FACULTY COMPLIANCE AGREEMENT

Activity Title: __________________________________________________________

Activity Date(s): ________________________________________________________

Faculty Name: _________________________________________________________

Title of Presentation(s): ________________________________________________
(Please type or print clearly)

I agree that the content of my presentation(s) does/do not violate any proprietary rights of any other person or entity.

I will:

Comply with the Health Insurance Portability and Accountability Act (HIPAA). Refrain from using names, photographs, or other patient identifiers in educational presentation materials without the patient’s knowledge and written authorization.

Adhere to the following:
- There will not be bias for or against a product, procedure, device or therapy.
- All applicable products, devices, or therapies should be addressed in my presentation to ensure fair and equal balance.
- Classes of drugs and devices will be used rather than individual agents whenever possible.
- Do not refer to trade names of any products unless all products’ trade names are used, in my slides and syllabus materials.
- Generic or non trade names of products will be used in lieu of commercial/brand names.
- A commercial company name/logo will not be on my slides or syllabus material.

When an unlabeled use of a commercial product, or an investigational use not yet approved by the FDA for any purpose, is discussed during an educational activity, disclose that the product is not labeled for the use under discussion or that the product is still investigational and not yet approved by the FDA.

________________________________________________________    ____________________________
Signature       Date

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