GUIDANCE REGARDING DISCLOSURE FOR CME ACTIVITIES
Speaker/Moderator/Author

<table>
<thead>
<tr>
<th>Today's Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Course Director/Coordinator: Alan K. Louie, MD / Yolanda Cervantes</td>
</tr>
<tr>
<td>CME Activity Title and Date: 3rd Annual Innovations in Psychiatry and Behavioral Health: Virtual Reality and Behavior Change – October 6-7, 2017</td>
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The Stanford University School of Medicine is accredited by the Accreditation Council for Continuing Medical Education (ACCME®). Stanford Center for CME expects that every CME activity certified for credit will be in full compliance with the ACCME Criteria, Policies, and Standards for Commercial Support of Continuing Medical Education (http://www.accme.org/)

Stanford Center for CME has implemented a mechanism to identify and resolve any relevant conflicts of interest for all individuals in a position to control the content of an educational activity. This process must be completed prior to the commencement of the activity. Disclosure to learners must also be provided prior to the commencement of the activity. This includes the course director(s), planners, speakers, authors, panel members, moderators, content validation reviewer(s), etc. **If an individual refuses to disclose relevant financial relationships to SCCME, s/he will be disqualified from participating in the CME activity.**

As faculty selected to present/participate in this CME activity, we ask that you review the definitions below and complete the Disclosure and Attestation Forms that follow this cover sheet.

If you have any questions, please do not hesitate to contact us at the telephone number below.

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**ACCME Definitions**

**Conflict of Interest:** Circumstances create a conflict of interest when an individual has an opportunity to affect CME content about products or services of a commercial interest with which he/she has a financial relationship. The ACCME considers financial relationships to create actual conflicts of interest in CME when individuals have both a financial relationship with a commercial interest and the opportunity to affect the content of CME about the products or services of that commercial interest.

**Commercial Interest:** Any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients with the exemption of non-profit or government organizations and non-health care related companies. The ACCME does not consider providers of clinical services directly to patients to be commercial interests (e.g. liability/health insurance providers, group medical practices, hospitals, nursing homes, rehabilitation centers).

**Financial Relationships:** Those relationships you currently have or had during the last 12 months from in which you benefit by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g., stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research which also includes research funding where the institution gets the grants and manages the funds and you are the principal or named investigator on the grant), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received, or expected. **ACCME® considers relationships of the person involved in the CME activity to include financial relationships of a spouse or partner. The ACCME deems employment by a commercial interest to be a non-resolvable conflict for the employee unless the topic of the presentation is unrelated to products or services provided by the commercial entity. See ACCME Policy for clarification** [www.accme.org/education-and-support/video/tutorials/ensuring-independence-role-employees-accme-defined-commercial](http://www.accme.org/education-and-support/video/tutorials/ensuring-independence-role-employees-accme-defined-commercial).
Speaker/ Moderator/Author CME Disclosure Form

This form must be completed prior to the CME activity for any individual (speaker, presenter, moderator, panel member, and author) in a position to control the content of the CME activity.

Title of CME Activity: 3rd Annual Innovations in Psychiatry and Behavioral Health: Virtual Reality and Behavior Change

CME Presentation/Module Title(s): (add numbers as needed)

#1
#2
#3

Date(s) of CME Activity: October 6-7, 2017

Your role in this CME Activity: Speaker ☐ Moderator ☐ Panel Member ☐ Author ☐ Other (___________________)

Full Name and Degree: ____________________________

Position at Your Organization: Faculty ☐ Fellow ☐ Resident ☐ Student, specify: ____________________________ ☐ Other:

Do you or your spouse/partner have, at present or within the past 12 months, financial relationships with any commercial interest that provides products or services that are RELEVANT TO THE COURSE CONTENT for which you are responsible? (Non-profit or governmental organizations [e.g. NIH] are not considered commercial entities)

Yes. (Complete table below, then sign and date. Complete Attestation on next page.)

No. (Sign and date below. Complete Attestation on next page.)

Check Appropriate Boxes

Type of Financial Relationship

Include spousal/partner relationships (WITHIN THE PAST 12 MONTHS)

Name of Company

(WITHIN THE PAST 12 MONTHS)

Relevant to which title(s) above?

