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| **Independence and Disclosure Requirements** |
| **All ASRA Pain Medicine leaders must disclose the following:**   * Financial or other relationships (see definition below) * Compensated and uncompensated   + Level A- Uncompensated/Volunteer   + Level B- $1-$1000 compensation   + Level C- $1001-10,000 compensation   + Level D- $10,001-$25,000 compensation   + Level E-$25,001-$50,000 compensation   + Level F- $50,001-$100,000 compensation   + Level G- $100,001-$500,000 compensation   + Level H- $500,000-$1,000,000 compensation   + Level I- Greater than $1M * Pertains to the individual, not their spouse/partner * Over the last 24 months * Relationships with other societies, management companies, legal proceedings or CME programs that might pose a conflict to your role(s) with ASRA Pain Medicine   **Conflict of interest mitigation and disclosure:**   * If an individual refuse to disclose, they are disqualified from participating * Disclosure information is reviewed, and conflicts of interest mitigated by disclosure and possibly recusing themselves from related discussions and votes. * Disclosure information is made available on the ASRA Pain Medicine website * Individuals are asked to notify ASRA Pain Medicine immediately of any changes to the information disclosed   **Definition of a Commercial Interest (a.k.a. “ineligible company)**  Any entity whose primary business is producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. Additionally, ASRA Pain Medicine will consider contracted services for a commercial interest by a third party (eg consulting for a marketing agency for a commercial interest, legal witness for or against a commercial interest), Clinical services directly to patients are not considered to be commercial interests.  **Definition of a Noncommercial Interest (a.k.a. “eligible company)**  Any entity asserting interest in the regional anesthesia and/or pain arena that may influence/compete/collaborate with ASRA Pain Medicine’s work toward the mission or your role within ASRA Pain Medicine. This may include other medical or healthcare societies, other regional anesthesia or pain meetings, Think Tanks, Legal Expert for a noncommercial interest, and similar relationships.  **Mitigation and Recusal**  For all Board of Directors discussions and decisions must be free from the influence of commercial and noncommercial interests. Leaders must disclose commercial and noncommercial relationships prior to starting the Board discussion on an agenda item. Disclosure will always be recorded in the minutes. Disclosure itself may mitigate the potential conflict. However, when a Director/Officer has a conflict of interest that cannot be mitigated regarding a topic of discussion, he or she must recuse themselves and exit the meeting room for both the topics discussion and any subsequent vote. If there is discussion regarding the nature of the conflict of interest, this must be mitigated by the Board of Directors or appropriate committee prior to addressing the disputed topic. |
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| **Commercial Relationships Disclosure** | | | |
| **Do you have relationships with a commercial interest/ineligible company, as described above?**  No  Yes, please specify below. | | | |
| **Relationship** | | **Company Name(s)**  *Please list one per line.* | **Has/have the Relationship Ended?** |
| Honoraria/Expenses | |  | Yes |
| Consulting/Advisory Board | |  | Yes |
| Speakers Bureau | |  | Yes |
| Legal Expert Witness/Testimony  (for a commercial interest) | |  | Yes |
| Legal Expert Witness/Testimony  (against a commercial interest) | |  | Yes |
| Funded Research (Individual) | |  | Yes |
| Funded Research (Institution)  Research funding from ineligible companies should be disclosed by the principal or named investigator even if that individual’s institution receives the research grant and manages the funds. | |  | Yes |
| Royalties/Patent | |  | Yes |
| Stock Options  Individual stocks and stock options should be disclosed; diversified mutual funds do not need to be disclosed. | |  | Yes |
| Ownership/Employee | |  | Yes |
| Other (in-kind, etc.; specify company, describe) | |  | Yes |
| **Noncommercial Relationships Disclosure** | | | |
| **Do you and/or your spouse/partner have relationships with a noncommercial/eligible company over $1, as described above?**  No  Yes, please specify below. | | | |
| **Relationship** | **Entity Name(s), Role and Financial Value of Relationship Level (see above)** | | |
| Leadership of a medical society |  | | |
| Chair of a medical meeting |  | | |
| Editorial Board of a medical journal |  | | |
| Editor of medical textbook or similar |  | | |
| Legal Expert for noncommercial interest |  | | |
| Other: |  | | |
| Has ASRA Pain Medicine contracted with you or your partner to purchase or lease goods, services, or property, provided use of facilities, property, or services free of charge, or by any action or transaction caused you or your partner to financially benefit? | | | |
| Have you or spouse/partner received gifts, gratuities, favors, personal loans, or anything of value from an outside source, related to your responsibilities? | | | |
| Do you or spouse/partner have or intend to obtain any financial or non-financial interest or benefit (preferential treatment, promotion, non-salaried appointment) which may create an actual, potential, or the appearance of a conflict of interest related to your ASRA Pain Medicine responsibilities? | | | |
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| Your signature below confirms all requirements and that disclosure information is accurate, complete, and may be publicly disclosed for 2024-2025.    ­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_  Name (print) Signature Date | | | |