



AMERICAN COLLEGE OF SURGEONS | DIVISION OF EDUCATION
Blended Surgical Education and Training for Life
JOINT PROVIDERSHIP PROGRAM

SPEAKER, MODERATOR, DISCUSSANT
DISCLOSURE OF RELEVANT FINANCIAL RELATIONSHIPS
ASPO 2017 ANNUAL MEETING
MAY 18-21, 2017 - JW MARRIOTT, AUSTIN, TX

NAME:
TITLE OF PRESENTATION:

In accordance with ACCME regulations, the American College of Surgeons, as the accredited provider for this activity, must ensure that anyone who is in a position to control the content of the education activity has disclosed to us all relevant financial relationships with any commercial interest (see below for definitions) as it pertains to the content of the presentation.

- I do not have relevant financial relationships with commercial interests that pertain to the content of my presentation.
I do have relevant financial relationships with commercial interests that pertain to the content of my presentation.
List the names of proprietary entities producing health care goods or services, with the exemption of non-profit or government organizations and non-health care related companies with which you or your spouse/partner have, or have had, a relevant financial relationship within the past 12 months.
Explain what you or your spouse/partner received (i.e. salary, honorarium etc.).
Specify your role.

Table with 3 columns: Commercial Interest, What I/Spouse/Partner Received, My Role

What was received: Salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g. stocks, stock options, etc.), or other financial benefit.

Role: Employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, etc.

If your presentation describes the use of a device, product, or drug that is not FDA approved or the off-label use of an approved device, product, or drug or unapproved usage, it is your responsibility to disclose this information verbally to the learner during your presentation.

Glossary of Terms

Commercial Interest

A commercial interest is any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. The ACCME does not consider providers of clinical service directly to patients to be commercial interests.

Financial Relationships

Financial relationships are those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received, or expected. ACCME considers relationships of the person involved in the CME activity to include financial relationships of a spouse or partner.

Relevant Financial Relationships

The ACCME focuses on financial relationships with commercial interests in the 12-month period preceding the time that the individual is being asked to assume a role controlling content of the CME activity. ACCME has not set a minimal dollar amount for relationships to be significant. Inherent in any amount is the incentive to maintain or increase the value of the relationship. The ACCME defines "relevant financial relationships" as financial relationships in any amount occurring within the past 12 months that create a conflict of interest.

Conflict of Interest

Circumstances create a conflict of interest when an individual has an opportunity to affect CME content about products or services of a commercial interest with which he/she has a financial relationship.

- I agree that I will not accept honorarium, travel expenses, in-kind contributions, or any other support from commercial companies in connection with this activity.
By checking this box I certify that I have identified and disclosed all relevant financial relationships with any commercial interests and that all information provided herein is true and correct. Date: _____