



WRITTEN AGREEMENT FOR COMMERCIAL SUPPORT

The Carver College of Medicine is committed to presenting CME activities that promote improvements or quality in healthcare and are independent of the control of commercial interests. As part of this commitment, the Carver College of Medicine has outlined in this written agreement the terms, conditions, and purposes of commercial support for its CME activities. Commercial Support is defined as financial, or in-kind, contributions given by a commercial interest¹, which is used to pay all or part of the costs of a CME activity.

Title of CME Activity _____

Activity Location _____ **Activity Date** _____

Name of Commercial Interest ⁽ⁱ⁾ _____

Amount of Unrestricted (Direct or In-kind) Educational Grant \$ _____

¹ The ACCME defines a Commercial Interest as any proprietary entity producing health care goods or services, with the exemption of non-profit or government organizations and non-health care related companies. The ACCME does not consider providers of clinical service directly to patients to be commercial interest.

TERMS, CONDITIONS, AND PURPOSES

Independence

1. This activity is for scientific and educational purposes only and will not promote any specific proprietary business interest of the Commercial Interest.
2. The Accredited Provider is responsible for all decisions regarding the identification of educational needs, determination of educational objectives, selection and presentation of content, selection of all persons and organizations that will be in a position to control the content of the CME, selection of education methods, and the evaluation of the activity.

Appropriate Use of Commercial Support

3. The Accredited Provider will make all decisions regarding the disposition and disbursement of the funds from the Commercial Interest.
4. The Commercial Interest will not require the Accredited Provider to accept advice or services concerning teachers, authors, or participants or other education matters, including content, as conditions of receiving this grant.
5. All commercial support associated with this activity will be given with the full knowledge and approval of the Accredited Provider. No other payments shall be given to the director of the activity, planning committee members, teachers or authors, joint sponsor, or any others involved with the supported activity.
6. The Accredited Provider will upon request, furnish the Commercial Interest documentation detailing the receipt and expenditure of the commercial support.

Commercial Promotion

- 7. Product-promotion material or product-specific advertisement of any type is prohibited in or during the CME activity. The juxtaposition of editorial and advertising material on the same products or subjects is not allowed. Live or enduring promotional activities must be kept separate from the CME activity. Promotional materials cannot be displayed or distributed in the education space immediately before, during or after a CME activity. Commercial Interests may not engage in sales or promotional activities while in the space or place of the CME activity.
- 8. The Commercial Interest may not be the agent providing the CME activity to the learners.

Disclosure

- 9. The Accredited Provider will ensure that the source of support from the Commercial Interest, either direct or "in-kind," is disclosed to the participants, in program brochures, syllabi, and other program materials, and at the time of the activity. This disclosure will not include the use of a trade name or a product-group message. The acknowledgment of commercial support may state the name, mission, and clinical involvement of the company or institution and may include corporate logos and slogans, if they are not product promotional in nature.

The Commercial Supporter and the Carver College of Medicine agree to abide by all requirements of the Accreditation Council for Continuing Medical Education (ACCME) Updated *Standards for Commercial Support of Continuing Medical Education (2004)*

Agreed by Authorized Representatives

Name of Accredited Provider: <u>Roy J. and Lucille A. Carver College of Medicine</u>		
Tax ID 426004813	Contact Name _____	Phone _____
Email _____	Title _____	Fax _____
Authorized Signature _____		Date _____
 Name of Commercial Interest: _____		
Tax ID _____	Contact Name _____	Phone _____
Email _____	Title _____	Fax _____
Authorized Signature: _____		Date _____
 Name of Educational Partner: _____		
Tax ID _____	Contact Name _____	Phone _____
Email _____	Title _____	Fax _____
Authorized Signature _____		Date _____

Please direct questions, comments, and inquiries to: CME Division/The University of Iowa Carver College of Medicine/100 CMAB/Iowa City, IA 52242. 319/335-8599 (voice) 319/335-8327 (fax)
<http://www.medicine.uiowa.edu/cme/> (web)