

## Assessment report Part II – CZECHIA

**1) ADMINISTRATIVE INFORMATION**

CT number	2023-505268-12-00
Member State Concerned	Czechia
Title of the study	Multicentrické, randomizované, dvojitě zaslepené, kontrolované klinické hodnocení fáze III k posouzení účinnosti, bezpečnosti a snášenlivosti dvou úvodních podání přípravku COMP360 u účastníků s depresí rezistentní vůči léčbě  <b>A Phase III, multicentre, randomised, double-blind, controlled study to investigate the efficacy, safety, and tolerability of two initial administrations of COMP360 in participants with treatment-resistant depression</b>
Name of sponsors	Compass Pathfinder Limited
IMPs (repeat for PR1, PR2.....)	Substance (name/ code): PSILOCYBINE/SUB10158MIG, Marketing authorisation status (MA number, MS where authorised etc): null/null Modified in relation to MA:

Has Part I been submitted prior to the submission of Part II?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
<i>If Yes</i>	
Is there already a conclusion on part I?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is the CT already approved in any member state?	Yes <input type="checkbox"/> No <input type="checkbox"/>

**2) GENERAL INFORMATION**

Is the CT a low-interventional trial? <sup>1</sup>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
First in man <input type="checkbox"/> , Phase I <input type="checkbox"/> , II <input type="checkbox"/> , III <input checked="" type="checkbox"/> , IV <input type="checkbox"/> NA <input type="checkbox"/>	
Is the CT a cluster trial <sup>2</sup>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Is the CT intended to be performed in more than one member states?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does the CT involve more than one site in the concerned member states?	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>
Does the CT include healthy volunteers?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Does the CT include female?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Male?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

<sup>1</sup> If yes – other demands for damage compensation, cfr. Art. 76<sup>2</sup> If yes – other demands for informed consent, cfr. Art. 30

Age group	
Adults (18-64 years)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Elderly (>= 65 years)	Yes <input type="checkbox"/> No <input type="checkbox"/>
< 18 years	
In Utero	Yes <input type="checkbox"/> No <input type="checkbox"/>
Preterm Newborn Infants (up to gestational age < 37 weeks)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Newborns (0-27 days)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Infants and toddlers (28 days - 23 months)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Children (2-11 years)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Adolescents (12-17 years)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Does the CT include vulnerable persons? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
<i>If yes</i>	
Minors	Yes <input type="checkbox"/> No <input type="checkbox"/>
Incapacitated subjects	Yes <input type="checkbox"/> No <input type="checkbox"/>
Pregnant women	Yes <input type="checkbox"/> No <input type="checkbox"/>
Breastfeeding women	Yes <input type="checkbox"/> No <input type="checkbox"/>
Subjects in emergency situations	Yes <input type="checkbox"/> No <input type="checkbox"/>
Other groups	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes specify: .....	
Are there study-specific procedures and/or interventions beyond the drug application? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
<i>If yes</i>	
Specify: Whole Blood, Urine, Serum	

**3) INFORMED CONSENT FORM**  
***(Repeat for ICF1, ICR2 ....)***

Date/version of Informed Consent Form	SIS-ICF_Main ICF, V 2.0_12Mar2024
Does the Informed Consent Form contain the correct title of the CT?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does the Informed Consent Form contain placeholder for the dated signature of the person performing the interview?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does this placeholder indicate the qualification of the person	

performing the interview	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does the Informed Consent Form contain a placeholder for for the dated signature of the subject	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
for the dated signature of legally designated representative?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
for the dated signature and name for an impartial witness (in case of a subject is not able to sign (temporarily disabled or illiterate)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
Does the Informed Consent Form contain a placeholder for the assent from minor (capable of forming an opinion)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
Does the subject or the legally designated representative declare that the information is understood?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
Does the subject or the legally designated representative confirm whether a copy of the Informed Consent Form (or the record) has been retained?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
Does the subject or the legally designated representative declare that the information is understood?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
<i>Additional items may be added according to national requirements</i>	
For example	
Does the subject or the legally designated representative confirm whether a copy of the Informed Consent Form (or the record) has been retained?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

### Conclusion

If all points are addressed Yes): The Inform Consent Form fulfils the conditions in art. 29, 1.

