

Speaker/Moderator Conflict of Interest Resolution Form

Conference Name

Speaker or  
Moderator Name

Potential Conflict of  
Interest Disclosed

Expert Reviewer  
Name (Course  
Director or Planner)

**Steps Taken:**

1. The Disclosed relationship is not relevant to the presentation (check and sign/ date the form).
2. The disclosed relationship is relevant to the presentation but it is not with an ACCME/ANCC defined commercial entity (check and sign/date this form).
3. The disclosed relationship is relevant and with a commercial entity (check and go question 4).

Prior to selecting an option below, please review the presentation for possible bias.

4. Presentation reviewed, no COI or commercial bias determined.  
Presentation will be limited to discussion of data and research. Another speaker without COI will close discussion by evaluating clinical implications and/or recommendations.  
Speaker has been asked to support presentation and cite recommendations based on "best available evidence".  
Planned presentation has been appropriately modified to be free of commercial bias. Discussion will be limited to generic names.  
Speaker/Moderator will be replaced.  
Proceed with speaker/presentation without credit designation.

Other

Expert Signature

Date

See page 2 for ACCME/ANCC definition of a commercial interest

ACCME/ANCC definition of a commercial interest: “any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients.”

Exceptions (These **do not** count as a commercial interest):

501-C Non-profit organizations (As long as they do not advocate for commercial interests.)

Government organizations

Non-health care related companies

Liability insurance providers

Health insurance providers

Group medical practices

For-profit hospitals

For profit rehabilitation centers

For-profit nursing homes

Blood banks

Diagnostic laboratories