☐ Self
1a. Employment by commercial interest (If the content of your presentation will relate to the business line or products of this employer, you may not provide content for this CME activity. The ACCME considers this a non-resolvable conflict of interest).

☐ Spouse/Partner
1b. Spouse employment by commercial interest

☐ Self
2. Patent royalty

☐ Spouse/Partner
3. Intellectual property rights

☐ Self
4. Advisory Board(s) member with monetary and /or other compensation (e.g., travel expenses)

☐ Spouse/Partner
5. Fees for speakers’ bureaus received directly from commercial interest

☐ Self
6. Contracted research which also includes research funding where the institution gets the grants and manages the funds, and you are the principal or named investigator on the grant.

☐ Spouse/Partner
7. Ownership interest (stocks, stock options, or other ownership interest excluding diversified mutual funds)

☐ Self
8. Consulting fees

☐ Spouse/Partner
9. Other (please specify):

I represent that the foregoing information is complete and truthful, and I agree to update this form within 30 days if I acquire any new financial relationships.

Signature of Reporting Individual: ____________________________

Date of Submission: ____________________________

Stanford Interdepartmental Mail Code: 5190, Phone: 650-497-8554  Fax: 650-497-8585

May 2017
**Speaker/ Moderator/Author CME Attestation Form**

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**Directions:** Read the ACCME Content Validation Statement below, then **read and check ALL** of the following boxes to **attest** to your understanding of and willingness to comply with the corresponding statement; sign and date form.

**ACCME Content Validation Statement:** All recommendations involving clinical medicine in a CME activity must be based on evidence that is accepted within the profession of medicine as adequate justification for their indications and contraindications in the care of patients. All scientific research referred to, reported or used in CME in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection and analysis.

| **☐** | **Best Available Evidence and ACCME Content Validation Statement:** All clinical recommendations that I make for patient care as part of my CME activity materials will be based on the best available evidence and the content will be in compliance with ACCME’s Content Validation Statement. |
| **☐** | **Sources and Limitations of Data, Off-Label Use Disclosure:** To the extent practical, recommendations involving clinical medicine in this CME activity will be substantiated by peer-reviewed sources. I will make meaningful disclosure to the learners if products or procedures I discuss are off-label, unlabeled, experimental, and/or investigational (not FDA approved), and any limitations on the information that I present, such as data that are preliminary or that represent ongoing research, interim analyses, and/or unsupported opinion. |
| **☐** | **Scientific Integrity:** All scientific research referred to, reported or used in support or justification of a patient care recommendation will conform to generally accepted standards of experimental design, data collection and analysis. |
| **☐** | **Free of Commercial Bias:** CME content presented to learners will be free of commercial bias. No product, service, or therapeutic option will be over-represented when comparing competing products, services, and therapeutic options. When appropriate, generic names or trade names from several companies will be used. |
| **☐** | **Payments:** I have not and will not accept an honorarium, additional payment, or reimbursements except for payments from Stanford University School of Medicine or one of Stanford’s authorized representatives for my participation in this activity. I understand that all payments to me will be made in compliance with the Honoraria Policy for Stanford Continuing Medical Education Activities. |
| **☐** | **Serve the Public Interest:** Any instructional content I make for this CME activity will be done to serve the public interest by improving the quality of healthcare. To the best of my ability, I will not let any personal financial relationships influence this selection process. |
| **☐** | **Presentations must give a balanced view of therapeutic options:** Use of generic names will contribute to this impartiality. If your presentation includes trade names, where available trade names from several companies should be used, not just trade names from a single company. Logos from commercial interests are never permitted on any course materials including presentation slides. Your presentation/materials will be evaluated by learners for fair balance, objectivity and scientific rigor. |
| **☐** | **Content Validation Review:** I understand that my CME activity presentation/materials may be prospectively peer-reviewed for fair balance and validation of content and may require editing. |
| **☐** | **HIPAA Compliance:** I will remove all patient identifiers (name, birth date, address, phone number, medical record number, account number, social security number, etc.) from my presentation materials. I will not use identifiable photographs of patients, unless I have obtained written patient permission. |

**Signature:** ________________________________  **Date:** ________________________________
Presenter’s Authorization

Thank you for agreeing to be a presenter in Stanford School of Medicine’s (“Stanford”) continuing medical education (“CME”) program. Use this form to provide the authorization that will allow us to offer your materials through live presentation by you and through online posting and streaming of recordings of your presentation and the materials included in or associated with your presentation (the “Presentation.”)