If not

### Questions/queries:

#### 4) WRITTEN INFORMATION

Is the Information sheet sufficiently comprehensive, concise, clear, relevant, and understandable to a layperson?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does the information sheet describe adequately nature, objectives, benefits, implications, risks, and inconveniences, of the clinical trial?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does the information sheet adequately describe the subject's rights and guarantees regarding his or her protection, in particular his or her right to refuse to participate and the right to withdraw from the clinical trial at any time without any resulting detriment and without having to provide any justification?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does the information sheet adequately explain that withdrawal of	

the informed consent will not affect the results of activities already carried out and the use of data obtained, based on informed consent, before its withdrawal?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does the information sheet adequately describe the conditions under which the clinical trial is to be conducted, including the expected duration of the subject's participation in the clinical trial?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Does the information sheet adequately describe the possible treatment alternatives,	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
the follow-up measures if the participation of the subject in the clinical trial is discontinued	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Post trial treatment options	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
Does the information sheet provide information about the damage compensation according to national law of concerned member state	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
<i>Further detailed points to be filled in at a national level</i>	
<i>If NA</i>	
Does the information sheet adequately inform that no particular arrangements for damage compensation are in place	Yes <input type="checkbox"/> No <input type="checkbox"/>
Does the information sheet provide the EU trial number	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
information about the availability of the clinical trial results (that the summary of the results of the clinical trial and a summary presented in terms understandable to a layperson will be made available in the EU database)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Does the information sheet provide adequate information about planned personal data collection and processing	Yes <input type="checkbox"/> No <input type="checkbox"/>
Does the information sheet provide adequate information about planned collection, storage and future use of biological samples?	Yes <input type="checkbox"/> No <input type="checkbox"/>
<i>Further detailed points must filled in by member states at national level</i>	
(in accordance with Regulation (EC) No 45/2001 and <b>national data protection legislation</b> implementing Regulation (EU) 2016/679, respectively)	

In the case of a trial with minors.  
Is there Informed Consent documents adequately paying attentions

to the information needs of these subjects?	Yes <input type="checkbox"/> No <input type="checkbox"/>
In the case of a trial with incapacitated subjects. Is there Informed Consent documents adequately paying attentions to the information needs of these subjects?	Yes <input type="checkbox"/> No <input type="checkbox"/>
In the case of a trial in an emergency situation Are there Informed Consent documents to obtain consent from the subject and/or legally designated representative to continue the participation of the subject in the CT after the intervention?	Yes <input type="checkbox"/> No <input type="checkbox"/>

### Conclusion

If all points are addressed Yes: The written information fulfils the conditions in art. 28 and 29

If not

### Questions/queries:

## 5) PROTECTION OF PERSONAL DATA

Has a statement been submitted by the sponsor or his or her representative that data will be collected and processed in compliance with Regulation (EC) No 45/2001 and <b>national data protection legislation</b> implementing Regulation (EU) 2016/679, respectively	Yes <input type="checkbox"/> No <input type="checkbox"/>
<i>Further detailed points must filled in by member states at national level</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
For example	
Are the rules for the collection, storage and future use of biological samples of the subject fulfilled?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is the procedure to pseudonymise the data correct?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Are Initials omitted?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is there no placeholder for the complete birthday?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Will the coding number maintained in the hand of the investigator or of a trustee?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is described how long the data will be stored?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Is there a comprehensive description of the aims and scope of data collection?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is there an indication, whether the data will be transferred to a so called "third party country" with a reduced level of data protection?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Will the subject (or his or her legally designated representative) be asked to consent to the use of his or her data and/or biological samples outside the protocol of the clinical trial for other scientific purposes?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<i>If Yes</i>	
Will the subject be informed that this consent may be withdrawn at	Yes <input type="checkbox"/> No <input type="checkbox"/>

any time by the subject or his or her legally designated representative?

