

**FINANCIAL RELATIONSHIP DISCLOSURE FORM**

As a prospective planner or faculty member, we ask for your help in protecting our learning environment from industry influence. The ACCME Standards for Integrity and Independence require that we collect financial relationship data and disqualify individuals who refuse to provide this information from involvement in the planning and implementation of accredited continuing education. When possible, **please use generic drug names** to contribute to impartiality and a balanced view of therapeutic options. In addition, if the material includes trade names, then trade names from several companies should be used where available. Thank you for your diligence and assistance.

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| Name: |
| Degree: |
| Role in Activity: ☐Course Director ☐Planner ☐ Faculty ☐Moderator |
| CME Activity: |
| Activity Date: |

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 amount, and regardless of the potential relevance of each relationship to the education.

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

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| **Enter the Name of Ineligible Company**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](https://accme.org/accreditation-rules/standards-for-integrity-independence-accredited-ce). | **Enter the Nature of the Financial Relationship** Examples include employee, researcher, consultant, advisor, speaker, independent contractor, 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 only by the principal. | **Has the Relationship Ended?**If the relationship existed in the last 24 months, but has ended, check the box in this column. |
| Example: XYZ Company | Consultant | X |
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The presenter warrants that nothing in their presentation is libelous or will infringe on the rights of any third party. Presenter also warrants that for any third-party materials incorporated into their presentation, they have obtained all necessary permission from the copyright owner of such material. Upon request presenter agrees to furnish copies of said permission(s) to the ATA. The presenter is responsible for all fees, royalties, and other charges for the use of such materials. The presenter shall indemnify the ATA for all damages, costs, and expenses, including attorneys' fees, incurred by ATA as a result of a violation of this paragraph.

* By checking this box, I attest that the above information is accurate, and I will update the ATA if there are any changes to the above information prior to the activity date. Please accept this as my signature:

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| Printed Name: | Date: |