UF Continuing Medical Education UNIVERSITY of FLORIDA

Full Disclosure Form

It is the University of Florida's policy to ensure balance, independence, objectivity and scientific rigor in all programs it provides. Everyone in a position to control the content of an educational activity must disclose all **relevant financial relationships** with commercial interests to the provider. The information you provide addresses several requirements of the national accreditation boards (ACCME, ACPE, etc.) regarding independence from commercial interests. This information must be disclosed to participants prior to the beginning of the activity. Lastly, all conflicts of interest must be resolved prior to the educational activity.

The ACCME defines "relevant" financial relationships as financial relationships in any amount occurring within the past 12 months that create a conflict of interest. (2.1) An individual who refuses to disclose relevant financial relationships will be disqualified from being a planning committee member, a teacher, or an author of CME, and cannot have control of, or responsibility for, the development, management, presentation or evaluation of the CME activity. (2.2)

Title of CME Activ	/ity:				
Date(s) of CME A	ctivity:				
Title of Presentat	ion(s): (if applicable)	i			
Name: (please pri	int)				
Role(s) in Activity	(Check ALL that app	ly):			
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 In the past 12 months, have you (or spouse/partner) had a financial relationship with a commercial organization that produces, markets, re-sells, or distributes health care goods or services consumed by, or used on patients, and which is the subject of this educational activity?

No – Answer no more questions! Please sign and date below.

Yes – Complete chart below and answer sections 2 and 3.

Affiliation/Financial Interest	Commercial Interest, Manufacturer or Service Provider
Grant/Research Support	
Consultant	
Speakers Bureau	
Stock Shareholder	
Other Financial or Material Support	

2. The Accreditation Council for Continuing Medical Education (ACCME) considers the relationships in the above chart to create conflicts of interest for anyone having control over the content of CME presentations. In this circumstance, ACCME requires that the CME Provider resolves this conflict and ensures that CME content is free of commercial bias. Please describe below the procedures you will use to help ensure that this educational presentation is scientifically balanced and free from commercial bias as is required by the ACCME.

Check ALL that apply:

No.

Comprehensive review of relevant medical literature

Presentation of evidence-based medicine guidelines

Review and presentation of guidelines and recommendations of national professional societies or medical organizations

- Peer review of presentation materials
- Other (please describe)
- 3. In light of your answers to question #2, will your presentation be scientifically balanced and free of commercial bias or influence? Check one: Yes No

Signature:		Date:				
Return this form to the UF CME Office Email: <u>cme-mail@ufl.edu</u> Fax: 352-733-0007						
OR to departmental contact, if provided: Name:	Email:	Fax:				