**Documentation of Verbal Disclosure to Audience**

In accordance with the standards of NMET, all speakers are asked to disclose any real or apparent conflicts of interest, which may have a direct bearing on the subject matter they will be presenting at this program. The NMET also requires disclosure of any commercial support. This document serves as proof of compliance.

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| Date: |       |
|  |
| Title / Topic of Activity: |       |
|  |
| Presenter / Speaker: |       |
|  |
| [ ]  | Presenter / speaker(s) indicated no conflict of interest to disclose. |
| [ ]  | Presenter / speaker(s) indicated their conflict of interests. |
| [ ]  | Presenter / speaker(s) did not discuss trade names or discussed more than one competing trade name. |
| [ ]  | Presenter / speaker(s) did discuss trade names or only one competing trade name. |
| [ ]  | No commercial support was received for this activity or acknowledged. |
| [ ]  | Commercial support was received for this activity and acknowledged. |
|  |
| This information was disclosed in verbal form in compliance with the Accreditation Council for Continuing Medical Education Standards for Commercial Support of Continuing Medical Education. |
|  |
| **Designee Name:** |       | **Organization:** |       |
| **Designee Signature:** |  | **Date:** |       |