in the NIR area, when such an interest is valued at more than EUR 1000.*

<table>
<thead>
<tr>
<th>Not applicable ☒</th>
</tr>
</thead>
<tbody>
<tr>
<td>If applicable:</td>
</tr>
<tr>
<td>Name of the investment/share:</td>
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<tr>
<td>Period:</td>
</tr>
<tr>
<td>Income (as a percentage of yearly personal income):</td>
</tr>
</tbody>
</table>

**INTELLECTUAL PROPERTY**

*Intellectual property is patents, trademarks and copyrights (also pending applications) and proprietary know-how in a substance, technology or process.*

<table>
<thead>
<tr>
<th>Not applicable ☒</th>
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<tr>
<td>If applicable:</td>
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<td>Designation of the property:</td>
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<td>Period:</td>
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<tr>
<td>Income (as a percentage of yearly personal income):</td>
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</tbody>
</table>
**DECLARATION OF PERSONAL INTERESTS 2020**

**ADDITIONAL INFORMATION***

*This includes information concerning the interests of a person with whom the member has personal or professional ties (such as a family member or close colleague) when that person’s interests (professional activities or financial engagements in the NIR area) may be impacted positively or negatively by the work of ICNIRP.*

To your knowledge, would the outcome of your activities within ICNIRP benefit or adversely affect interests of others* with whom you have substantial common personal, financial or professional interests (such as family members or colleagues)?

Yes ☐ No ☒

Please provide a description of the others’ interests that are potentially affected by your ICNIRP activities: Period:

Is there any other aspect of your personal background or present circumstances not addressed above that might be perceived as affecting your objectivity or independence?

Yes ☐ No ☒

Please provide a description of the other aspects that are potentially affecting your objectivity or independence: Period:

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I hereby declare that the disclosed information is true and complete to the best of my knowledge. Should there be any change to the above information, I will promptly notify the ICNIRP Secretariat and complete a new declaration of interests which takes the changes into account.

I hereby provide my consent that my declaration of interest will be made available publicly via the ICNIRP website as per the condition stated under “policy”.

Date: **September 06, 2020**  
Name: **Tania Cestari**  
Signature:

*Information provided here may be protected by privacy rights. ICNIRP will anonymize this field before DOI disclosure.*

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**COMMENTS FROM ICNIRP ON THIS DECLARATION OF INTERESTS:**

As Dr Cestari’s research activities are not relevant to ICNIRP’s non-ionizing protection health mandate, ICNIRP does not consider that these represent a conflict of interest. Approved.