

Statement of Education and Qualifications

PLEASE COMPLETE THE FOLLOWING INFORMATION:

Academic Qualification(s) (e.g. MD, MBBS, Medical License Number, etc.)

Name (First, Middle, Last)

Regina Gorbyleva

MD, Biochemist

Address (Name of Institution, Street, City, Postal Code, State or Province (if applicable), Country)

LLC DNKOM, 4th Streletskiy lane, Moscow, 127018, Russia

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Email Address

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Education and Training (List all Colleges, Universities and Medical Schools attended, postdoctoral/fellowship training, board certification/medical license)

Name and Location of Institution (City, State or Province and Country)	Degree and Year Awarded (Date format: DDMmmYYYY)	Area of Study
Kazan State University, Kazan, Russia	Diploma №43-01-1/09 26 May 2010	Biochemistry
Kazan State Medical Academy, Kazan, Russia	MD Diploma № 3778 28 Sep 2009	Clinical Biochemistry
Russian Medical Academy of Postgraduate Education, Moscow, Russia	Advanced Training Course Certificate №1014/8 13 Dec 2010	Clinical Laboratory Diagnostics
Peoples' Friendship University of Russia. Moscow, Russia	Advanced Training Course Certificate №27148 24 Oct 2012	Clinical Laboratory Diagnostics
Russian Medical Academy of Postgraduate Education, Moscow, Russia	Advanced Training Course Certificate Per№ 10-C/919.11 21 Oct 2017	Clinical Laboratory Diagnostics

Professional Experience

Position/Title	Name and Location of Institution (City, State or Province and Country)	Dates (Start/Stop Dates as applicable. DDMmmYYYY)
Current Head of Clinical Diagnostic Laboratory	LLC DNKOM, 4 th Streletskiy lane, Moscow, 127018, Russia	2015 – present
Previous Biologist at Clinical Diagnostic Laboratory	LLC DNKOM, 4th Streletskiy lane, Moscow, 127018, Russia	2012 – present
Biologist at Clinical Diagnostic Laboratory	LLC ON Clinic Geoconik, building 6 , 26, Trubnaya street, Moscow, 107045, Russia	2009 – 2012

Previous participation in clinical trials

Indication of Trial	Clinical Phase of Trial (I-IV)	Role in Trial (e.g. Investigator, Sub-Investigator)	Year in which trial was conducted
NSCLC	IIIb/IV	head of laboratory	2018-present
Breast cancer	III	head of laboratory	2018-present
Breast cancer	III d	head of laboratory	2018-present
Ovarian cancer	III	head of laboratory	2017-present
Lung cancer	III	head of laboratory	2017-present
Head and Neck Carcinoma	II	head of laboratory	2017-present
Lymphoma CNS	II	head of laboratory	2017-present
NSCLC	IIIb/IV	head of laboratory	2017-present
Gastric cancer	III	head of laboratory	2017-present
Mesothelioma of the pleura	III	head of laboratory	2017-present
NSCLC	III	head of laboratory	2017-present
Esophagus cancer	III	head of laboratory	2017-present
Thrombolytic agent	III	head of laboratory	2016-present
Ovarian cancer	III	head of laboratory	2015-present
Lymphoma	II	head of laboratory	2016-present
Lymphoma	III	head of laboratory	2016-present

Training on ICH/GCP*: YES If yes, specify below NO
*International Conference on Harmonisation, Good Clinical Practice

Document type of training and year when training was completed
 GCP Training Certificate 21/01/2019

Other documents evidencing experience or expertise attached:
 YES If yes, specify below NO

Signature of Investigator (if required) _____ Date (DDMmmYYYY) _____

FOR QUINTILESIMS USE ONLY

Translator Signature *Gorby/leve* _____ Date (DDMmmYYYY) *30 Jan 19*