

Attestation Form
for
Course Directors and Course Planners

Please indicate your understanding of and willingness to comply with each statement below. If you have any questions regarding your ability to comply, please contact the activity coordinator as soon as possible.

Agree	Disagree	N/A	
<input type="checkbox"/>	<input type="checkbox"/>		I have disclosed to MCG CE all relevant financial relationships and I will disclose this information to learners verbally (for live activities) and in print.
<input type="checkbox"/>	<input type="checkbox"/>		The choice of content and/or presentation of the information included in the activity agenda will promote quality or improvements in healthcare and will not promote a specific proprietary business interest of a commercial interest. Content for this activity, including any presentation of therapeutic options, will be well-balanced, evidence-based and unbiased.
<input type="checkbox"/>	<input type="checkbox"/>		I have not and will not accept any honoraria, additional payments or reimbursements beyond that which has been agreed upon directly with MCG.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Clinical recommendations will be based on evidence that is accepted within the profession of medicine as adequate justification for their indications and contraindications in the care of patients. All scientific research referred to, reported or used in CME in support of justification of a patient care recommendation will conform to the generally accepted standards of experimental design, data collection and analysis.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If I have been trained or utilized by a commercial entity or its agent as a speaker e.g., speaker's bureau for any commercial interest, the promotional aspects of that presentation will not be included in any way with this activity, nor will it affect the content of this activity.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	If I am presenting 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 have carefully read and considered each item in this form. My signature below attests to my compliance with these requirements.

Signature _____ Date _____

Printed Name _____