

Disclosure of Relevant Financial Relationships & Commitment to Valid Content

It is policy of the Rochester Academy of Medicine's CME Committee to ensure balance, independence, objectivity, and scientific rigor in all CME activities. Anyone engaged in content development, planning or presentation must complete this form. Persons who fail to complete this form may not participate in the CME activity.

Dear Prospective Planner/Faculty Member:

We are looking forward to having the opportunity to include you as a planner, faculty, reviewer, etc...in the accredited continuing education.

As a prospective planner or faculty member, we would like to ask for your help in protecting our learning environment from industry influence. Please complete the form below and return it to CMEraom@gmail.com

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. If you have questions, please contact us at CMEraom@gmail.com.

Why am I receiving this communication?

The Rochester Academy of Medicine is accredited by the *Medical Society of The State of New York (MSSNY)*. We appreciate your help in partnering with us to follow accreditation guidelines and help us create high-quality education that is independent of industry influence. In order to participate as a person who will be able to control the educational content of this accredited CE activity, we ask that you disclose all financial relationships with any ineligible companies that you have had over the past 24 months. We define ineligible companies as those whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. There is no minimum financial threshold; you must disclose all financial relationships, regardless of the amount, with ineligible companies. We ask you to disclose regardless of whether you view the financial relationships as relevant to the education. For more information on the Standards for Integrity and Independence in Accredited Continuing Education, please visit accme.org/standards.

Why do we collect this information?

Since healthcare professionals serve as the trusted authorities when advising patients, they must protect their learning environment from industry influence to ensure they remain true to

their ethical commitments. Many healthcare professionals have financial relationships with ineligible companies. By identifying and mitigating relevant financial relationships, we work together to create a protected space to learn, teach, and engage in scientific discourse free from influence from organizations that may have an incentive to insert commercial bias into education.

What are the next steps in this process?

After we receive your disclosure information, we will review it to determine whether your financial relationships are relevant to the education. Please note: the identification of relevant financial relationships does not necessarily mean that you are unable to participate in the planning and implementation of this educational activity. Rather, the accreditation standards require that relevant financial relationships are mitigated before you assume your role in this activity.

To help us meet these expectations, please use the form we have provided to share all financial relationships you have had with ineligible companies during the past 24 months. This information is necessary in order for us to be able to move to the next steps in planning this continuing education activity.

If you have questions about these expectations please contact us at CMEraom@gmail.com

NOTE: ACCME defines “ineligible Companies” as any entity whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. Please Disclose any and all financial relationships in any amount occurring within the past 24 months that create a conflict of interest. . All commercial relationships that create a conflict with the faculty’s control of content must be resolved before the educational activity occurs.

1. ACCME guidelines state that all individuals who are in a position to control content of the CME activity are to disclose all of their relationships with ineligible companies. Those who are in a position to control include the course director, speakers, case presenters, planning committee members, expert panelists and anyone else who is expected to take an active role in the education.
2. All Activity Directors and Planning Committee members must complete Disclosure of Relevant Financial Relationship forms BEFORE planning begins.
3. Failure to disclose conflicts of interest in a timely manner may result in recusal from the activity.

When do relationships create ‘conflict of interest’?

The ACCME considers financial relationship to create actual conflicts of interest in CME when individuals have both a financial relationship with an ineligible company and the opportunity to affect the content of CME about the products or services of an ineligible company.

Where is the 'conflict'?

When the provider's interests are aligned with those of an ineligible company the interests of the provider are in conflict with the interests of the public. The interests of the people controlling CME must always be aligned with what is in the best interests of the public.

How do these circumstances create a conflict of interest?

The potential for increasing the value of the financial relationship with the ineligible company creates an incentive to influence the content of the CME – an incentive to insert commercial bias. Commercial bias is prohibited in CME.

academyofmedicine@gmail.com (not shared) [Switch account](#)

* Required

First & Last Name*

Your answer

Your Email Address*

Your answer

Your Phone Number*

Your answer

CME Activity Title*

Your answer

Presentation Title*

Only required for speakers for Single Live Events.

Your answer

CME Activity Date*

If you are completing this form for an RSS please put the first date of the accreditation cycle.

Date

CME Activity Location*

If you are completing this form for an RSS please put the first date of the accreditation cycle.

Your answer

Additional Activity Dates

Your answer

Individual's prospective role(s) in education

Identify the prospective role(s) that this person may have in the planning and delivery of this education (*choose all that apply*)

*

Planner (Activity Director)

Teacher/Instructor

Faculty

Author

Writer

Reviewer

Moderator

Panelist

Planning Committee

Other:

Non Accredited Educational Partner Organization (Name & Address)

Course Director: Name & Address: Phone: Email:

Commercial Interest Funding this program?

*

Your answer

Have you ever been excluded, debarred, suspended or deemed ineligible to participant in federal health care programs or in federal procurement or non-procurement programs or been convicted of a criminal offense that would result in mandatory exclusion from such programs or debarred or excluded by another federal agency?*

Yes
No

In the last two years, have you violated or received notice of any violation or potential violations related to ACCME/MSSNY or other continuing medical education policies and standards?*

Yes
No

I understand that the information presented to the learner must be unbiased, scientifically balanced and based on best available evidence and best practices in medicine. I agree that all scientific and clinical research referred to, reported or used in CME to justify patient care recommendations will conform to the generally accepted standards of experimental design, data collection and analysis. *

Yes
No

Please provide the name of the ineligible company and the type of relationship you have or had with the ineligible company.
Relationships can include: stock ownership, employment affiliation, royalties, patents, speakers bureau member, consultant or advisor for the commercial interest.

Your answer



I agree to provide my presentation, reference and handouts to the Rochester Academy of Medicine prior to my presentation. I understand that participants may evaluate my CME presentation. *

Yes
No

I will uphold academic standards to ensure balance, independence, objectivity, and scientific rigor in my role in the planning, development or presentation of this CME

activity. In addition, I agree to comply with the requirements to protect health information under the Health Insurance Portability & Accountability Act of 1996. (HIPAA)*

Yes

No

I agree to provide a balanced presentation that is free from commercial bias or financial interest for or against any commercial product or service. I agree to avoid the use of trade names in my presentation. If I determine that it is important to clarify via the use of trade names from all available companies will be included.*

Yes

No

To be Completed by Planner, Faculty, or Others Who May Control Educational Content

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 the nature of the financial relationship(s). There is no minimum financial 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 *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.

Then, **Enter the Nature of Financial Relationship**

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. *

Your answer

In the past 24 months, I have not had **any** financial relationships with any ineligible companies.

I attest that the above information is correct as of this date of submission.

*

Date

Electronic Signature

The undersigned hereby agrees to use an electronic signature in lieu of a paper-based signature, understanding that electronic signatures are legally binding in the United States and in other countries.

I Hereby Certify That:

1. This disclosure and commitment form was completed accurately, and I attest to the validity of the information contained within.
2. I agree to collaborate with the Rochester Academy of Medicine CME Coordinator to ensure that the necessary follow-up is consistent with the MSSNY and ACCME Essential Areas, Elements, Criteria, Policies, and Standards for Commercial Support (SCS).

First & Last Name*

Your answer

Professional Title*

Your answer

License #

Your answer

Date*

Date

Submit

Clear form