

A GLOBAL CELEBRATION *of* DERMATOLOGY
VANCOUVER, CANADA | June 8-13, 2015

www.derm2015.org

DISCLOSURE OF CONFLICTING RELATIONSHIPS
FREE COMMUNICATIONS ABSTRACT SUBMISSIONS

Identifying and Resolving Conflicts of Interest

POLICY. Attendees to the 23RD World Congress of Dermatology (WCD) expect that presentations will be based on objective and ethical clinical and scientific evidence, and that they will be free of commercial bias. Diagnostic and treatment methods in dermatology often involve medications, tools, or devices that are commercially available or are in commercial development. The World Congress of Dermatology requires that any person in a position to influence or control content of a WCD activity must disclose **all** relevant financial relationships with commercial interests. All Conflicts of Interests must be identified and resolved prior to presenting at the WCD. Please submit this form as soon as possible, but **at least by January 31, 2015** to allow for resolution of any conflicts of interest. Conflict of interest disclosures must also be made in a slide or poster at the time of the presentation during the WCD.

Conflict of interest disclosures will be posted on the website database prior to the WCD in order to promote transparency. Attendees will also be asked to indicate on their session evaluation forms whenever they perceived that a speaker or presenter has either exhibited commercial bias in his/her presentation and/or failed to adequately disclose a relevant commercial interest.

Persons refusing to disclose relationships according to this policy will not be eligible to participate as a planner (i.e. Chair or Co-Chair), speaker or presenter in any WCD session.

Author / Co-Author's Name: _____

Check all that apply: Chair or Co-Chair Faculty Author of poster or free communication

Abstract Number) _____

Abstract Title _____

DEFINITIONS:

Commercial Interest: Any proprietary entity producing, marketing, selling / re-selling, or distributing health care goods or services consumed by or used for patients, with the exception of non-profit or government organizations.

Relevant Relationship: A financial relationship is "relevant" if it pertains to the activity's content matter, including any related health care products or services to be discussed or presented. If a conflict of interest exists it must be resolved. Relevant financial relationships or the lack of such relationships will be disclosed to learners prior to the beginning of the educational activity.



DECLARATIONS:

In the 24 month period from July 2013-June 2015 have you or an immediate family member had any financial relationships with a commercial interest that have a direct bearing on the subject matter of the WCD session in which you are participating?

- No** If no please skip table below
 Yes

IF YOU ANSWER “YES” TO ABOVE QUESTION, Please complete the table below

Type of Affiliation/ Financial Interest	Name(s) of Commercial Interest(s)	Relationship (check one)	
		Active	Terminated
Advisory Board or Panel		<input type="checkbox"/>	<input type="checkbox"/>
Consultant		<input type="checkbox"/>	<input type="checkbox"/>
Directorship		<input type="checkbox"/>	<input type="checkbox"/>
Grants/Research Support		<input type="checkbox"/>	<input type="checkbox"/>
Salary, Contractual Services		<input type="checkbox"/>	<input type="checkbox"/>
Speaker’s Bureau		<input type="checkbox"/>	<input type="checkbox"/>
Stock/Shareholder (self-managed)		<input type="checkbox"/>	<input type="checkbox"/>
Other Financial or Material Support (Royalties, patents, etc.)		<input type="checkbox"/>	<input type="checkbox"/>

If you have relevant relationships/conflicts, please resolve these conflicts through one or more of the following actions. Please consult with the session Chair or the WCD 2015 organizers (abstract@derm2015.org) if you require assistance or guidance.



ATTESTATION:

All comprehensive disclosures will be printed in the Onsite Program. Speakers must include a disclosure slide in their presentation that lists their relevant disclosure(s), and make a verbal disclosure at the beginning of their presentation. Written disclosures must be included in all poster presentations. If no financial relationships exist, this must also be disclosed to the World Congress of Dermatology and its attendees.

All scientific research referred to, reported or used in support or justification of a patient care recommendation will conform to the generally accepted and ethical standards of experimental design, data collection and analysis.

I attest that all recommendations involving clinical medicine that I provide will be based on evidence that is accepted within the medical profession as adequate justification for their indications and contraindications in the care of patients and that all scientific research referred to or reported or used in this CME activity, in support of justification of a patient care recommendation will conform to the generally accepted standards of experimental design, data collection and analysis.

I attest that when I discuss specific health care products or services, I will use generic names to the extent possible. If I need to use trade names, I will use trade names from several companies when available, and not just trade names from any single company.

I agree that if I present research funded by a commercial company, the information presented will be based on generally accepted scientific principles and methods, and will not promote the commercial interest of the funding company.

I will not utilize any materials/slides that have been created by a commercial entity and agree that my presentation will not include promotional messages or corporate logos.

I acknowledge that all educational outcome data collected from my presentation (inclusive of Audience Response data) are the sole property of the WCD. I attest that I will not use these data for any purpose without the express written permission of the WCD

Disclosure Slide: A disclosure slide will be necessary for all oral presentations. If there are no relevant commercial interest relationships this must be disclosed as well. For posters this declaration must be included printed in a separate section of the poster.

Signature: _____

Date: _____

By checking this box and typing my name in the signature box above, this constitutes my electronic signature and approval of all the information above.