**Questions/queries:**

**6) COMPENSATION**

Is there no undue influence, including that of a financial nature, exerted on subjects to participate in the clinical trial Yes  No

In trials with incapacitated subjects, minors, pregnant or breastfeeding subjects:  
Are no incentives or financial inducements given to the subjects or their legally designated representatives, except for compensation for expenses and loss of earnings directly related to the participation in the clinical trial;

Yes  No

**Questions/queries:**

**7) RECRUITMENT**

Is the procedure for inclusion of subjects described in detail in the protocol or a separate document Yes  No

Is clearly described of what the first act of recruitment is? Yes  No

Is the recruitment of subjects planned to be done through advertisement Yes  No

If yes: Yes  No

Have copies of the advertising material been submitted, including any printed materials, and audio or visual recordings.

Has an outline of the procedures proposed for handling responses to the advertisement been submitted? Yes  No

Have copies of communications used to invite subjects to participate in the clinical trial been submitted? Yes  No

Have arrangements for information or advice to the respondents found not to be suitable for inclusion in the clinical trial been described? Yes  No

Does the person performing the interview has the required qualification according to the law of concerned member states Yes  No

Yes  No

Are the arrangements for recruitment of subjects adequate?

Yes  No

**Questions/queries:**

**8) SUITABILITY OF THE INVESTIGATOR**

1) MUDr. Martin Brunovský, Ph.D. 2) MUDr. Alexander Nawka, Ph.D. 3) MUDr. Mgr. Marek Perez, Ph.D., MBA 4) MUDr. Tomáš Páleníček, Ph.D. 5) MUDr. Luboš Janů, Ph.D. 6) MUDr. Slavomír Pietrucha	
Is there an informative CV?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is previous experience obtained from work with clinical trials described?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Is previous experience obtained from work with patient care described?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Have certificates describing adequate ICH/GPV training been submitted?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Has a financial disclosure been submitted?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Have institutional affiliations, that might influence the impartiality of the investigators been presented?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
<i>Further detailed points may be filled in by member states at national level</i>	
For example	
Is the investigator qualified in accordance with national Law? ( <i>medical doctor as defined in national law, or a person following a profession which is recognised in the Member State concerned</i> )	Yes <input type="checkbox"/> No <input type="checkbox"/>

### Conclusion

- 1) MUDr. Martin Brunovský, Ph.D.
- 2) MUDr. Alexander Nawka, Ph.D.
- 3) MUDr. Mgr. Marek Perez, Ph.D., MBA
- 4) MUDr. Tomáš Páleníček, Ph.D.
- 5) MUDr. Luboš Janů, Ph.D.
- 6) MUDr. Slavomír Pietrucha

### Reason:

### 9) SUITABILITY OF THE FACILITIES

Has a list of the planned clinical trial sites with name and position of the principal investigators	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
and the planned number of subjects at the sites been submitted?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
1) Psyon s.r.o., Čistovická 249/11, Praha 2) INEP medical s.r.o., Křížkova 264/22, 186 00 Praha 3) MPMeditrine s.r.o., Opavská 962/39, 708 00 Ostrava 4) Národní ústav Duševního zdraví, Topolova 748, 250 67 Klecany 5) A-Shine s.r.o., Šumavská 2, 301 00 Plzeň 6) Neuroterapie KH s.r.o, Boženy Jandlové 2132/3, 143 00	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Praha

Has a written statement been submitted describing the suitability of the clinical trial sites adapted to the nature and use of the investigational medicinal product? Yes  No   
 (issued by the head of the clinic/institution at the clinical trial site or by some other responsible person, according to the system in the Member State concerned)

Does this statement adequately describe

the suitability of facilities,

Yes  No

the equipment,

Yes  No

the human resources

Yes  No

the expertise of the site,

### Conclusion

- 1) Psyon s.r.o., Čistovická 249/11, Praha
- 2) INEP medical s.r.o., Křížkova 264/22, 186 00 Praha
- 3) MPMeditrine s.r.o., Opavská 962/39, 708 00 Ostrava
- 4) Národní ústav Duševního zdraví, Topolova 748, 250 67 Klecany
- 5) A-Shine s.r.o., Šumavská 2, 301 00 Plzeň
- 6) Neuroterapie KH s.r.o, Boženy Jandlové 2132/3, 143 00

### Reason:

## 10) PROOF OF INSURANCE COVER OR INDEMNIFICATION

Is the arrangement for damage compensation in accordance to national law? Yes  No

*Further detailed points must be filled in at the national level*

### Questions/queries:

## 11) FINANCIAL AND OTHER ARRANGEMENTS

Is there a description confirming adequate financing of the clinical trial is ensured? Yes  No

Yes  No

Are financial transactions and compensation paid to subjects adequate?

Are financial transactions and compensation paid to the investigator/site for participating in the clinical trial adequate? Yes  No  NA

Are any other agreement between the sponsor and the site adequate? Yes  No  NA

### Questions/queries:



**12) LIST OF QUESTIONS TO THE SPONSOR/****13) ASSESMENT OF THE SPONOR ´S RESPONSE**

Are all queries resolved?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If not specify:	

**14) FINAL DECISION**

The Clinical trial is approvable	<input checked="" type="checkbox"/>
The Clinical trial is not approvable	<input type="checkbox"/>
The Clinical trial is approvable subjects to conditions	<input type="checkbox"/>

**In case of approval****The approval is valid for the following trial sites and investigators**

- 1) Psyon s.r.o., Čistovická 249/11, Praha - MUDr. Martin Brunovský, Ph.D.
- 2) INEP medical s.r.o., Křížkova 264/22, 186 00 Praha - MUDr. Alexander Nawka, Ph.D.
- 3) MPMeditrine s.r.o., Opavská 962/39, 708 00 Ostrava - MUDr. Mgr. Marek Perez, Ph.D., MBA
- 4) Národní ústav Duševního zdraví, Topolova 748, 250 67 Klecany - MUDr. Tomáš Páleníček, Ph.D.
- 5) A-Shine s.r.o., Šumavská 2, 301 00 Plzeň - MUDr. Luboš Janů, Ph.D.
- 6) Neuroterapie KH s.r.o, Boženy Jandlové 2132/3, 143 00 Praha - MUDr. Slavomír Pietrucha

**List of documents on the basis of which the decision was made**

1. K2\_HH Factsheet, v 4.0, 7 Dec 2023
2. K2\_Images, v3.0\_1 Feb 2024
3. K2\_LB BRV\_Tnoverion
4. K2\_LB BV\_Tnoverion
5. K2\_LB MoA\_Tnoverion
6. K2\_LB MV, Videos v1.0, 04-Oct-2022
7. K2\_LB PE\_Tnoverion
8. K2\_LB RCH\_Tnoverion
9. K2\_MP Consent Navigator, 19-May-2023 v1.0 Czech
10. K2\_MP Notif CFT
11. K2\_MP Patient Portal, Protocol v3.0, 13-Feb-2023
12. K2\_PAG Copy, v3.0, 1 Feb 2024
13. K2\_PFS
14. K2\_PIS, V3.0\_06MAR2023\_Czech (Czech Republic)\_12MAY2023
15. K2\_PL, V3.0\_12MAY2023
16. K2\_PN, v5.0, 21Jul2021
17. K2\_Poster, V3.0, 06MAR2023
18. K2\_Print Ads Copy, v2.0, 06OCT2022
19. K2\_Print Ads, V2.0\_27SEP2022(2
20. K2\_QSG, v2.0 15Jul2022
21. K2\_Telephone PS Script, V2.0 10. listopadu 2023
22. K2\_Web text for sites, v3.0\_1Feb2024
23. K2\_Website Copy, v4.0\_1Feb2024
24. L1\_SIS-ICF\_GDPR ICF, V2.0\_12. března 2024
25. L1\_SIS-ICF\_Main ICF, V 2.0\_12Mar2024
26. L1\_SIS-ICF\_Medical Record RF, V1.0, 18Oct2023
27. L1\_SIS-ICF\_Optional Biomarker, V 3.0, 21Mar2023

