

CONSEIL QUÉBECOIS DE DÉVELOPPEMENT PROFESSIONNEL CONTINU DES MÉDECINS



Faculté de médecine Director, Continuing Professional Development (CPD) Office

## POTENTIAL CONFLICT OF INTERESTS DISCLOSURE FORM

The participants in a continuing medical education (CME) or continuing professional development (CPD) activity should know in advance of any affiliation or financial interest that could influence the presentation of a speaker, a workshop leader or a resource person. The intention of disclosure is not to prevent a presenter with a potential conflict of interests from speaking, but to inform the audience in advance of the possible affiliations or financial interests. Since these facts are known openly, the participants can render an informed judgement on the content of the presentation itself.

<u>Affiliation</u> means, for example, acting as an advisory board member for a pharmaceutical company; <u>financial</u> <u>interest</u> means, for example, accepting an invitation, gratuity or remuneration for services rendered, royalties or research funds from a business corporation, or holding a financial interest in an enterprise.

Declaration of the resource person (speaker, facilitator, scientific committee member or others)	
I currently have, or I have had in the past two years, an affiliation with/or financial interest of any nature in a business corporation, or I receive remuneration, royalties or research grants from a business corporation : no $\mu$ yes	
the XYZ company, I have been speaker for company	am an advisor for the XYZ company, I have been invited recently bv XYZ, I am receiving research funds from the XYZ company, I am he name(s) of the business corporation(s) (pharmaceutical or other)
Type of affiliation	Name of the corporation Period
NAME (block letters): MINDRU MIYAZATO Title and date of educational activity: ICS 2015 ADDURE MEETING, MENTREAL, CANADA 6-9 QUIOBER 2015 Signature Man Myordo Date 2/16/2015	
Responsibility of the organizer	
speakers, facilitators, scientific committee members available to the participants by a notation in the co	ional activity to have this form completed by each resource person : s or others. The organizer shall ensure that the information is made urse syllabus and that potential conflicts of interests (or the absence ing of his presentation (oral and visual disclosure with slide).
<ul> <li>For the sake of equity and transparency, the organize</li> <li>The resource person did not declared any potent</li> <li>The resource person declared a potential conflict</li> </ul>	

- The resource person declared a potential conflict of interests (in this case, the nature of the conflict will be described as mentioned by the resource person); or
- The resource person did not return the potential conflict of interests disclosure form.