

CME Content Review Form

(For speakers/authors who have financial relationships with CME ineligible companies)

Instructions: Use this form to document how a speaker/author's financial relationships with CME ineligible companies have been mitigated prior to the CME activity.

Speaker/Author Name:	
Activity Title:	
Description of the CME Content Reviewed:	
Reviewer:	Date of Review:
Reviewer Expertise for this CME Content:	

REVIEWER ATTESTATIONS: Please read the following attestations.
By signing you agree to abide by the policies and regulations addressed in this form.

- This CME content is educational **for physicians and free from commercial bias.**
- This CME content **serves to maintain, develop, or increase the knowledge, skills and professional performance and relationships that a physician uses to provide services for patients, the public, or the profession.**
- This CME content is **fair and balanced, and any clinical content supports safe and effective patient care.**
- Any recommendations for patient care within this CME content are **based on current science, evidence and clinical reasoning, and give a fair and balanced view of all diagnostic and therapeutic options.**
- Any scientific research referred to, reported, or used in support or justification of the patient care recommendations in this CME content **conforms to the generally accepted standards of experimental design, data collection, analysis, and interpretation.**
- Any **new or evolving topics** addressed within this CME content **are clearly identified** without advocating for practices that are not based on current science, evidence, and clinical reasoning.
- This CME content is **free of marketing or sales of all products/services** including logos, trade names, or product group messages **and does not actively promote or sell products/services** that serve professional interests.

If you have any concerns about your ability to agree with the policies above, please discuss those with the Office of CME.

By checking the boxes above and signing below, I confirm that the CME content described above complies with the CME policies checked above.

REVIEWER SIGNATURE

(Type or Sign Name):

DATE: