**Symposium Planning Resources**

**Version 4-13-2020**

 

**Safeguards Against Commercial Bias**

The GOG Foundation, Inc. CME Program requires that CME activities and presentations do not promote a specific proprietary business interest or be perceived as commercially bias. Planners and Chairs must ensure that all speakers and key participants in CME activities complete a Financial Disclosure form identifying relevant financial relationships with commercial interests that could create a conflict of interest with respect to the specific CME activity. If a conflict of interest exists for an individual, it must be satisfactorily resolved before the activity so that commercial bias does not occur. We will disclose this disclosure information to learners before the educational activity.

**Strategies to help ensure valid CME content include:**

* Providing a balanced view of therapeutic options
* Describing the evidence base and the strength of the evidence used to support clinical recommendations
* Ensuring that educational materials do not contain product advertising or product-group messages
* Using generic drug names whenever practicable. (If educational materials include
* trade names, trade names from several companies should be used whenever available)

Thank you for participating in this educational activity.

**Speaker Disclosure of Financial Relationship(s)**

**Meeting/Session:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **\_\_\_\_\_\_\_\_\_** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ROLE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

In order to comply with the ACCME’s Updated Standards for Commercial Support, The GOG Foundation, Inc., as an accredited provider must ensure that anyone who is in a position to control the content of the education activity has disclosed to us all financial relationships with any commercial interest within the past 12 months (see below for definitions).

**Should it be determined that a conflict of interest exists as a result of a financial relationship you may have, you will be contacted and methods to resolve the conflict will be discussed with you prior to the start of activity. In addition, all affirmative disclosures must be revealed by a slide at the beginning of the presentation.**  **Failure or refusal to disclose or the inability to resolve the identified conflict will result in the withdrawal of the invitation to participate.**

 In the past 12 months, I have had relevant financial relationships with the following commercial interests **(Complete table below)**

 In the past 12 months, I have not had relevant financial relationships with commercial interests

 In the past 12 months, I have not had relevant financial relationships with commercial interests

If you’ve checked box#1, please list the names of proprietary entities producing heal care good or services, with the exemption of non-profit or government organizations and non-health care related companies with which you or your spouse/partner have, or have had, a **relevant** financial relationship within the past 12 months. For this purpose, we consider the relevant financial relationships of your spouse or partner that you are aware of to be yours.

Explain what you or your spouse/partner received (Ex: salary, honorarium, fee, etc…)

|  |  |
| --- | --- |
| **Commercial Interest** | **Nature of Relevant Financial Relationship****(Include all those that apply)** |
| **What was received:** Salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest, (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. | **My Role(s):** Employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and ‘other activities (Please specify) |
| ***Example: Company ‘X’*** | ***Honorarium*** | ***Speaker/Ad hoc/Consultant….*** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Glossary of Terms**

**Commercial Interest**

The ACCME defines a “commercial interest” as any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. (Revised)

**Financial relationships**

Financial relationships are those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g., stocks, 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), 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.

**Relevant financial relationships**

ACCME focuses on financial relationships with commercial interests in the 12-month period preceding the time that the individual is being asked to assume a role controlling content of the CME activity. ACCME has not set a minimal dollar amount for relationships to be significant. Inherent in any amount is the incentive to maintain or increase the value of the relationship. The ACCME defines “’relevant’ financial relationships” as financial relationships in any amount occurring within the past 12 months that create a conflict of interest.

**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.

**Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PLEASE RETURN THE COMPLETED FORM TO THE CME DEPARTMENT BY DUE DATE TO** msmall@gog.org **or fax to 301-261-3972.**

**Symposium “Title” Agenda**

**Date, Location**

**Program Co-Chairs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***(DRAFT- Please edit or adjust times/breaks/panels according to your program’s schedule)***

**PROGRAM DESCRIPTION:**

**Program Chairs:**

The Summer/Winter \_\_\_\_\_ GOG Foundation, Inc. Educational Symposium is titled “title” with noted Oncologists and Scientists serving as speakers and moderators. The targeted audiences are members and non‐members of the NRG research teams to include: Gynecologic Oncologists, Medical Oncologists, Radiation Oncologists, Pathologists, Patient Advocates and others engaged in oncology research and/or clinical practice; Oncology Nurses, Nurse‐practitioners, and other interested Allied Health professionals.

The speakers will focus their presentations on….(Please provide program description)

**LEARNING OBJECTIVES:**

**Following this activity, participants will be better able to**:

1.

2.

3.

