

Planner
Presenter

SIGNED VESTED INTEREST BIOGRAPHICAL DATA FORM

Name (with degrees and credentials):	
Street Address:	
City, State, Zip Code:	
Daytime Telephone:	
Fax:	
E-mail Address:	

Educational Background (include basic preparation through the highest degree held):

Degree	Year Awarded	Institution (Name, City, State)	Major Area of Study

Planners – describe your familiarity with the target audience:

Presenters – describe your expertise in this topic:

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Vested Interests of Faculty

Having an interest in an organization does not prevent a speaker from making a presentation, but the audience must be informed of this relationship prior to the start of the activity and any potential conflict must be resolved. In order to ensure balance, independence, objectivity and scientific rigor at all programs, the planners and faculty must make full disclosure indicating whether the planner, faculty or content specialist and/or his/her immediate family members have any relationships with sources of commercial support, e.g. pharmaceutical companies. Biomedical device manufacturers and/or corporations whose products or services are related to pertinent therapeutic areas. All planners, faculty and content specialists participating in CE activities must disclose to the audience any:

- A. Relationship with companies who manufacture products used in the treatment of the subjects under discussion.
- B. Relationship between the planner, faculty, or content specialist and commercial supporter(s) of the activity and/or
- C. Intent to discuss unlabeled uses of a commercial product, or an investigational use of a product not yet approved for this purpose.

All information disclosed must be shared with the audience either on the program handouts, advertising and/or audiovisual presentation.

- D. Is there a relationship with companies who manufacture products used in the treatment of the subjects under discussion:

Yes

No

If yes, please list the companies and type of relationship:

Relationship	Name of Commercial Company
Research Support	
Speakers' Bureau	
Consultant	
Shareholder	
Other Support	
Large Gift(s)	

E. Is there a discussion of unlabeled uses?

Yes

No

If yes, you must disclose this information during your presentation. How will you do this?

Verbal statement during the presentation

Information provided on handouts

Information provided in audiovisuals (slides, overhead, etc.)

Other. Please describe:

F. How have you resolved this conflict of interest?

The conflict has been discussed with the individual who is now aware of and agrees to our policy.

Presenter has signed a statement that says s/he will present information fairly and without bias.

An RN with minimum of BSN or designee will monitor session to ensure conflict does not arise.

Other. Please describe:

The signature of the presenter/planner completing this form is required. A faxed or electronically scanned handwritten signature are acceptable.

Signature

Date