The deadline for submitting this Authorization is August 15, 2017.

Accreditation
Whenever Stanford presents, publishes or re-publishes your presentation in the ways described in this Authorization, it will fairly and accurately credit you as the presenter.

Recording, Capture and Publication of Presentation Materials
As part of its educational mission, Stanford facilitates the creation of, and captures or records for later publication, a wealth of scientific and educational presentations. Because Stanford promotes continuous improvement in both patient health care and medical education, Stanford is constantly cultivating new sources of information, analysis and other materials for CME presentation, and new ways of distributing and publishing these materials. You authorize and agree to Stanford’s recording and capture of all aspects and elements of your Presentation, and to Stanford’s reproduction, distribution and publication of these materials in all media formats now known or subsequently invented. You agree that Stanford can edit its recordings and copies of your Presentation, combine them with other works to create compilations and collections, and otherwise create and publish derivative works based on your Presentation. This authorization is perpetual and irrevocable, for activities carried out by Stanford anywhere.

Stanford’s Ownership of its Recordings, and Your Right to Publish Elsewhere
We recognize and appreciate the significant contributions of our presenters, and we support your ability to present at other educational events and to publish your original research through other forums and publications. What Stanford obtains through this Authorization is not ownership of your underlying research or documents, but ownership of the recordings and copies that Stanford makes for the purpose of later publication through its CME program. You hereby assign to Stanford all right, title and interest that you may have in and to any recordings of your Presentation in any capture or recording format (the “Recordings”), including, without limitation, all copyright in the Recordings. Stanford agrees that by obtaining copyright in the Recordings it does not obtain ownership of the copyright in the slides, posters, handouts, visual aids, charts and other written materials that you use or present in connection with your Presentation (collectively, “Written Materials”). These Written Materials may be published by you elsewhere as you see fit. However, we encourage all presenters to be familiar with the publication policies of the journals in which they might wish to subsequently publish material related to their presentations.

Your Authority to Make Your Presentation.
You are required to obtain appropriate written permission supporting your presentation itself and this authorization from the rights holders of any published or copyrighted text, illustrations,
tables, or other information or materials that you include in your presentation or related written materials. Depending on what is included, this may require permissions from third parties, and, if your materials were prepared by more than one person, your co-authors, collaborators, and contributors. You must also obtain appropriate releases and authorizations (including HIPAA authorization if applicable) from any patients or other individuals whose information may be included in the presentation. You also represent and warrant that: (i) your Presentation, including all Written Materials, is original, does not infringe the copyright, proprietary or personal rights of, any person, firm or corporation, does not improperly disclose confidential or private information, and is not libelous, defamatory or otherwise in violation or breach of laws, regulations, duties or contractual obligations; and (ii) no other person or entity (except for those from whom you have lawfully used materials) has or will have any interest in your presentation and that you are free to enter into this Authorization and are under no legal obligation or prior commitment which is inconsistent with this Authorization. You agree to take responsibility for claims brought against Stanford relating to your presentation and your Written Materials.

☐ U.S. Federal Employees (check if appropriate): You affirm that the Written Materials have been or will be prepared solely by an officer or employee of the U.S. Government as part of his/her official duties; therefore such Written Materials are not subject to U.S. copyright. You also confirm the warranties above.

Permission to Advertise and Promote You and Your Presentation
Stanford may promote your Presentation, recordings of your Presentation, and other presentations and recordings with notices, announcements, advertising and other promotional material. So long as such promotional materials are fair, accurate, and professionally presented, Stanford may use your name, job title, voice, likeness and recognizable features in such promotional materials. You represent and warrant that any information, pictures, or other materials that you provide for use in any announcements or other promotional materials are fair, accurate and may be used for such purpose without misleading others or violating, breaching, or infringing the rights of others.

