



Resolution of Conflicts of Interest with CME Educational Content Policy and Procedures

POLICY:

As an accredited CME provider, ASOPRS is responsible for demonstrating that our CME content/educational programs are planned independent of commercial influence. The following areas must be free from the control of commercial interest*

- (a) Identification of CME needs;
- (b) Determination of educational objectives;
- (c) Selection and presentation of content;
- (d) Selection of all persons and organizations that will be in a position to control the content of the CME;
- (e) Selection of educational methods;
- (f) Evaluation of the activity.

*The ACCME defines a commercial interest as “any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. The ACCME does not consider providers of clinical service directly to patients to be commercial interests - unless the provider of clinical service is owned, or controlled by, an ACCME-defined commercial interest.”

Control/Influence

ASOPRS educational activities are planned by a variety of individuals, and some of those individuals may have financial relationships with commercial interests. Controllers/influencers may include: Program Committee; CME Subcommittee; Executive Committee; Other Committee Members; Abstract Reviewers; Abstract Authors

Updated June 2020

Approved by the Executive Committee June 25, 2020

podium, poster, video); Invited Faculty; Moderators; and anyone else who takes the podium/is on stage.

ASOPRS will conduct a process through which relevant financial disclosures from anyone in a position to control or influence educational content are evaluated for conflict of interest, and through which the conflict of interest—if determined to exist—is resolved.

PROCEDURE:

Step 1: Collection of Financial Disclosures

ASOPRS financial disclosure form is required from anyone in the position to influence CME content. Financial relationships in the last [12 months](#) with a commercial interest whose products or services are related to the CME content must be reported. Participation in the CME program is not allowed if a disclosure form is not received. If anyone in the position to control content is later revealed to not have disclosed a relevant financial relationship, they may be barred from presenting at or planning the content of all future meetings for two or more years.

Disclosures for all groups are collected and reviewed at the appropriate time in the planning cycle (before planning, speaking, etc. takes place).

The **Program Committee and CME Subcommittee members** are required to submit financial disclosures before official planning takes place for the next year's meetings (typically before the planning meeting at the end of the previous year).

Other Committee members are required to submit disclosures before their programming development begins or prior to their contributions being considered (e.g. Awards Committee, Executive Committee).

Abstract Reviewers are required to submit disclosures prior to the assignment of abstracts for review.

Abstract Authors (podium, poster, video) are required to submit disclosures at the time of submitting abstracts.

Invited Faculty are required to submit disclosures when their participation is confirmed.

Moderators are required to submit disclosures prior to their duties being confirmed.

Step 2: Review/Identification of Relevant Financial Disclosures

All disclosures are compiled in the COI Spreadsheet.

Program Committee and CME Subcommittee members' disclosures are collectively reviewed by both committees and relevant disclosures are identified and resolved at the beginning of the first planning meeting.

Members of the CME Subcommittee may not have financial relationships with related industry.

- Committee meeting agendas list all disclosures of the members, and the committee is reminded of resolution

Updated June 2020

Approved by the Executive Committee June 25, 2020

measures (e.g. recusal) at the start of the meeting.

- Committee meeting participants are required to update their financial disclosures if there are any changes.
- If a CME Subcommittee member develops a relevant financial relationship, s/he will be asked to step down from the committee.

It is ASOPRS policy to nominate and confirm Program Chairs with no financial relationships with industry related to the field, who agree to remain free of financial relationships with related industry for their term of 4 years. (Approved by the Executive Committee June 2020.)

Other Committee's relevant disclosures are identified and resolved before considering the influence or contribution.

Abstract Reviewer disclosures are reviewed by the Program Chairs and CME Subcommittee.

Abstract Authors (podium, poster, video), Invited Faculty and Moderators

The CME Subcommittee reviews the financial disclosures of each author/faculty/moderator in context of the abstract/outline/session assigned.

Moderators disclosures are reviewed by the Program Chairs and CME Subcommittee.

Relevant/Non-Relevant Disclosures

ASOPRS disclosure form states *"If an individual is uncertain about what might constitute a potential financial conflict of interest, they should err on the side of full disclosure."* Therefore, non-relevant financial relationships (i.e. the products or services of the commercial interest are *not* related to the CME content they are in the position to control), may be disclosed. The CME Subcommittee determines if the financial relationship is relevant.

If the financial relationship is *not* related to the content within the control of the person disclosing, it is not considered relevant and no conflict of interest exists.

A relevant relationship may include, but is not limited to, receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (stock and stock options, excluding diversified mutual funds), grants, contracts, or other financial benefit directly or indirectly from the commercial interest. **The relevant relationships include those of the individual's spouse/partner.**

The use of employees of ACCME-defined commercial interests as presenters, faculty, planners or in other roles where they are in a position to control the content of accredited CME **is prohibited by the ACCME, except in the situations specified here.** It is ASOPRS policy that employees of ACCME-defined commercial interests can have no role in the planning or implementation of CME activities related to their products or service, **without exception. No abstracts will be accepted, nor will any speakers be invited, that include any**

Updated June 2020

Approved by the Executive Committee June 25, 2020

employee involvement in the abstract/talk, regardless if it is in a role specified by the ACCME as acceptable.

