Faculty/Presenter Disclosure

• **Faculty:** [Speaker’s name]

• **Relationships with financial sponsors:**
  
  – Any direct financial relationships including receipt of honoraria: PharmaCorp ABC, Canadian Cancer Org.
  
  – **Memberships on advisory boards or speakers’ bureau:** XYZ Biopharmaceuticals Ltd.
  
  – **Patents for drugs or devices:** Widget ABC
  
  – **Other: financial relationships/investments** Employee of XXY Hospital Group, consultant for Company X
Disclosure of Financial Support

• This program has received financial support from [organization name] in the form of [describe support here – e.g. an educational grant].

• This program has received in-kind support from [organization name] in the form of [describe support here – e.g. logistical support].

• **Potential for conflict(s) of interest:**
  – [Speaker/Faculty name] has received [payment/funding, etc.] from [organization supporting this program AND/OR organization whose product(s) are being discussed in this program].

  – [Supporting organization name] [developed/licenses/distributes/benefits from the sale of, etc.] a product that will be discussed in this program
Mitigating Potential Bias

• [Explain how the potential sources of bias identified in slides 1 and 2 have been mitigated by the scientific planning committee, including any potential conflicts identified for committee members].

• Refer to “Quick Tips” document for information on how this can be done