By signing below, you confirm that you are the person whose name is set forth above, that you have read and understand this Authorization form completely, you agree to its terms, that you have the right to give this Authorization, and that this is intended to be your signature confirming your agreement in a digital format.

_________________________________________  ____________________________
Name (please print)                            Signature       Date

_________________________________________
Title

_________________________________________  ____________________________
Signature       Date
1. Presenters are encouraged to use third-party pre-licensed materials. Images should be validated through Google Images Licensing Filter Noncommercial Reuse [or Reuse with modification if you are editing images]. (The licensing filter is on the Google Images results page under search tools).

2. Except with written permission from the copyright holder, presentations shall not incorporate music.

3. Except with written permission from the copyright holder, presentations shall not use content from popular media, such as New Yorker or Dilbert cartoons, or images or video taken from popular movies, television, or YouTube postings.

4. Presentations shall not use images known to be owned by or managed by commercial photographers, their agents, or by image archives such as those of Getty Images, the Bettmann Archive, or museums.

5. Presentations must accurately accredit and attribute all incorporated third party materials, and must do so in the immediate field of presentation. (For example, accreditation must be on the same page or slide as the first occurrence of the incorporated material, and not in a separate endnote, acknowledgement, or bibliography.)

6. Presentations must not use logos or trademarks, although factual references to companies, products and services in generic font are permitted; however, educational materials that are part of a continuing medical education activity cannot contain any advertising, trade names or product group messages.

7. Presentations shall not use the names, images, biographies, or other recognizable features of patients without prior express written permission. (Data or materials that are ‘anonymized’ or otherwise modified to prevent recognition of individuals are permitted.)
### Stanford Center for Continuing Medical Education (SCCME) Privacy Requirements

**Stanford Faculty**

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**Directions:** Read and check ALL of the following boxes to attest to your understanding of and willingness to comply with the corresponding statements; sign, date, and submit completed form.

It is the policy of Stanford to maintain the privacy of patients’ Protected Health Information (PHI) and to abide by all state and federal privacy laws, including the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

**By signing below, I acknowledge the following:**

- **Patient PHI** (such as in photographs or through written descriptions, case studies, etc.) should not be included in any presentation unless a written, HIPAA-compliant authorization has been obtained from the patient (or his or her representative) prior to the submission of the presentation to Stanford.

- **I understand that:**
  - Patient images that are de-identified may be used without patient authorization – this means that all identifiers must be removed or redacted/blocked out, including but not limited to: patient name, medical record number (MRN), date of birth (DOB).
  - Potential identifiers also include: full face photographic images and any comparable images.
  - If your presentation includes de-identified patient facial images, the facial images should be de-identified by blurring or blackening out the entire face. If a portion of the face must be shown, the facial image should be cropped so the patient’s eyes and nose are blocked out; if the patient is still identifiable, then more of the face should be blurred or blackened out.
  - Images of internal body part(s) taken during a procedure using specialized equipment – arthroscopy, endoscopy, colonoscopy, bronchoscopy, laparascopy, etc. are typically de-identified, provided there is no reasonable basis to believe that the images could be used to identify the individual.
  - MRI images of the head may provide information comparable to that of photographic images since a patient may be recognized via rendering of the skin surface, and therefore are considered identifiable.
  - Photos of people retrieved from the internet must be de-identified.

- **I represent and warrant that if any patient PHI, including but not limited to: written case studies, photographs, diagnostic images, audio recordings and/or video recordings is contained in the presentation, that I have previously obtained a HIPAA-compliant written authorization signed by the patient allowing the use, disclosure and publication of the patient’s PHI in this presentation and/or related materials.**

- **I understand that the Stanford Privacy Office or SCCME may request from me copies of any signed patient authorization(s) at any time before or after the presentation. I agree to fully cooperate with any such request and provide a copy of such authorization(s) to the Privacy Office and/or SCCME in a timely manner.**

- **I represent and warrant that my presentation and accompanying materials comply with the terms of this Agreement and with University privacy policies. I understand that I may be subject to disciplinary action for failing to comply with University privacy policies in connection with this presentation and the accompanying materials.**

**Signature:**

**Date:**