If the financial relationship of a person in a position to control CME content **is determined to be relevant** (i.e. the products and services of the commercial interest **are** related to the CME content they control), the process moves to resolution.

Step 3: Resolution of Relevant Conflicts of Interest

The CME Subcommittee is responsible for resolving conflicts of interests by implementing one of the mechanisms below.

Resolution for Abstract Authors, Invited Faculty

A1. Abstract Authors and Invited Faculty with relevant financial relationships will be contacted by the assigned member of the CME Subcommittee (email or phone) to discuss potential bias, balance, evidence-based content or other indicators of integrity and absence of bias. Discussion points include:

- Prove the integrity of your presentation/abstract.
- Prove that clinical recommendations are evidence-based and free of commercial bias.
- In what ways is your presentation/abstract/participation balanced?

The author/faculty must demonstrate understanding and compliance through written response. The communication is reviewed by the CME Subcommittee to determine if the conflict of interest has been resolved, or if further action is needed.

If the CME Subcommittee feels the efforts above are not effective in resolving the conflict of interest, the following may be implemented:

A2. The author/faculty is removed or recused from participating in the parts of the educational activity that relate to the commercial products or services.

A3. The author/faculty revises his/her role in the educational activity so that it is no longer a conflict.

A4. CME hours are not awarded for that portion or all of the education activity

A5. Other (details documented in the COI spreadsheet).

Resolution for Abstract Reviewers

B1. Abstract Reviewers may not participate in reviewing any abstracts related to their financial disclosure.

If the CME Subcommittee feels the efforts above are not effective in resolving the conflict of interest and maintaining an unbiased process, the following may be implemented:

B2. The person with the conflict of interest doesn't participate as an abstract reviewer

B3. CME hours are not awarded for that portion of the education activity

B4. Other (documented in the COI spreadsheet)

Updated June 2020

Approved by the Executive Committee June 25, 2020

Resolution for Moderators:

C1. Moderators may not moderate any session related to their financial disclosure.

If the CME Subcommittee feels the efforts above are not effective in resolving the conflict of interest and maintaining an unbiased process, the following may be implemented:

- B2.** The person with the conflict of interest doesn't participate as a moderator
- B3.** CME hours are not awarded for that portion of the education activity
- B4.** Other (documented in the COI spreadsheet)

Resolution for Program Committee, Executive Committee, Other Committees

D1. If a financial relationship is deemed relevant from any committee member with control of content, the member will be excluded—from participating in any discussions, votes, decisions or actions related to their financial disclosure.

Beginning in 2020, nominated and confirmed Program Chairs shall not have any financial relationships for the duration of their 4 year term.

Members of the CME Subcommittee may not have financial relationships with related industry.

Programmatic content suggestions from any other committee members who have a financial relationship related to that content will not be considered.

Step 4: Executive Committee Approval of COI Resolution Process

The Executive Committee will review and approve the completed COI Resolution Spreadsheet once the resolution process is completed by the CME Subcommittee. Any EC member with a financial relationship with related industry will be recused from the process.

Step 5: Identification of Trade Name Use in Presentations

ACCME STANDARD 5.2 Presentations must give a balanced view of therapeutic options. Use of generic names will contribute to this impartiality. If the CME educational material or content includes trade names, where available trade names from several companies should be used, not just trade names from a single company.

The CME Subcommittee will review presentation information provided by speakers during the COI process to identify trade names. When necessary, trade names will be replaced with generic names.

Step 6: Preventing and Identifying Commercial Bias from the Podium

The Conflict of Interest Resolution Policy and Procedures is published in the meeting Syllabus, with the list of relevant financial disclosures of faculty/authors. The financial disclosures found **not** relevant will also be listed separately.

The CME Subcommittee and/or Moderators will review the slide presentations submitted by speakers with relevant disclosures prior to presentation. If it is determined the content does not follow policy, the slide(s) or

Updated June 2020

Approved by the Executive Committee June 25, 2020

material will be removed, and the CME Subcommittee may consider removal of the speaker from the program.

The live presentations are evaluated for bias by Moderators and CME Subcommittee members. If bias is believed more likely than not to be present, a statement will be made by the Moderator or a member of the CME Subcommittee to bring the bias to the attention of the learners. The incident will be reviewed after the meeting by the CME Subcommittee, who will decide if the bias is substantiated. If so, the speaker will be excluded from presenting at or planning the content of future meetings for two or more years.

The results of the meeting evaluation (attendee feedback) evaluated for claims of bias from the podium. If such claims are made, the CME Subcommittee will review the feedback and decide if the bias is substantiated. If so, the speaker will be excluded from participating in meetings in any role for two or more years.

Updated June 2020

Approved by the Executive Committee June 25, 2020