



# Disclosure and Verification Form

## To be completed by education staff.

Name of Individual:

Title of Continuing Education:

Date and Location of Education:

## 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 (*i.e. planning committee, staff involved in choosing topics, faculty or content*)
- Speaker, Presenter, Teacher, Instructor, Faculty
- Author, Writer
- Reviewer
- Other \_\_\_\_\_

As a prospective planner or faculty member, we would like to ask for your help in protecting our learning environment from industry influence. Please completed the form below and return it to the CME Office by **(enter date)**.

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 [dmmgonzalez@llu.edu](mailto:dmmgonzalez@llu.edu) or 909-558-4963.

## To be Completed by Planner, Faculty, or Others Why 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.

<u>Enter the Name of Ineligible Company</u>	<u>Enter the Nature of Financial Relationship</u>	<u>Has the Relationship Ended?</u>
An <b>ineligible company</b> 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 <a href="http://accme.org/standards">accme.org/standards</a> .	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 the column. This will help the education staff determine if any mitigation steps need to be taken.
Example: ABC Company	Consultant	<input checked="" type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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 the date of submission.

Signature (*typed signature are not accepted*)

Date