



## FOR SPEAKER: CONFLICT OF INTEREST DISCLOSURE FORM FOR CE ACTIVITY WITH TRIBUNE GROUP

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**Speaker Name:**

**Title of CDE Activity:**

**Activity Location: Online**

**Activity Date(s): (DATE OF BROADCAST OR PUBLICATION)**

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Tribune Group GmbH (TG) identifies the presence or absence of relevant financial relationships for all involved in our CE activities through the use of this standardized disclosure form.

ADA CERP considers that a conflict of interest may exist when an individual has an opportunity to affect the content of continuing dental education activities regarding products or services of a commercial interest with which he/she has a financial relationship.

All CE activities should be free of commercial bias and influence for or against any product, and the lecture-related educational materials, including a speaker's presentation, must not represent the interests of a financial supporter.

Carefully review the following information as it relates to your presentation.

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### **Presentation Content**

Please note the following presentation standards and ensure that your presentation is in compliance:

- Educational materials, such as slides, abstracts, and handouts cannot contain any advertising, trade name or product-group message.
- When discussing therapeutic options, please use only generic names. If it is necessary to use a trade name, then those of several companies must be used. In addition, should your presentation include discussion of any unlabeled or investigational use of a commercial product, you are required to disclose this at the time of presentation.
- Courses must have sound scientific content:
  - Clinical recommendations should be supported with references from scientific literature whenever possible.
  - Presenting clinical or technical contents must include a scientific basis for the content and an assessment of the risks and benefits.



- When scientific evidence is emerging or uncertain, the course should contain a description of the evidence available on the topic and information on any of the known risks and benefits related to applying the knowledge in practice.

**DISCLOSURE** (check one box below and complete as appropriate)

I, the undersigned, declare that neither I nor any member of my family have a financial arrangement or affiliation with any corporate organization offering financial support or grant monies for this continuing dental education program, nor do I have a financial interest in any commercial product(s) or service(s) I will discuss in the presentation.

OR

I, the undersigned, (or an immediate family member), have a financial interest/arrangement or affiliation with the corporate organization offering financial support or grant monies for this continuing dental education program, or I do have a financial interest in any commercial product(s) or services I will discuss in the presentation.

Having an interest in or an affiliation with a corporate organization does not prevent you from making a presentation, but the relationship must be made known to the audience. Failure to disclose or a false disclosure will require TG to remove you from the program and to identify a replacement for your participation.

**Financial Relationship:**

- Grants/research support
- Consultant
- Stock Shareholder
- Honorarium
- Employee
- Other financial or material support. Describe nature of relationship:

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### **Disclosure of Conflicts of Interest to CE Activity Participants**

Please add a disclosure with a slide at the beginning of your presentation. The intent of this disclosure is to provide participants with information on which they can make their own judgments. Please use the relevant format from these examples:

- *Financial disclosure: Dr. John Smith has no relevant financial relationships to disclose.*
- *Financial disclosure: Dr. Mary Brown has received an honorarium from Colgate-Palmolive Company.*
- *Financial disclosure: Dr. Pam Park is a paid consultant for Colgate-Palmolive Company.*



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## Product Promotion

Product promotion must not interfere with your presentation and may not be a condition of support for any educational activity. Product promotion may not be offered to the learner while are engaged in the educational activity.

By completing and signing this disclosure form, you declare that you understand and abide by the strict guidelines outlined above. You commit that you will correctly identify the presence or absence of any financial relationship that may constitute a potential conflict of interest for presenters of the proposed CE activity.

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## AGREED

**The undersigned agrees to the terms of this agreement.**

Name:

Signature:

Date: