

# Accredited Continuing Education Planning Form (2.10)

This typed and completed form is required to be submitted with all applications for accredited continuing education. Applications with missing or incomplete forms will not be considered for accredited continuing education. This must be consistent with final application submitted in the Avera CE Portal. See Appendix B for how to use this information in your application.

Title of Activity (1.10): \_\_\_\_\_

Date of first planning meeting: \_\_\_\_\_

## Mitigation Measures to Resolve Conflict of Interest

**Individual with COI:**

**Select either B or C below.** Use Evaluation of Conflict of Interest Flow Chart to determine appropriate path

**Option B:** Select the applicable exemption(s) below for the employee or owner of an ineligible company

Content is related to basic science research (such as pre-clinical research and drug discovery or the methodologies of research) and they do not make care recommendations.

They are participating as technicians to teach safe and proper use of medical devices and do not recommend whether or when a device is used.

**Option C Mitigation Options**      Date Mitigation Implemented:

**Mitigation steps for Planners/Committee Members**

**Mitigation Steps for Faculty/Others**

Divest the financial relationship

Divest the financial relationship

Recusal from controlling aspects of planning and content with which there is a financial relationship

Peer review of content by persons without relevant financial relationships.  
Peer reviewer:

Peer review of planning decisions by persons without relevant financial relationships  
Peer Reviewer:

Attest that clinical recommendations are evidenced based and free of commercial bias (eg. peer-reviewed literature, adhering to evidence-based practice guidelines) Provide copy of attestation with application

**Note: Presentations with COI will need to be submitted to CE Department**