**Presentation Draft Agenda**

|  |  |  |
| --- | --- | --- |
| **Time** | **TOPIC** | **SPEAKER/MODERATOR** |
| **7:00 AM** | **REGISTRATION** |  |
| **8:00 AM** | **WELCOME** | **Program Chairs** |
| **8:05-9:40 am** | **SESSION I:**  | **Moderator** |
| **8:05-8:15 am** | **Title** | **Speaker** |
| **8:15-8:25 am** |  |  |
| **8:25-8:45 am** |  |  |
| **8:45-9:05 am** |  |  |
| **9:05-9:25 am** |  |  |
| **9:25-9:40 am** | **Panel Discussion; Questions and Answers** | **All** |
| **9:40-9:55 am** | **BREAK** |  |
| **9:55-11:30 am** | **SESSION II**  | **Moderator:**  |
| **9:55-10:05 am** | **Title** | **Speaker**  |
| **10:05-10:25 am** |  |  |
| **10:25-10:45 am** |  |  |
| **10:45-11:05 am** |  |  |
| **11:05-11:25 am** |  |  |
| **11:25-11:40 am** | **Panel Discussion/Questions and Answers** | **All** |
| **11:40 am-12:30 pm** | **BREAK (Lunch)** |  |
| **12:30-1:45 pm** | **SESSION III:** | **Moderator:**  |
| **12:30 – 12:40 pm** | **Title** | **Speaker** |
| **12:40 – 1:00 pm**  |  |  |
| **1:00 – 1:30 pm** |  |  |
| **1:30 – 1:40 pm** |  |  |
| **1:40-1:55 pm** | **Panel Discussion/Questions and Answers** | **All** |

**A GUIDE TO WRITING LEARNING OBJECTIVES**

**Learning Objectives are statements that communicate the intent of an educational activity.**

**Every CME activity must have one or more learning objective(s).** The number of objectives is reflective of the amount and diversity of information obtained from the needs assessment.

**Learning Objectives must relate to the needs identified by the planning committee.** These needs may include the development of either knowledge or new treatment.

**Before writing objectives, it may be helpful to ask a few questions of the players involved:**

a. CME Committee: What course of action or outcome or change is indicated by the needs assessment?

b. Intended Audience What would you like to take away from this presentation?

 What do you need that will enhance your practice?

c. Proposed faculty What information can you share to enhance the intended audience’s understanding and competency?

**Start your objective with an action verb that specifies what behavior or outcome the learner should have gained after completing this activity.**  The following list reflects the action verbs typically associated with the development of learning objectives (Rosof, CME *Primer*)

***To formulate educational objectives that:***

1. Communicate **INFORMATION** choose:

|  |  |  |  |
| --- | --- | --- | --- |
| * Count
 | * Define
 | * Identify
 | * List
 |
| * Recognize
 | * Relate
 | * Select
 | * Tabulate
 |

1. Communicate **COMPREHENSION** choose:

|  |  |  |  |
| --- | --- | --- | --- |
| * Classify
 | * Compare
 | * Describe
 | * Estimate
 |
| * Explain
 | * Locate
 | * Restate
 |  |

C. Communicate **APPLICATION** choose:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| * Apply
 | * Complete
 | * Develop
 | * Examine
 | * Interpret
 |
| * Order
 | * Predict
 | * Restate
 | * Treat
 |  |

1. Communicate **ANALYSIS** choose:

|  |  |  |  |
| --- | --- | --- | --- |
| * Appraise
 | * Contrast
 | * Criticize
 | * Debate
 |
| * Differentiate
 | * Question
 | * Separate
 | * Summarize
 |

1. Communicate **SYNTHESIS** choose:

|  |  |  |  |
| --- | --- | --- | --- |
| * Arrange
 | * Assemble
 | * Detect
 | * Formulate
 |
| * Generalize
 | * Integrate
 | * Specify
 | * Validate
 |

1. Communicate **EVALUATION** choose:

|  |  |  |  |
| --- | --- | --- | --- |
| * Assess
 | * Critique
 | * Estimate
 | * Judge
 |
| * Rank
 | * Rate
 | * Recommend
 |  |

1. **IMPART SKILLS** choose:

|  |  |  |
| --- | --- | --- |
| * Demonstrate
 | * Diagram
 | * Hold
 |
| * Measure
 | * Palpate
 | * Write
 |

1. **CONVEYS ATTITUDES** choose:

|  |  |  |
| --- | --- | --- |
| * Consider
 | * Exemplify
 | * Reflect
 |

**Most learning objectives are introduced by stating: “Following this activity (lecture, workshop, session, etc.) the participants will be better able to”**

**Learning Objectives:**

**Following this activity, participants will be better able to**: