



American
Association of
Neurological
Surgeons

RESOLUTION OF CONFLICT OF INTEREST FORM
For AANS CME Activities

The *Resolution of Conflict of Interest Form* is designed to assist AANS staff and volunteer physician leaders responsible for the development of CME activities in 1) determining if a conflict of interest exists; and 2) documenting the actions undertaken to resolve all potential conflicts of interest with any individual in a position to influence and/or control the content of CME activities. **This form must be completed for all individuals returning a disclosure listing financial relationships with commercial interests.** There are a variety of mechanisms available to resolve a potential conflict of interest and those completing this form are asked to document as well. This form should then be inserted in the appropriate CME activity file that includes all documentation to ensure compliance with ACCME Essentials, Elements, and Standards.

PLEASE COMPLETE THE FOLLOWING:

NAME OF INDIVIDUAL WITH THE EDUCATIONAL ASSIGNMENT:

NATURE OF THE EDUCATIONAL ASSIGNMENT:

(eg, CME planning group member, author, faculty, etc)

NAME OF THE CME ACTIVITY (DATES/LOCATION IF APPLICABLE)

NAME OF INDIVIDUAL SUBMITTING THIS FORM:

DATE _____

Signature: _____

___ Upon review of the disclosure form it was determined that the financial relationship does not relate to the educational assignment. **IF SO, YOUR FORM IS NOW COMPLETE.**

OR IF NOT, PLEASE PROCEED

Upon review of the disclosure form, it was determined that a potential conflict may exist and the following mechanism(s) were used to resolve that potential conflict of interest:

1. ___ **We used a peer review process* for enduring material CME (including online), live activity, journal CME, etc.** (process by which materials are peer reviewed or judged to ensure the data support the conclusions before they are accepted for Presentation or publication). If necessary, faculty will be required to revise content based on recommendations from the peer review.
2. ___ **Based on previous history with this individual, I can attest that no commercial bias exists in his/her presentation.** The presentation has been evaluated in the past and no commercial bias was detected.

3. ___ **We altered the control over the content by:**

___ choosing someone else to control that part of the content

___ changing the focus of the CME activity so that it does not relate to the products or services of the commercial interest

___ changing the content/topic of the individual's educational assignment so that it does not relate to the products or services of the commercial interest

___ limiting the individual's content to a report without practice recommendations (if individual was funded by a commercial company to perform research, the individual's presentation may be limited to research data and results)

___ limiting the role of the individual to reporting practice recommendations based on formal structured review of the literature with the inclusion and exclusion criteria stated (evidence-based)

___ other (please describe)

4. ___ **The individual was able to document the 'best available evidence' to support his/her recommendations. (eg, individual provided adequate references)**

(Suggestion: The individual may state to the learners, "the best available evidence in the literature is at the level of < > and supports the following conclusions < >.

Integrating what this literature says with what the new study has revealed, my recommendations on what we should do now are < >".

5. ___ **The individual decided to change his/her relationship with the commercial interest, eliminating the financial relationship and thus, any potential for conflict of interest.**

6. ___ **We chose not to use the individual and identified a replacement.**

7. ___ **Other (please describe)**

*Peer review must ensure that 1) all practice recommendations involving clinical medicine are based on evidence that is accepted within the profession of medicine as adequate justification for indications and contraindications in the care of patients; and 2) all scientific research referred to, reported or used in the CME activity in support or justification of patient care recommendations conforms to the generally accepted standards of experimental design, data collection and analysis.

INSERT IN CME ACTIVITY FILE