28. L1\_SIS-ICF\_Pre-Screening ICF, V 2.0, 21. března 2023
29. L2\_Subject Card. verze 2.0, 17. března 2021
30. M1\_CV PI Nawka\_INEP Medical, 16 Oct 2023
31. M1\_CV PI Pietrucha\_Neuroterapie KH, 21 Mar 2024
32. M1\_CV PI Janu\_A-Shine, 12 Oct 2023
33. M1\_CV PI Brunovsky\_PSYON, 25 Oct 2023
34. M1\_CV PI Palenicek, 2 Nov 2023
35. M1\_CV PI Perez\_MPMeditrine, 28 Mar 2023
36. M2\_DoI PI Nawka\_INEP Medical, 12 Oct 2023
37. M2\_DoI PI Brunovsky\_PSYON, 18 Oct 2023
38. M2\_DoI PI Perez\_MPMeditrine, 28 Mar 2024
39. M2\_DoI PI Janu\_A-Shine, 12 Oct 2023
40. M2\_DoI PI Palenicek\_NUDZ, 11 Oct 2023
41. M2\_PI DoI PI Pietrucha\_Neuroterapie KH, 21 Mar 2024
42. N1\_Site Registration\_A-Shine, 19 Nov 2021
43. N1\_Site Registration\_INEP Medical, 28 Mar 2018
44. N1\_Site Registration\_MPMeditrine, 19 Nov 2014
45. N1\_Site Registration\_Neuroterapie KH, 17 Dec 2020
46. N1\_Site Registration\_PSYON, 26 Aug 2022
47. N1\_Site Suitability\_A-Shine, 3 Nov 2023
48. N1\_Site Suitability\_INEP Medical, 17 Oct 2023
49. N1\_Site Suitability\_MPMeditrine, 28 Mar 2024
50. N1\_Site Suitability\_Neuroterapie, 21 Mar 2024
51. N1\_Site Suitability\_NUDZ, 24 Oct 2023
52. N1\_Site Suitability\_PSYON, 25 Oct 2023
53. O1\_Insurance certificate, 13 Dec 2023
54. O2\_Insurance Policy\_Amendment 1, 10 Aug 2023
55. O2\_Insurance Policy
56. P1\_Compensation for pts, CZ v1\_19Oct2023
57. R1\_Cmpl National Data Protect, 3 Oct 2023
58. S1\_Cmpl Use Bio samples, 28 Jan 2022
59. K1\_Recruit-ICF procedure, V 3.0, 5.5.2022
60. K2\_Advocacy FS, 9 Jan 2024
61. K2\_Brochure, 9 Jan 2024
62. K2\_Caregiver Info, 12 May 2023
63. K2\_COMP6BQ, 9 Aug 2022
64. K2\_COMPEQ
65. K2\_COMPES
66. K2\_Core
67. K2\_Digital MC, 12 Jan 2024
68. K2\_Flyer, 12 May 2023

D4\_COMP 006\_Patient Facing Documentation\_Part 2\_CZ\_04Apr2024\_NFP  
 D4\_COMP006\_EQ5D5L\_Pv1.1\_CZE\_nodate\_NFP,  
 D4\_COMP006\_PHQ9\_PvXX\_CZE\_nodate\_NFP,  
 D4\_COMP006\_GAD7\_Pv1.0\_CZE\_nodate\_NFP,  
 D4\_COMP006\_SDS\_Pv3.0\_CZE\_nodate\_NFP,  
 D4\_COMP006\_mDESS\_Pv1.0\_CZE\_30Jun2022\_NFP,  
 D4\_COMP006\_TIC-P\_Pv1.0\_CZE\_30Jun2022\_NFP,  
 D4\_COMP006\_5D-ASC\_Pv1.0\_CZE\_30Jun2022\_NFP,  
 D4\_COMP006\_EBI\_Pv1.0\_CZE\_30Jun2022\_NFP,  
 D4\_COMP006\_DSST S\_Pv4.0\_CZE\_05Sep2022\_NFP,  
 D4\_COMP006\_STAR-P\_Pv1.0\_CZE\_30Jun2022\_NFP,  
 D4\_COMP006\_Rapport,PPS\_Pv1.0\_CZE\_30Jun2022\_NFP,  
 D4\_COMP006\_BEQ\_Pv1.0\_CZE\_08Jul2022\_NFP,  
 D4\_COMP006\_CGI-S\_Pv1.0\_CZE\_27Jun2022\_NFP,  
 D4\_COMP006\_C-SSRS B\_Pv5.1\_CZE\_V X-Y\_NFP,  
 D4\_COMP006\_C-SSRS BS\_Pv5.1\_CZE\_V X-Y\_NFP,  
 D4\_COMP006\_C-SSRS SLV\_Pv5.1\_CZE\_V X-Y\_NFP,  
 D4\_COMP006\_MGH-ATRQ\_Pv1.0\_CZE\_27Jun2022\_NFP,  
 D4\_COMP006\_SIGMA-STD\_Pv1.0\_CZE\_16Jun2022\_NFP,  
 D4\_COMP006\_SIGMA-SLE\_Pv1.0\_CZE\_16Jun2022\_NFP,  
 D4\_COMP006\_BPRS\_Pv1.0\_CZE\_27Jun2022\_NFP,  
 D4\_COMP006\_MINI\_Pv7.0.2\_CZE\_02Jan2022\_NFP,

