

2024 Annual Spring Scientific Convention Battle House Renaissance Hotel Mobile, AL April 11<sup>th</sup> – 14<sup>th</sup>, 2024

# PRELIMINARY SPEAKER INFORMATION

## **PRESENTATION TITLE(S):**

**COURSE DESCRIPTION:** 

Preferred date/time of presentation:□Friday Morning□Friday Afternoon□Saturday Morning□Saturday Afternoon

Alternate date/time of presentation:		
<ul><li>Friday Morning</li><li>Friday Afternoon</li></ul>	<ul><li>Saturday Morning</li><li>Saturday Afternoon</li></ul>	
□ Friday Afternoon	□ Saturday Afternoon	

## **SPEAKER CONTACT INFORMATION:**

First / Last Name	Credentials
Company / Clinic	
Mailing Address	
City/State/Zip	
Mobile Phone	E-mail

MSPMA | P.O. Box 296 | Madison, MS 39130 | www.mspma.net

# **BIOGRAPHICAL DATA**

Year	Institution		
ployer / (	Clinic	Title	Description
		Year Institution Year Institution	

## **LEARNING OBJECTIVES**

Objectives	Time Frames	Audiovisual Needs	<b>Evaluation Tool</b>
List the educational objectives and corresponding content. Content is in outline form and specific.	Provide time frame for each objective.	List audio visuals needed for each presenter.	Select what evaluation method will be used to evaluate this activity:
1.			
2.			
3.			
4.			

# AUDIO VISUAL REQUIREMENTS:

Standard LCD projector and screen will be provided for your lecture. Please see the following:

- Please bring a jump drive with presentation
- If you need additional AV equipment please indicate below:

### **Disclosure of Relevant Financial Relationships with Commercial Interests**

Name:	
Title of Activity:	
Date of Activity:	

**First**, list the names of any entity producing, marketing, reselling or distributing health care goods or services, consumed by, or used on, patients with which you 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.

Second, describe what you or your spouse/partner received (ex: salary, honorarium etc). MsPMA does NOT want to know how much you received.

Third, describe your role.

	Nature of Relevant Financial Relationship (Include all those that apply)		
<b>Commercial Interest</b>	What was received	For What Role?	
Example: Company 'X'	Honorarium	Speaker	
I do not have any relevant financial relationships with any commercial interests.			

### SIGNATURE

Date

### Example terminology

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.

**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).

### **Glossary of Terms**

### **Commercial Interest**

MsPMA defines a "commercial interest" as any entity producing, marketing, re-selling or distributing health care goods or services consumed by, or used on, patients.

### 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. MsPMA considers relationships of the person involved in the CME activity to include financial relationships of a spouse or partner.

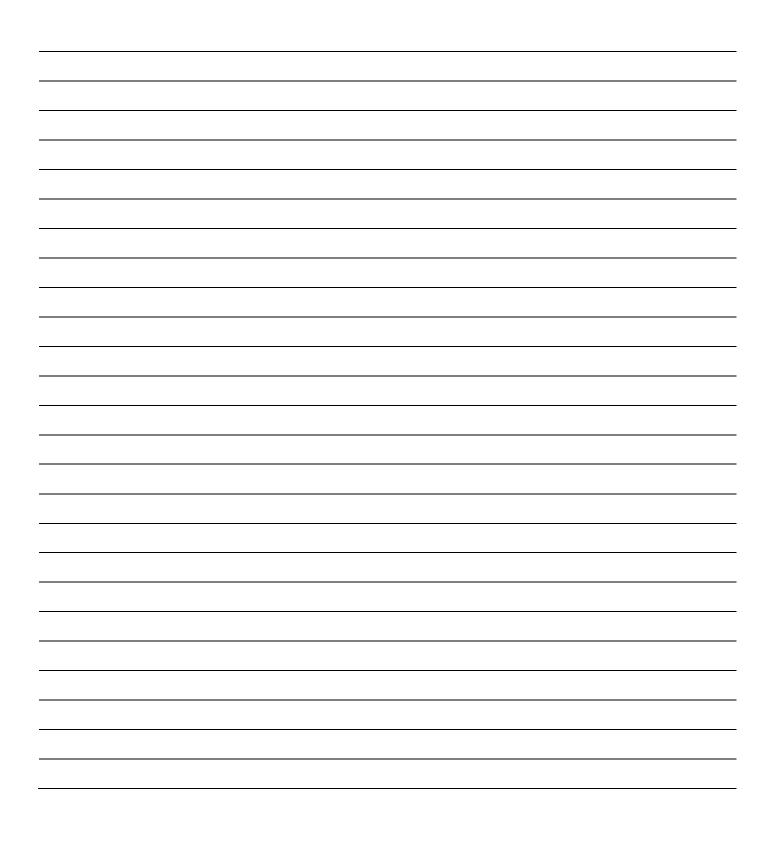
#### **Relevant financial relationships**

"Relevant' financial relationships" are 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 CPME content about products or services of a commercial interest with which he/she has a financial relationship.

Please provide a short introduction about yourself to be included in the Convention Book:



PLEASE USE THIS PAGE IF YOU NEED EXTRA SPACE