

Office of Continuing Medical Education 100 Woodruff Circle, NE Suite 331

Speaker / Moderator Financial Relationship Disclosure Form

Name of Individual (please print First and Last Name, Credential):		
Professional Title:		
School/Organization:		
Identify the role you have in planning and delivery of this education:	Choose all that apply. □ Speaker □ Moderator □ Editor	
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Please disclose all financial relationships that you have had in the past 24 months with ineligible companies (see definition below). For each financial relationship, enter the name of the ineligible company and nature of the financial relationship(s). There is no minimum threshold; we ask that you disclose all financial relationships, regardless of the amount, with ineligible companies. You should disclose all financial relationships regardless of the potential relevance of each relationship to the education.

The ACCME Standards for Integrity and Independence require that we disqualify individuals who refuse to provide this information from involvement in the planning and implementation of accredited continuing education. Thank you for your diligence and assistance.



PLEASE NOTE: If you have been employed within the past 24 months or are currently an employee of an ineligible company (as defined below) you will be prohibited from any further participation in this activity.

Enter the Name of Ineligible Company	Enter the Nature of Financial Relationship	Has the Relationship Ended?
An ineligible company is any entity whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. For specific examples of ineligible companies visit accme.org/standards.	Examples of financial relationships include employee, researcher, consultant, advisor, speaker, independent contractor (including contracted research), royalties or patent beneficiary, executive role, and ownership interest. Individual stocks and stock options should be disclosed; diversified mutual funds do not need to be disclosed. Research funding from ineligible companies should be disclosed by the principal or named investigator even if that individual's institution receives the research grant and manages the funds.	If the financial relationship existed during the last 24 months, but has now ended, please check the box in this column. This will help the education staff determine if any mitigation steps need to be taken.
Example: ABC Company	Consultant	

☐ In past 24 months, I have not had any financial relationships with any ineligible companies.				
Please Sign and Date:	/ Date:			
Revised 10/10; 6/11; 3/12; 4/14; 8/15; 5/21; 1/24				
FOR OCME USE ONLY:				

Attestation:

- 1. I understand that I am required to disclose any relevant financial relationships to the audience at the beginning of my presentation, both by projection and verbally.
- 2. I agree to provide learning objectives by projection at the beginning of my presentation.
- 3. If presenting specific patient cases or case histories, I warrant that I have HIPAA compliant authorization for any Protected Health Information in the presentation materials or have de-identified all materials.
- 4. I agree that will not accept any honoraria, additional payments, or reimbursement beyond that which has been agreed upon specifically with the Emory School of Medicine or its designee.
- 5. I agree that the content of my presentation will be therapeutically well-balanced, evidence-based, non-biased and any recommendations involving clinical medicine will be based on evidence that is accepted within the profession of medicine as adequate justification for their indications and contraindications in the care of patients.
- 6. All scientific research referred to, reported, or used in my presentation in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection and analysis and will not promote any commercial interest.
- 7. If I am discussing specific healthcare products or services, I will use generic names to the extent possible. If I need to use trade names, I will use trade names from several companies when available and not just names from any single company.
- 8. I understand that if I fail to give a balanced and objective presentation, as determined by the audience and/or CME planning committee, I will either
 - a. Be required to submit the content (slides, etc.) of any future educational presentations to the Emory CME Planning Committee before the presentation may be approved, or
 - b. Be prohibited from presenting educational sessions at future Emory CME programs.
- 9. I verify that prior to the presentation, I have requested and/or obtained permission from copyright holder(s) to reproduce/copy, from their work, the portions of my presentation that are protected by copyright laws. I acknowledge that Emory University School of Medicine will not be held legally responsible for any misrepresentation on my part regarding copyright infringement.

Signed: Date: Click or tap here to enter text.