D4\_COMP006\_EQ5D5L\_Sv1.0\_CZE\_07Oct2022\_NFP,  
D4\_COMP006\_PHQ9\_Sv1.0\_CZE\_13Oct2022\_NFP,  
D4\_COMP006\_GAD7\_Sv1.0\_CZE\_03Oct2022\_NFP,  
D4\_COMP006\_SDS\_SMv1.0\_CZE\_22Sep2022\_NFP,  
D4\_COMP006\_SDS\_Sv1.0\_CZE\_03Oct2022\_NFP,  
D4\_COMP006\_mDESS\_SMv1.0\_CZE\_03Oct2022\_NFP,  
D4\_COMP006\_mDESS\_Sv1.0\_CZE\_22Sep2022\_NFP,  
D4\_COMP006\_TIC-P\_Sv1.0\_CZE\_07Oct2022\_NFP,  
D4\_COMP006\_5D-ASC\_Sv2.0\_CZE\_07Oct2022\_NFP,  
D4\_COMP006\_EBI\_Sv1.0\_CZE\_08Sep2022\_NFP,  
D4\_COMP006\_STAR-P\_Sv1.0\_CZE\_08Sep2022\_NFP,  
D4\_COMP006\_DSST\_SMv1.0\_CZE\_07Nov2022\_NFP,  
D4\_COMP006\_DSST\_Sv1.0\_CZE\_07Nov2022\_NFP,  
D4\_COMP006\_RPPS\_Sv1.0\_CZE\_08Sep2022\_NFP,  
D4\_COMP006\_BPRS\_Sv1.0\_CZE\_08Sep2022\_NFP,  
D4\_COMP006\_CGI-S\_Sv1.0\_CZE\_08Sep2022\_NFP,  
D4\_COMP006\_C-SSRS\_SLV\_SMv1.0\_CZE\_07Oct2022\_NFP,  
D4\_COMP006\_C-SSRS\_SLV\_Sv1.0\_CZE\_08Sep2022\_NFP,  
D4\_COMP006\_MGH-ATRQ\_SMv1.0\_CZE\_03Oct2022\_NFP,  
D4\_COMP006\_MGH-ATRQ\_Sv1.0\_CZE\_13Oct2022\_NFP,  
D4\_COMP006\_C-SSRS,BS\_SMv1.0\_CZE\_07Oct2022\_NFP,  
D4\_COMP006\_QSG\_Sv2.0\_CZE\_03Aug2022\_NFP,  
D4\_COMP006\_STAR-C\_Sv1.0\_CZE\_11Apr2023\_NFP

#### **List of members of the ethic committee participating in the decision**

MUDr. Jindřiška Burešová (chairman)  
doc. MUDr. Jiřina Zapletalová, Ph.D.  
prof. MUDr. et Mgr. Jiří Minařík, Ph.D.  
MUDr. Libor Kvapil  
MUDr. Josef Srovnal, Ph.D.  
Anna Holá  
MUDr. et PhDr. Lenka Hansmanová, Ph.D.  
PharmDr. Tomáš Anděl, Ph.D.  
doc. MUDr. Libuše Stárková, CSc.  
prof. MUDr. Karel Indrák, DrSc.  
MUDr. Karel Cwiertka, Ph.D.  
MUDr. Jan Strojil, Ph.D.  
Iveta Sudolská  
Věra Bartlová

In Prague 13 June 2024