

AACC CONFLICT-OF-INTEREST POLICY AND DISCLOSURE FORM

AACC desires to maintain open and transparent discussion and decisions on all matters of interest to the association and its members. All officers, members of the board of directors, division officers, local section officers, committee members, and committee chairs are required to complete a conflict-of-interest disclosure form at the beginning of each year of service to the association.

All potential conflicts as described below must be disclosed. Disclosure is intended to ensure transparency. The existence of a potential conflict does not preclude service to AACC. However, when a topic for which an individual has a potential conflict is under discussion, the individual is expected to declare the potential conflict, and at the discretion of the presiding individual, abstain from discussion and/or voting.

Information on disclosed interests will be kept on file at the AACC office. Disclosed interests will be reviewed by AACC Executive Office staff at headquarters. Any disclosed interests deemed to be concerning will be brought to the attention of the chair of the committee or presiding individual, who will determine whether the conflict is sufficient to preclude participation in the activity, or in discussion, and/or in voting on a given topic. Committee chair and other presiding individuals' forms will be reviewed by the President if secondary review is required. The President's disclosure form will be reviewed by the Treasurer. Information on disclosed commercial interests or ineligible companies as defined by the Accreditation Council for Continuing Medical Education (ACCME) submitted by committee members involved in planning, selecting, developing, or presenting educational content will also be reviewed by AACC's Professional Education team, and if appropriate, the Continuing Medical Education (CME) Subcommittee, to ensure compliance with ACCENT accreditation standards and/or ACCME policies and standards (<https://accme.org/standards>).

Individuals are expected to protect the confidentiality of AACC information they may receive as a result of service on a committee or other leadership entity. Individuals must not, without appropriate authorization, disclose to any third party any confidential information or document to which they obtain access by virtue of service to AACC. This includes, but is not limited to, discussions of documents relating to strategies or plans, documents marked confidential, financial or marketing information, or unpublished data. Individuals are expected to inform AACC of any changes in potential conflicts of interest that may occur during the period in which they serve on a committee or other leadership entity.

AACC CONFLICT-OF-INTEREST DISCLOSURE FORM

Name Employer:

Position with Employer:

To Add Additional Employers:

Name Employer:

Position with Employer:

Name Employer:

Position with Employer:

Part 1: Disclosure of Financial Relationships

In this section, please disclose any financial relationships with a commercial or non-commercial interest that have occurred within the past 24 months. Disclosure means transparency, not necessarily a conflict of interest. There is no minimum financial threshold; we ask that you disclose all financial relationships, regardless of the amount, with a commercial or non-commercial interest. You should disclose all financial relationships regardless of the potential relevance of each relationship to the education. Even if a product is not specifically referenced or discussed during the activity, individuals must disclose their financial relationship(s) with the commercial or non-commercial interest.

Please note that a commercial interest may also be defined as an ACCME ineligible company. ACCME defines an ineligible company as an is any entity whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. For specific examples of ineligible companies visit <https://accme.org/accreditation-rules/standards-for-integrity-independence-accredited-ce/eligibility>.

- 1) Check either the Yes or No box. If you respond No, proceed to the next question.
 - 2) If you respond Yes, under Entity type the name of any applicable company, organization, or other type of entity (commercial or non-commercial) for that category, one entity per line.
 - 3) If you have more entities to list than will fit under each category, please use the blank page at the end of the form.
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A. Consultancy(ies), Advisory Boards, etc.

Entity(ies)

Yes

No

B. Lecture Fees Paid by Entity (Honoraria, Speakers Bureau, etc.)

Entity(ies)

Yes

No

C. Expert Witness

Entity(ies)

Yes

No

D. Grants (received or pending), Including Contracted Research

Support from an ineligible company, commercial interest, or non-commercial funding, e.g., industry, a government source such as the NIH, or a foundation or other for-profit or non-profit source. Note, the grant may or may not include salary support or consulting fee. Also include donated goods or services, e.g., reagents or instruments donated for a project.

Entity(ies)

Yes

No

E. Patents or Royalties Received or Pending

Entity(ies)

Yes

No

F. Ownership or Beneficiary of Stock (including options but excluding mutual funds)

Entity(ies)

Yes

No

G. Items or Benefits of Substantial Value, e.g., free trips, accommodations, sports tickets, appliances, electronic devices, etc.

Entity(ies)

Yes

No

H. Other Relevant Financial Interests For recording any other financial interests not listed above.

Entity(ies)

Yes

No

I. Spouse, Domestic Partner, and Business Partners

List your knowledge of any financial relationships your spouse, domestic partner, or business partners have that

could pose an actual or perceived conflict of interest.

Entity(ies)

Yes

No

Part 2: Leadership in Other Associations

List association affiliations below, if at present, or within the past 12 months, you, any spouse, domestic partner, or business partner have had a leadership position (officer, director, or committee or other subdivision chair) with another clinical laboratory, medical or pharmaceutical-related association OR you know you will have or expect to have in the near future such an affiliation.

Entity(ies)

Yes

No

Part 3: Duty to Respect Confidentiality

I will not, without appropriate authorization, disclose to any third party any confidential information or document to which I obtain access by virtue of my service to AACC. This includes, but is not limited to, discussions or documents relating to strategies or plans, documents marked "confidential," financial or marketing information, or unpublished data. If I have any reasonable doubt about whether particular information or a particular document is confidential, I will not make disclosure unless I have first clarified the situation with appropriate AACC officials or staff and obtained authorization.

Part 4: Disclosure of Conflicts

If a matter arises during a discussion with respect to which I may have a potential conflict of interest, I will disclose the nature of the conflict (or potential conflict) when the matter arises. Unless permitted to do so by the presiding individual (or other AACC official), I agree not to participate in any vote (or, if the presiding individual or other AACC official so decides, in any discussion) on any such matter.

Attestation

I attest that I have read and understand AACC’s Conflict-of-Interest Policy, and I agree to protect the confidentiality of AACC information as required by the policy. I further attest that I have made, herein, the requested disclosures to the best of my knowledge and recognize that I must make disclosure of any outside interests that might bias any action that I might take or any statement that I might make in connection with my service to AACC. I attest that I will inform AACC of any changes in conflicts of interest that may occur during the period in which I serve on a committee or other leadership body.

I recognize that if I fail to make the disclosures set forth in Parts 1 and 2 above or honor the commitments in Parts 3 or 4, I shall be subject to removal from the body of AACC on which I serve, and I shall forfeit any eligibility for indemnification that I may have under the bylaws of AACC or otherwise. If I have any questions about AACC’s Conflict-of-Interest Policy or about this Disclosure Statement, I shall raise those questions with the Chief Executive Officer of AACC.

Typing your name and the date below will serve as your electronic signature.

Name: Date:

To submit, please hit the Submit button in the upper right-hand corner of the form.

If you click on File in the upper left-hand corner of the page, you can click on Save As to save a copy of the form or Print to print a copy of the form.

Other Entity(ies)

Approved March 18, 2022