

California Society of Addiction Medicine Disclosure of Financial Relationships

Name: _____

Content of Activity: _____

Date of Activity: _____

First, list the names of any entity producing, marketing, re-selling or distributing health care goods or services consumed by, or used on, patients, with the exemption of non-profit or government organizations with which you or your spouse/partner have, or have had, a financial relationship within the past 12 months. For this purpose we consider the financial relationships of your spouse or partner that you are aware of to be yours.

Second, describe what you or your spouse/partner received (ex: salary, honorarium etc). CSAM does NOT want to know how much you received.

Third, describe your role.

Commercial Interest	Nature of Relevant Financial Relationship (Include all those that apply)	
	What was received	For What Role?
<i>Example: Company 'X'</i>	<i>Honorarium</i>	<i>Speaker</i>
Complete		
I do not have any financial relationships with any commercial interests.		

Signature _____

Date _____

Example terminology

What was received: Salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit.

Role(s): Employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and 'other activities (please specify).

Financial relationships: Financial relationships are those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received, or expected. ACCME considers relationships of the person involved in the CME activity to include financial relationships of a spouse or partner.

If your disclosure status changes within a 12-month period prior to your presentation, you must submit a revised Disclosure Form. Financial relationships must be disclosed to learners at the time of the activity. Continuing education accreditation guidelines prohibit accepting any reimbursement (financial, gifts, or in-kind exchange) for this presentation from any source other than the accredited CME provider or its educational partner (or fiscal agent).