



Speaker/Planner Disclosure Form

What to Disclose

The intent of this disclosure requirement is not to prohibit speakers from presenting, but rather to inform the audience of any bias that speakers may have. It is important to planners and participants that there is full disclosure and management of any competing interests with respect to information being presented at a CME/CPD event. In order to meet the requirements of all the organizations for which we are accredited providers, we are asking all presenters and program planners to disclose through self-report all industry financial relationships for the two year period prior to a CME/CPD activity, not just those relevant to the subject being discussed. As well, relationships with government agencies, regulatory bodies, and not-for-profit agencies as well as any commercial affiliation that your spouse or close family members have with respect to information being presented at a CME event should also be disclosed. Speakers must forward for review at least two weeks prior to the CME/CPD activity any slides to be used in their presentation that were produced by a third party (industry or medical communications company). UBC CPD will work with you to present the information to the audience in a manner that ensures disclosure is meaningful, contextualized and relevant for the audience.

How to Disclose

- 1) Please list on this form any affiliation that you have, financial or otherwise, with a commercial or other industry interest and if you think this might be perceived as biasing your presentation or a conflict of interest, how you plan to manage this. UBC CPD may publish this information in a conference handout.
- 2) Each presenter should outline and explain their disclosure information to the audience on a slide at the beginning of their presentation. If a disclosure slide has not been included in a presentation, it will be inserted by the program organizer.
- 3) Speakers who have no involvement with commercial interests should also inform the audience that they are unable to identify any potential conflict of interest and have nothing to disclose.

**In some cases it can be difficult to determine whether a given relationship or activity may be in "conflict"; in these cases consultation with UBC CPD may be helpful. In general, we recommend erring on the side of disclosing more than less.*



Please continue on reverse if necessary

Conference Name:
Presentation Title:

	Affiliation Type (past 2 years) Related or Unrelated to content presented	Company/Organization(s)	If you think this might be perceived as biasing your presentation or a conflict of interest, how do you plan to manage this?
A	I have ownership interest in the company (i.e. stocks, stock options or other ownership interest, excluding diversified mutual funds)		
B	I am a member of an Advisory Board or similar committee		
C	I am a member of a Speaker's Bureau		
D	I am involved in research grants and funding from industry		
E	I am currently participating in or have participated in a clinical trial within the past two years		
F	I have received honorarium, consulting fees, salary, royalty, grant-in-aid or other monetary support received from or expected from the company		
G	I have ownership in a patent for a product referred to in the presentation or marketed by the company		
H	I am involved in the design of clinical studies concerning the use of products manufactured by the company		
I	I have other financial ties that should be declared		
	Affiliation Type (past 2 years) Related to content presented	Company/Organization(s)	If you think this might be perceived as biasing your presentation or a conflict of interest, how do you plan to manage this?
J	I have ownership or other interest in a clinic or private company		
K	My spouse or close family member(s) have commercial affiliation(s)		
L	I have relationships with government agencies, regulatory bodies, and not-for-profit agencies		

I am a: **Speaker** / **Planner** and **I do not have** any affiliations (financial or otherwise) with a commercial organization, OR
 I have/had an affiliation (financial or otherwise) with a commercial organization as noted above

I, _____, acknowledge that the above information is accurate. **Signature :** _____ **Date:** _____