**Session Presentation Worksheet for Open Discussion**

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| **RSS Number** |  |

All material presented at a CME activity is expected to be fair balanced and free of any commercial bias. In particular, unpublished content must be scrutinized carefully to determine that it conforms to accepted standards of experimental design, data collection and analysis. Moreover, the chair or independent reviewer must critically review the conclusions inferred from the studies so that patient treatment recommendations represent the standard of practice within the medical profession in the United States.

For each session, documentation that the material presented met the following **criteria**\*:

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| The content of the presentation(s) does not promote or unfavorably present the product or service of a pharmaceutical or medical device company. |
| This presentation provides a balanced view of therapeutic options that includes pharmacological, invasive, surgical or non-pharmacological approaches. |
| Generic names for pharmaceutical/medical device products or services are used. |
| All the recommendations involving clinical medicine in this CME activity are 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 this CME activity in support or justification of a patient care recommendation conforms to the generally accepted standards of experimental design, data collection and analysis. |
| If an off-label or non-approved use of a drug or medical device is mentioned, the slide on which it appears indicates that it is off-label or non-approved use. |

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| Date | **Name** of **presenter or who selected** the cases or journal article. The **moderator** may also be named. | **ALL disclosures** of those identified to the left were **obtained and announced PRIOR** to the start of the talk? **Indicate how announced** (select all that apply): | Relevant Financial Interest to the topic? **Y/N** | Was the above criteria\* met by all? **Y/N** | **Initials** of Chair/ Reviewer for Sessions |
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| **Financial:** - Was an educational grant from industry obtained for this conference?  Yes  No  - Were separate display fees collected?  Yes  No  *If yes to either*, please see the document titled “Industry Support Processing” on the CME website.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Chair / reviewer signature Date |

***PLEASE NOTE: Without the financial section, the RSS chairperson/moderator’s signature of verification above and submission of all required documentation, specifically disclosure, the attendees’ credits cannot be recorded.*** 09/2015