Disclosure Form - Page 1

Complete Questions 1 – 3 listed below.

Complete pages 2 and 3 only if you answered Yes to questions 2 and 3 listed on Page 1.

In compliance with American Speech-Language Hearing Association's Continuing Education Board's Requirements, This Speech-Language-Hearing Association requires program planners and instructional personnel to disclose information regarding any relevant financial and non-financial relationships related to course content prior to and during course planning.

Based on the information provided, the state association will engage the program planner/instructional personnel in a guided interview process which seeks to understand how the relevant financial or nonfinancial relationship *may influence the content of the course*.

Name:						
Circle Applicable Items:	Presenter?:	Yes	No	The Program Planner?:	Yes	No
Course Title:						
Question 1: Are you in co	<u>ompliance wi</u>	th HII	PAA Req	uirements?		
			-	l Accountability Act (HIPAA), we a		
•	•		•	acy of their patients/clients by re		-
	-		t identifi	ers in course materials without t	ne pati	ent's/client's
knowledge and written a	uthorization.					
Yes, I am in compliance	with these po	licies	:	(INITIAL HERE)		
Question 2: Do you have	anv relevant	t finar	ncial rela	ationships to disclose?		
_	-			ips in which the individual benefi	ts by r	eceiving a
	•			aking fee, consulting fee, honorar		_
		_		hip interest, excluding diversified		
other financial benefit. F	inancial relati	onshi	ps can a	lso include "contracted research"	where	e the
institution gets the grant	and manages	s the f	funds an	d the individual is the principal o	r name	ed
investigator on the grant	. Other items	consi	dered re	elevant financial relationships: If y	ou wil	l be
		_		s studies from your placement of	-	-
referencing a product/bo	ook in which y	ou re	ceive ro	yalties. <i>Please see page 2 for a co</i>	mplete	e listing.
Do you have relevant fin	ancial relatio	nship	s to disc	close? No Yes, if y	es com	plete page 2
Question 3: Do you have	any relevant	t non-	financia	I relationships to disclose?		
Relevant non-financial r	elationships a	are the	ose relat	ionships that might bias an indivi	idual in	ncluding any
personal, professional, p	olitical, institu	utiona	ıl, religio	us or other relationship. Relevan	t non-f	inancial
relationships may also in	clude persona	al inte	erest, cul	tural bias, having a child or family	y mem	ber affected
by the topic you are pres	enting. <i>Please</i>	e see _l	page 3 f	or a complete list of items to cons	ider.	
Do you have relevant no	n-financial re	elatio	nships to	o disclose? No Yes, if y	es com	nplete page 3
I attest that the informat	ion in this dis	closui	re is accı	urate at the time of completion a	nd I ag	ree to notify
				anges to this information betwee	_	•
presentation/event. If yo	ou are a prese	nter,	please p	repare the first slide of your pres	entatio	on as your
disclosure slide. If receiv	ing payments	for a	n honor	arium, travel support, etc. please	do <u>no</u>	<u>t</u> list the
• •	•	•		eiving (honorarium, travel suppo		•
	relevant finar	ncial r	elationsl	hips to disclose, you are still requ	ired to	prepare a
slide and indicate such.						
Signature					Date	e

Financial Relationship Disclosure Form (Page 2)

If any of the items listed below are selected as applicable, you must answer "Yes" to Question 2 on Page 1.

Copy this page as many times as you need to complete information regarding each of your relevant financial relationships. Program Planners/Instructional personnel have a relevant financial relationship if that relationship could influence the information presented in the course and could be perceived as a conflict of interest by learners.

Planner/Presenter name:	
Financial relationship with (name of Company/Organiza	ation):
Date form completed:	
My Presentation will include:	
Yes, I will be referencing where I work in my Preser	ntation
Yes, I will be referencing actual case studies from n	ny place of employment
Yes, I will be discussing a specific product and/or de Product/Drug Name: Will mention other similar products in your prese	
What was received? (Check all that apply)	
Salary	☐In kind
Consulting fee	Grants
☐Intellectual property rights	☐Gift
☐Speaking fee	Ownership interest (e.g., stocks, stock
Royalty	options or other ownership interest excluding
Honoraria	diversified mutual funds)
☐Hold patent on equipment	
Other financial benefit (please describe):	
For what role? (Check all that apply)	
Employment	
Management position	
Teaching and speaking	
Board membership	
Ownership	
Consulting	
Membership on advisory committee or review pane	ls
Independent contractor (including contracted resear	rch)
Other activities (please describe):	

Non-Financial Relationship Disclosure Form (Page 3)

If any of the items listed below are applicable, you must answer "Yes" to Question 3 on Page 1.

Copy this page as many times as you need to complete information regarding each of your relevant non-financial relationships. Program Planners/instructional personnel have a relevant non-financial relationship if that relationship could influence the information presented in the course and could be perceived as a conflict of interest by learners.

Planner/Presenter name:
Non-financial relationship with (name of Company/Organization/Institution):
Date form completed:
What is the nature of the non-financial relationship? (complete all that apply)
I have a family member or child that is affected by the topic of my presentation
Personal, please describe:
Professional, please describe:
Political, please describe:
Institutional, please describe:
Religious, please describe:
Personal interest, please describe:
Bias, please describe:
Other relationship, please describe:
For what role?
☐ Volunteer employment
☐ Volunteer teaching and speaking
☐Board membership
☐ Volunteer consulting
☐ Volunteer membership on advisory committee or review panels
Other volunteer activities (please describe):